

Emergency Operation (EMOP) Cameroon 200127

Emergency food assistance to drought-affected populations and acutely malnourished groups in northern Cameroon

| CAMEROON EMOP 200127 | |
|------------------------------|---|
| Number of beneficiaries | 339,900 |
| Duration of project | 11 months (1 June 2010 – 30 April 2011) |
| Food tonnage | 27,498 mt |
| Cost (United States dollars) | |
| WFP food cost | US\$ 10,636,844 |
| WFP cash/voucher cost | N/A |
| Total cost to WFP | US\$ 26,157,158 |

EXECUTIVE SUMMARY

In 2010, widespread drought struck the entire East Sahel region¹ and also affected the Extreme North region of Cameroon, particularly the Logone-and-Chari division. The drought has contributed to a weakening of the food security status of vulnerable households and created fears of a regional food and nutritional crisis during the lean season.

According to the joint Crop and Food Supply Assessment Mission (CFSAM)², the net cereal deficit in the northern region for 2009-2010 is about 250,000 mt, including 176,000 mt (70 percent of the total deficit) in the Extreme North region. In addition, it is expected that off-season production of local sorghum (or mouskouari) will be reduced because of the lack of surface water.

The significant drop in cereal food production in the Extreme North region, which is already

¹ Northeastern Mali, Niger, Central Chad, northern Cameroon (see map in Annex.)

² The decreases of cereal harvests are respectively 11 percent and 21 percent for the Extreme North region and 9 percent and 14 percent for the North region compared to the five-year average and the last year

suffering from the combined effects of food insecurity, general poverty and critical global chronic and acute malnutrition (GAM) rates, has negatively affected poor households. The food and nutritional situation of vulnerable groups is now expected to deteriorate further during the lean season from May to October 2010.

The joint Government/FAO/WFP assessment of January 2010 has estimated that 214,000 people in the northern areas of the Logone and Chari division (Goulfey, Hile-Alifa, Fotokol, Makary, Blangoua) are affected by the production shortfall and need emergency food assistance during the lean season. An estimated 124,000 children under five and pregnant and lactating women are suffering from acute malnutrition as per UNICEF and MINSANTE (Ministry of Health).

These assessments have confirmed the need for an urgent response to mitigate increasing food insecurity and prevent the deterioration of an already alarming nutritional situation in the North and Extreme North regions of Cameroon. In response to the Government's request for emergency assistance, WFP has taken the lead, in partnership with FAO, UNICEF, Ministry of Health, and Ministry of Agriculture and Rural Development, to respond to the threat of food insecurity and malnutrition in the North and Extreme North regions.

This emergency operation, which responds to the food crisis in northern Cameroon, has the goal of improving food security and nutrition and protecting the livelihoods of people living in the two northernmost regions of Cameroon. Its specific objectives are to:

- Save lives and protect the livelihoods of drought-affected populations through targeted food distributions;
- Reduce the prevalence of acute malnutrition through the treatment of moderately malnourished children aged 6-59 months and pregnant and lactating women through targeted supplementary feeding.

The emergency operation addresses WFP's Strategic Objective 1 (to save lives and protect livelihoods in emergencies) and MDGs 1 (to eradicate extreme poverty and hunger), 4 (to reduce child mortality) and 5 (to improve maternal health).

A joint real-time evaluation of the emergency operation will be undertaken in September/October 2010 to measure the progress made in achieving expected results, to draw lessons and to plan for the phasing out or the continuation of the support started under this emergency operation.

SITUATION ANALYSIS AND SCENARIO

The overall context

1. Cameroon is a least-developed, low-income food deficit country, with a population of 18.7 million³. The country ranks 153rd out of 182 countries in the United Nations Development Programme (UNDP) 2009 Human Development Index. About 40 percent of the rural population lives below the poverty line⁴. Rural poverty ranges from 33 percent in the South region to 56 percent in the Extreme North region.
2. Cameroon enjoys relative stability and prosperity compared to its northern and eastern neighbours (Chad and Central Africa Republic). However, since 2005, several waves of refugees have fled conflict and political instability in Chad and the Central African Republic (CAR) and taken refuge in Cameroon⁵. The country was also affected by strikes by transport workers in February 2008 to protest against rising fuel and food prices, which degenerated into widespread rioting affecting many of Cameroon's main cities⁶.
3. In May 2007, WFP, the Ministry of Agriculture and Rural Development (MINADER) and the National Institute for Statistics (NIS) conducted a Comprehensive Food Security and Vulnerability Analysis (CFSVA)⁷, which indicated that 26 percent of rural households were food insecure. Households in the North and Extreme North regions are particularly vulnerable to food insecurity as they are heavily exposed to climatic hazards, especially low and erratic rainfall⁸. An estimated 4.6 million people live in these regions of which 3.5 million in the Extreme North. Most of the population are farmers and agro-pastoralists.
4. In 2010, the widespread drought in the entire East Sahel region⁹ has also affected the Extreme North region of Cameroon, and particularly the Logone and Chari division, contributing to a weakened food security status of vulnerable households and fears of a regional food and nutritional crisis during the lean season.

The food security and nutrition situation

5. In January 2010, a Crop and Food Supply Assessment Mission (CFSAM) was jointly undertaken at the request of the Government, which was led by the Ministry of Agriculture and Rural Development¹⁰. The Mission estimated that the 2009 cereal harvest in the two regions was 10 percent below the five-year average and 19 percent below the previous year's¹¹ production. The net regional cereal deficit for 2009-2010 is now estimated at about 250,000 mt, including a deficit of 176,000 mt (70 percent of the total deficit) in the Extreme North region. In addition, the off-season production of local sorghum (or Mouskwari) will be reduced because of a lack of surface water. As a result,

³ Annuaire 2008 de l'Institut National de la Statistique (INS)

⁴ Enquête Camerounaise auprès des Ménages (ECAM III), May 2007

⁵ The main city of Logone-and-Chari district (Extreme North region) located near new Ndjamen, Chadian capital.

⁶ The most affected cities were Douala, Yaounde, Bafoussam and Bamenda. The rioters, who looted private businesses and burnt and vandalized government property, were mostly organized by the youth. The unrest was the most serious since the protests that led to the emergence of multiparty politics in the early 1990s. Calm was restored only after the army was called in.

⁷ CFSVA, 2007

⁸ In 2004, these two regions were severely affected by a drought which had required an emergency intervention of WFP Cameroon

⁹ Northeastern Mali, Niger, Central Chad, northern Cameroon (see map in Annex.)

¹⁰ WFP, FAO and /MINADER representatives participated in the CFSAM.

¹¹ The decrease in cereal harvests are respectively 11 percent and 21 percent for the Extreme North and North regions compared to the five-year average, and 9 percent and 14 percent for the Extreme North and North regions compared to the last year.

about 79 percent of the populations of Logone and Chari division are facing food insecurity due to a drop in agricultural production of about more than 58,169 mt, compared to 2008 farming season. In addition, flooded valleys, which serve as watering points for cattle, have dried out earlier than usual. This situation has compromised cattle breeding, an important source of income of the population, thereby increasing their vulnerability¹².

6. The joint CILSS, FEWS NET, WFP markets assessment in the eastern Sahelian basin shows that the regional livestock market is in crisis, which may limit the coping capacity of agro-pastoralist livelihoods in northern Cameroon. In February 2010, the prices of cattle, sheep and goats in the key regional livestock markets in Maiduguri (Nigeria), which influence north Cameroon and Chad, were respectively 25 percent, 40 percent and 33 percent below their levels of February 2009. The price of wheat bran, the main animal feed, has risen by 30 percent over the same period. Livestock sales, a key coping mechanism for the households of northern Cameroon, are therefore less viable than in the past.
7. The significant drop in cereal food production in the Extreme North region, which is already suffering from the cumulative effects of food insecurity, poverty and critical levels of global chronic and acute malnutrition (GAM) rates, will negatively affect poor households. The food and nutritional situation of vulnerable groups during the lean season from May to September 2010, in particular, will be severely affected. Already, from January to October 2009, the Ministry of Public Health registered 8,364 new admissions in different health centres of the two northern regions, including 7,805 children under 5 and pregnant and lactating women in the supplementary feeding centres, as well as 559 children in therapeutic health centres.¹³ The net progress of admissions observed in these areas indicates a degradation of the nutritional situation. As a comparison, health centres located in the Logone and Chari division registered 5,088 new cases from January to October 2009, against 3,446 cases from July to December 2008¹⁴. In April 2009, UNICEF launched a warning of a silent emergency prevailing in northern Cameroon because of the high levels of malnutrition¹⁵.
8. The joint Crop and Food Supply Assessment Mission of January 2010 has also estimated that 214,000 people will be affected in the northern areas of Logone and Chari division (Kousseri, Zina, Logone Birni, Goulfey, Hile-Alifa, Fotokol, Makary, Blangoua) and need emergency food assistance during the lean season.

¹² By district, the fall in production in the most drought-affected districts is estimated by the assessment mission as follows: Hile-Alifa: 14,000 mt, Makary: 14,000 mt, Goulfey: 9,200 mt, Blangoua: 1,150 mt.

¹³ These figures are registered in three health centres in the North (Touboro, Guider and Rey-Bouba) and for the Extreme-North, eight health centres comprising four in Logone-and-Chari division (Kousseri, Goulfey, Mada and Makray) and four in Mayo Danay division (Yagoua, Guere, Kar Hay and Vele). In the SFP, 96 percent of admissions are children under-5, four percent are pregnant and lactating women.

¹⁴ The GAM Monitoring Project of the Ministry of Public Health started in July 2008

¹⁵ Source: UN Integrated Regional Information Networks (IRIN), April 2009. In this warning, UNICEF mentioned that "each year in Cameroon at least 45,000 children die due to malnutrition". According to this paper, the causes of malnutrition in Cameroon are many and varied, and similar to those in many Sahel countries: lack of basic healthcare, food insecurity, poor access to essential child-survival services and poor infant feeding practices. Isolation of these zones is also a contributing factor.

9. The last third Multiple Indicators Cluster Survey (MICS 3), conducted in 2006 in Cameroon¹⁶ indicated that the North and Extreme North regions have the highest rates of global acute malnutrition (GAM) among children under five, with 14.1 percent and 11.7 percent respectively (figure 1), as well as the highest rates of severe acute malnutrition (SAM) at 2.9 and 2.8 percent respectively.

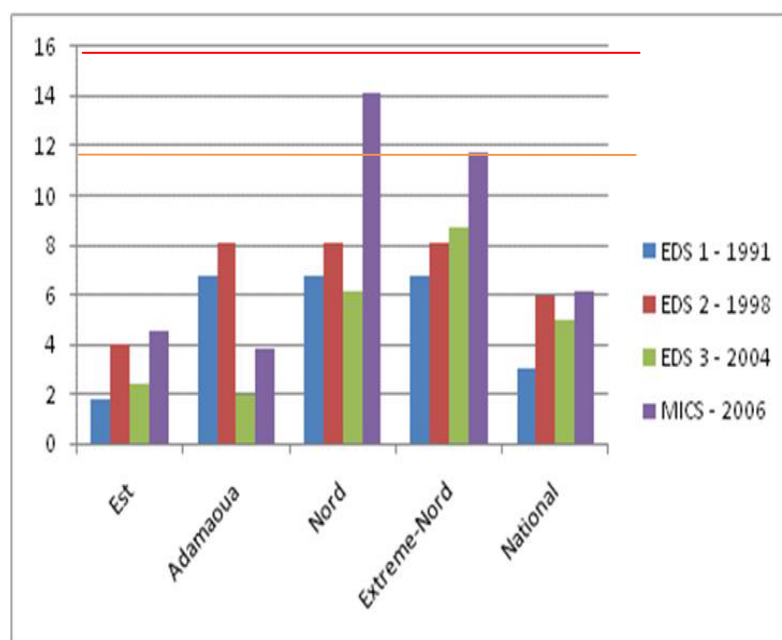


Fig. 1. Evolution of global acute malnutrition rates 1991-2006

| | Acute malnutrition or Wasting | | | Chronic Malnutrition or Stunting | | | Underweight | | |
|---------------|-------------------------------|--------|----------|----------------------------------|--------|----------|-------------|--------|----------|
| | Global | Severe | Moderate | Global | Severe | Moderate | Global | Severe | Moderate |
| North | 14.1 | 2.9 | 11.2 | 43.3 | 21.5 | 21.8 | 35.7 | 14.6 | 21.1 |
| Extreme North | 11.7 | 2.8 | 8.9 | 35.7 | 16.2 | 19.5 | 36.4 | 1.1 | 25.4 |

10. Demographic and Health Surveys (DHS) undertaken in 1991, 1998 and 2004 also indicate an increasing rate of global chronic malnutrition or stunting (height-for-age) among children under five: 23 percent in 1991, 29 percent in 1998, and up to 32 percent (2004) of which 13 percent was severe chronic malnutrition. The rates of global stunting in the North and Extreme North regions, which were 44.4 and 36.9 percent respectively in 2004 remained relatively unchanged in 2006 at 43.3 percent in the North and 35.7 percent in the Extreme North, both exceeding the national average of 30.4¹⁷ (MICS 2006).

¹⁶ Monitoring the situation of children and women. Principal MICS 3 Report 2006. Cameroon Ministry of Public Health (MINSANTE), UNICEF and INS. December 2006.

¹⁷ MIC3, 2006

| | | | | | | | | | |
|----------|-----|-----|-----|------|------|------|------|-----|------|
| Cameroon | 6.1 | 1.2 | 4.9 | 30.4 | 12.6 | 17.4 | 19.3 | 5.2 | 14.1 |
|----------|-----|-----|-----|------|------|------|------|-----|------|

Table 1. Malnutrition rates in the northern regions in Cameroon

Source: MICS 2006

11. The severe forms of all three malnutrition indicators follow the same pattern as the moderate forms, with the highest prevalence rates in the northern regions (Table 1). All nutritional indicators for these vulnerable groups are above the “serious” threshold, with some surpassing the “critical” threshold. Considering the already-precarious nutritional context in these areas and the current food security and nutritional crisis in the East Sahel, these trends will likely worsen as the 2010 lean season progresses in the North and Extreme North regions.
12. Poor feeding practices are likely to be among the main causes of stunting and acute malnutrition in Cameroon. Indeed, while breastfeeding is widely practiced with 98.1 percent of women reporting having breastfed their newborn, only 21 percent of children were exclusively breastfed for the recommended period of five months as per national and international recommendations (MICS 2006).
13. According to the 2004 Demographic and Health Survey (DHS), malnutrition rates among pregnant and lactating women (PLW) are among the highest in the North and Extreme North regions: 8.1 and 17.2 percent of PLW are thin (BMI <18.5) as compared with a national average of 6.7 percent. The situation is of concern, particularly in the Extreme North, due to the low birth weight (LBW¹⁸) data reported in MICS 3; the Extreme North (16.6 percent) and North (14.3 percent) had LBW rates above the national average of 10.8 percent. Furthermore, the LBW rate in the Extreme North exceeds the 15 percent cut-off point, which is the internationally agreed threshold for triggering urgent population-wide interventions.
14. Iron deficiency anaemia is common among women and the children in Cameroon. It affects 68 percent of children under five years and 45 percent of women of childbearing age. In the Extreme North, the prevalence of anaemia among children under 5 reaches 74.9 percent.
15. The WFP/MINSANTE/UNICEF joint mission conducted in July 2009 estimated that 107,000 beneficiaries, comprising 79,000 moderately acute malnourished children under 5 and 28,000 malnourished pregnant and lactating women, are in need of nutritional assistance through supplementary feeding programmes. Recent data indicates that this number has risen to 124,000 malnourished children and women in need of support.
16. The assessments have confirmed that an urgent response is required to mitigate increasing food insecurity and prevent the deterioration of an already alarming nutritional situation in the North and Extreme North regions of Cameroon. In response

¹⁸ LBW, defined as weight at birth less than the standard of 2500 grams, is an indicator of maternal health, nutrition, and of genetic stature, as well as a proxy measure of the newborn’s chance of survival. LBW>15 percent of the standard is the internationally agreed upon cut-off point for triggering urgent population-wide interventions.

to the Government's request for emergency assistance to tackle the crisis, WFP has taken the lead, in partnership with FAO, UNICEF, MINSANTE, and MINADER, to respond to the threat of food insecurity and the malnutrition in the North and Extreme North regions.

Scenario

17. The next harvests in the North and Extreme North regions will be in October/November 2010. In the context of a precarious nutritional situation, and with the lean season to start in May, the EMOP will reduce malnutrition among children under 5 and pregnant and lactating women. Support to drought-affected farmers in Logone and Chari will ensure that livelihoods are protected and that there is a continued engagement of the vulnerable in farming activities during the 2010 rainy season.

POLICIES, CAPACITIES AND ACTIONS OF THE GOVERNMENT AND OTHERS

18. The Directorate of Surveys and Agricultural Statistics (DESA), the National Early Warning Unit (CIAR) and the Cereals Authority are the main food security actors within the MINADER. These structures, which are responsible for assessment, monitoring and evaluation, as well as response to emergency crises, are also operational in the northern regions¹⁹. The CIAR and the Cereals Authority are directly involved in food security monitoring and the response to sudden crises, although insufficient resources and a poor policy framework limit their actions. The DESA and NIS were fully involved in the CFSVA and in the High Food Price Impact Assessment undertaken in partnership with MINADER in 2007 and 2008. These structures will support the Government's monitoring of the emergency operation and upcoming assessments.
19. The Government does not have the capacity to tackle the present crisis. The Cereals Authority, which would normally manage a minimum annual stock of cereals (3,000-4,000 mt) for rapid intervention in the event of a food crisis, has only about 400 mt of cereals in its warehouses and will have difficulty in responding to local crises. In response to the crisis in Logone-and-Chari division, the Government is planning to sell subsidized food on the Kousseri market. However, it is likely that the most vulnerable families and drought-affected people will be unable to afford to buy supplies on the market.
20. The National Food and Nutrition Policy of the Ministry of Health (MINSANTE) has nine components to address malnutrition in Cameroon.²⁰ However, implementation is constrained by the lack of material/equipment, qualified staff and necessary inputs. The

¹⁹ Supported by FAO and bilateral donors, a National Food Security Programme (PNSA) is prepared by the MINADER for outlining the food security policy in Cameroon. The PNSA is not yet operational.

²⁰ National Food and Nutrition Policy. Ministry of Public Health. Cameroon. 2008. The policy is implemented through a National Nutrition Programme comprising the following nine components: (1) Promotion of breast-feeding; (2) Fight against malnutrition; (3) Fight against micronutrients deficiencies; (4) Prevention and management of non-communicable diseases related to nutrition; (5) Nutritional support to vulnerable and socioeconomically underprivileged groups; (6) Nutritional support to people living with HIV/AIDS; (7) Promotion of food safety; (8) Food security and training; and (9) Recruitment of nutrition professionals.

MINSANTE manages more than 480 health structures²¹ in the North and Extreme North regions, including 102 Supplementary Feeding Centres (35 in the North and 67 in the Extreme North) and 10 Therapeutic Feeding Centres (3 in the North and 7 in the Extreme North). Many of these centres are not fully operational and have limited capacity to respond to needs. Only three Health Districts²² out of 14 in the North, and eight out of 28 in the Extreme North, have some capacity to treat GAM.

21. In 2010, the Ministry of Economy, Planning and Regional Development (MINEPAT) will pilot a joint MICS/DHS assessment to update multi-sectoral health and nutritional data in Cameroon. For 2010, the Ministry of Agriculture and Rural Development and the Ministry of Social Affairs will supervise a new CFSVA exercise. The results of these two key assessments will provide updated information to the Government, donors and technical partners and support the planning and implementation of programmes in the areas of food security, health and nutrition.

Policies, capacities and actions of other major actors

22. In response to the alarming nutritional situation in the North and Extreme North, UNICEF is currently providing capacity development, technical and material support to the Government to manage acute malnutrition among targeted groups (children aged 6-59 months). In 2009, this support allowed for assistance to some 9,234 children suffering from moderate and severe acute malnutrition.
23. Helen Keller International (HKI) is present in Cameroon since 1992. Its interventions cover different regions including the East, the Centre and the Extreme North. HKI programmes include vitamin A supplementation, child survival-related interventions, food fortification, Essential Nutrition Action and other health activities. HKI, which has a sub-office in Maroua (Extreme North region), has been identified as WFP's operational cooperating partner for the Extreme North. HKI, has extensive knowledge of the health and nutritional situation in the norther regions accumulated over many years. UNICEF, HKI and the Government have already implemented an Essential Nutrition Action in seven districts of the Extreme North region since mid-2008.

Coordination

24. The EMOP will support the WFP response in coordination with MINADER, MINSANTE, UNICEF and cooperating partners, such as HKI. Monthly coordination meetings will be organized at the field level between local authorities, delegates of different ministries, the local Management Committee of FAO/WFP projects, WFP and UNICEF sub-offices in Garoua and Ngaoundere and cooperating partners. In Yaounde, monthly high-level coordination meetings will be held between programme and management staff to follow up on implementation and provide guidance to field actions.

²¹ This infrastructure is composed of hospitals, public and private health centres at different decentralized levels: region, division, district

²² District de Santé in French

25. WFP is already implementing a country programme for its development activities in Adamaoua, North and Extreme North regions, which is in line with United Nations Development Assistance Framework (UNDAF) 2008-2012. The EMOP will build on existing coordination mechanisms for these programmes involving the agencies of the United Nations Country Team (UNCT), MINEPAT, MINSANTE and MINADER.

OBJECTIVES OF WFP ASSISTANCE

26. The overall goal of the EMOP is to reduce malnutrition, improve food security and protect the livelihoods of people living in the two most vulnerable northern regions in Cameroon.

27. The specific objectives of the EMOP are to:

- Save lives and protect livelihoods of drought-affected populations through targeted food distributions (SO1);
- Reduce prevalence of acute malnutrition through the treatment of moderately malnourished children aged 6-59 months and pregnant and lactating women through a targeted supplementary feeding programme (SO1);

28. The objectives of the emergency operation are in line with WFP Strategic Objective (SO) 1 (save lives and protect livelihoods in emergencies) and MDGs 1 (to eradicate extreme poverty and hunger), 4 (to reduce child mortality) and 5 (to improve maternal health).

BENEFICIARIES AND TARGETING

29. Table 3 below shows the number of beneficiaries targeted through this EMOP.

| TABLE 3. BENEFICIARIES BY ACTIVITY TYPE | |
|--|----------------------|
| | Beneficiaries |

| Activity | Male | Female | Total |
|---|----------------|----------------|----------------|
| Targeted food distribution (TFD) | 108,400 | 107,600 | 216,000 |
| Targeted supplementary feeding for moderately malnourished children 6-59 months | 42,100 | 40,500 | 82,600 |
| Targeted supplementary feeding for moderately malnourished pregnant and lactating women | 0 | 41,300 | 41,300 |
| Total | 150,500 | 189,400 | 339,900 |

30. WFP will target some 216,000 drought- affected people in the northern part of Logone and Chari division through targeted food distributions (TFD), taking into account updated population figures from National Institute of Statistics (INS). Assistance to drought-affected people will be provided over the May to October 2010 lean season.
31. The targeted food distributions in the Logone and Chari division will assist households directly affected by crop, livestock and income losses. According to the 2007 CFSVA, the most food-insecure groups are agro-pastoralists, pastoralists and daily wage labourers. Female-headed households will also be receiving special consideration as a vulnerable group. WFP will work through local emergency committees to identify all affected households in each village. The committees involve traditional and administrative authorities and representatives of Ministry of Social Affairs and Village Development Committees and use a community-based approach to register and benefit the most vulnerable households.
32. The joint WFP/UNICEF/MINSANTE nutrition mission of July 2009 estimated that 107,000 children aged 6-59 months and pregnant and lactating women were in need of assistance through supplementary feeding. The figure of 123,900 beneficiaries (42,100 young boys and 81,800 females) under the emergency operation takes into account updated data from the MINSANTE on the number of the people among the target groups who are suffering from acute malnutrition. Given the persistent high rates of malnutrition before the current crisis, and the complex situation in northern areas (the burden of refugees on the local population, vulnerability to drought, and poor food access) and this year's crop failure, there is a need to continue supplementary feeding programme in the North and Extreme North regions over the 11 month period of the emergency operation from May 2010 to April 2011.
33. The targeted supplementary feeding will be provided to children aged between 6 to 59 months suffering from moderate acute malnutrition (MAM), in line with the National Protocol for the Treatment of Malnutrition²³. All severely malnourished children

²³ According to the National Protocol for the treatment of malnutrition in Cameroon, children are admitted to the SFP if they have MUAC = 110 mm and < 125 mm; median weight-for-height = 70% and < 80%; have been discharged from the TFP; and have a medical complication or oedema. They are discharged from the SFP when they: are more than 85% of median weight-for-height for two consecutive visits (after 2 weeks per visit) in the CNS programme (for MUAC admissions a fixed length of stay may be required, as for the TFP); have been absent for more than three consecutive distributions (or visits) in

discharged from Inpatient Therapeutic Feeding Centres or from Outpatient Therapeutic Feeding Centres supported by UNICEF will also benefit from the WFP assistance. The beneficiaries of supplementary feeding will be identified by staff from the Ministry of Public Health. UNICEF is currently supporting 75 and 39 supplementary and therapeutic feeding centres (CNS/CNT) respectively in the Extreme North and the North regions. The EMOP will cover all health centres from the two regions and target all moderately malnourished children, including those activities (treatment of moderate malnutrition) previously undertaken by UNICEF.

34. WFP will collaborate with FAO, UNICEF, HKI and the Government (MINADER, MINSANTE) to conduct an updated food security assessment over the course of 2010 to determine any changes in the number of people in need of food assistance and to refine targeting criteria at the household level. A nutrition survey (using the SMART methodology²⁴) is planned to take place at the beginning of the operation, in partnership with UNICEF and MINSANTE, to provide updated baseline data and allow for adjusting of the planned activities if necessary.

NUTRITIONAL CONSIDERATIONS AND RATIONS

35. The choice of commodities is based on food consumption habits in northern Cameroon. The staple food in the North and Extreme North consists of millet and sorghum. As presented in Table 3, the TFD rations, which include cereals (sorghum/millet/maize), pulses, fortified vegetable oil and salt, are designed to meet the recommended daily caloric intake of about 2,100 kcal. The family rations will be distributed on a monthly basis.

| Commodity Type/ Cash & voucher | TFD | SFP-(children 6 - 59 months) | SFP-(Pregnant & Lactating Women) |
|---|------------|---|---|
| Cereal | 450 | | |
| Pulses | 75 | | |
| Vegetable Oil | 25 | 20 | 20 |
| Salt | 5 | | |
| CSB+ | | 200 | 200 |
| Sugar | | 20 | 20 |

CNS; have to be transferred to the TFP with MUAC <110 mm, less than 70% of the median weight for height or on developing oedema; have to be transferred to a stabilization centre or hospital due to severe medical complications; are not responding, i.e. the child does not reach the target weight after four months of treatment and/or after being discharged from the TFP, have received at least two months follow up in the SFP and have been more than 85% of the median weight-for-height for two consecutive distributions. The pregnant women are admitted to the SFP if they have MUAC <210 mm and are in their second or third trimester (visibly pregnant); or for lactating women have MUAC <210 mm and the baby is under six months of age. They are discharged from SFP when they have MUAC = 230 mm or when their baby reaches six months of age.

²⁴ SMART : Standardized Monitoring and Assessment of Relief and Transitions

| | | | |
|-----------------------|--------------|--------------|--------------|
| Total | 555 | 240 | 240 |
| Total kcal/day | | | |
| % Kcal from protein | | | |
| % Kcal from fat | 2,120 | 1,057 | 1,057 |

36. The supplementary feeding ration, which is composed of corn-soya blend (CSB+), sugar and fortified vegetable oil, is designed to provide about 1,000 kcal per person per day. Distributions for supplementary feeding will be conducted in the form of dry rations every two weeks.
37. Table 5 shows the daily food requirements and the total food needs for the EMOP by activity. A total 27,498 mt of various commodities will be needed to respond adequately to the food crisis.

| Commodity | TFD | SFP(children under-5) | SFP-(Pregnant & Lactating Women) |
|------------------|---------------|------------------------------|---|
| Cereal | 14,580 | | |
| Pulses | 2,430 | | |
| Vegetable Oil | 810 | 520 | 273 |
| Salt | 162 | | |
| CSB+ | | 5,204 | 2,726 |
| Sugar | | 520 | 273 |
| Total | 17,982 | 6,244 | 3,272 |

IMPLEMENTATION ARRANGEMENTS

38. Participation: Village development committees (VDC) are operational in all drought-affected areas, and women are active participants in these committees²⁵. WFP will ensure that women represent at least 50 percent of the membership of these committees and hold a minimum of 50 percent of executive decision-making positions. Wherever possible women will be registered as food entitlement holders and will either collect the family ration or designate another person to do so. Local authorities will be responsible for security arrangements during food distributions.

²⁵ The committees' mandate is to manage different development activities including micro-credit support, income-generating activities, management of WFP community-granaries, etc.

39. Partnerships: WFP's cooperating partner for targeted food distributions will be GIE ADERSA²⁶, which already has extensive experience working with WFP in emergency food distributions. In addition, WFP will work with the Ministry of Social Affairs and VDCs to ensure that the most vulnerable households benefit from the targeted food distributions. Supplementary feeding will be implemented in partnership with the MINSANTE and UNICEF. WFP and UNICEF will also join forces to bolster the capacities of counterparts, including through an expansion of training of health staff in all health centres that did not benefit from earlier support from UNICEF and the Government. HKI will act as cooperating partner for supplementary feeding, in close collaboration with the staff of targeted health centres. Community-based organizations including women associations, Common Initiative Groups, VDCs and traditional leaders will be involved in the management of food distributions. Information and training will also be provided to improve knowledge and skills at the community level. Special attention will be given to women who will be provided with information and training in the health centres and at village level.
40. Procurement: International purchases will be the main source of food for the EMOP. However, subject to availability and competitive prices, about 5 percent of cereal requirements will be purchased in-country, preferably in the western regions.
41. Logistics and transport: Douala is the port of entry for all cargo imported into Cameroon. Food discharged from vessels will be moved by rail to Ngaoundere and loaded on trucks for direct delivery to Extended Delivery Points (EDP) in Garoua and Maroua. Kousseri will be a Final Delivery Point for TFD from where the implementing partner will take delivery of commodities for transport to distribution sites. WFP will directly supply the different health centers (CNS) on a monthly basis for supplementary feeding. For local and regional purchases (in neighboring Nigeria if required), WFP will mobilize trucks at the suppliers' warehouses for direct transport to the EDPs.
42. WFP has a logistic hub in Ngaoundere for the transit of food to Chad, CAR and for development operations in the northern regions of Cameroon. If needed, food commodities will be loaned from these other operations in order to respond the immediate needs of this emergency operation. Early contributions will be required for this emergency operation in order to purchase and import food by June 2010 and to transport food to extended delivery points.
43. Taking into account the poor state of roads in the area of operations, 10 - 20 mt trucks will be mobilised from the private sector for secondary transport from the EDP to distribution sites throughout the Logone-and-Chari Division.

PERFORMANCE MONITORING

44. The EMOP includes funds needed for additional food security and nutritional assessments as well as to strengthen the nutrition and food security surveillance system.

²⁶ Groupement d'Intérêt Economique (GIE) Action pour le Développement Rural du Sahel (ADERSA)

These exercises will contribute to the setting up of a baseline for the monitoring of key indicators for the operation.

45. WFP will have overall responsibility for technical support for supplementary feeding activities and the monitoring of the operation. The country office will reinforce its capacities by recruiting an international nutritionist to coordinate nutrition activities and a national programme assistant for nutrition. In addition, more food aid monitors will be recruited to strengthen monitoring capacity. WFP staff will work closely with MINSANTE, UNICEF and HKI partners to monitor nutrition activities. HKI will provide technical support, monitor the nutritional and food security system, as well as collect, analyze and disseminate data.
46. WFP, UNICEF, HKI, MINADER and MINSANTE will conduct a joint real-time evaluation of the operation in September/October 2010 to measure the progress made in achieving expected results, draw lessons for future interventions and plan for the phasing out or the continuation of the support started under this EMOP.

HANDOVER STRATEGY

47. The bulk of assistance will be in the form of humanitarian relief. The EMOP activities will be designed in consultation with government and NGO partners using a community-based approach. WFP will work with these partners to include suitable plans for hand-over arrangements with stakeholders. In October 2010, after the crop harvest, a re-assessment will be undertaken to review the targeted food distribution component of the operation and to consider the extent of recovery and to review the need for any follow up activities.
48. The nutritional situation in the northern regions of Cameroon is compounded by structural factors. The provision of nutritional support by WFP will cease once adequate nutritional safety nets are put in place by the Government and/or acute malnutrition rates are stabilized (below the rate of 8 percent for GAM in intervention areas). With support from UNICEF and HKI, and in partnership with MINSANTE, WFP will strengthen the nutrition capacity of health workers from targeted health centres and local community health workers in the two target regions. The various training modules for community-based management of acute malnutrition (in line with the National Protocol) will cover the screening for malnutrition, monitoring and treatment of acute malnutrition among children under 5 and pregnant and lactating women and essential measures to prevent malnutrition.

HAZARD / RISK ASSESSMENT AND PREPAREDNESS PLANNING

Hazard and Risk assessment

49. The socio-political context in Chad is fragile. A departure of the MINURCAT Forces from that country could increase the risk of insecurity along the border between Chad

and Sudan. Population movements could also affect northern Cameroon and therefore destabilize livelihoods, including the food and nutritional situation of the local population. A further risk is crop failure during the upcoming rainy season, which could result in a further deterioration of the food security and nutritional situation of vulnerable groups, including the food insecure and poorest people, children under 5 and pregnant and lactating women.

Preparedness Planning

50. The existing country-specific contingency plan will be updated in May 2010 to take into account the potential risks of an influx of refugees from Chad, and crop failure during the 2010 agricultural season in the northern regions. The UNCT will also put in place a Humanitarian Coordination Team (HCT) to support the coordination of emergency activities in Cameroon. In addition to UN agencies, other partners will be closely involved in these coordination measures. Systematic monitoring and assessment will inform project management in a timely manner in the event of potential changes in the situation. MINADER, MINSANTE, WFP, UNICEF and cooperating partners will also collect data and information as specified in the log frame to inform management and the HCT on any follow-up to the emergency operation.

SECURITY CONSIDERATIONS

51. Northern Cameroon is classified by the UN Security Management Team (SMT) as security phase II. UN staff movement is undertaken with military escorts provided by government security forces. In line with WFP procedures, all infrastructure and vehicles in the North and Extreme North regions are MOSS compliant.

RECOMMENDATION

52. The Executive Director and Director-General of FAO are requested to approve the proposed emergency operation Cameroon 200127.

APPROVAL

.....
Josette Sheeran
Executive Director

.....
Jacques Diouf
Director-General of FAO

Date:

Date:.....

ANNEX IA: WFP PROJECT COST BREAKDOWN

| Commodity Related Portion | | | Cash & Voucher Transfer | Total Project |
|--|---------------|-------------------|-------------------------|-------------------|
| COSTS | Tonnage (mt) | Value (US\$) | Value (US\$) | Value (US\$) |
| Commodity / Cash & voucher | | | | |
| Cereals ²⁷ | 14,580 | 3,670,515 | | 3,670,515 |
| Pulses | 2,430 | 972,000 | | 972,000 |
| Oil and Fats | 1,603 | 1,506,820 | | 1,506,820 |
| Mixed and Blended Food | 7,930 | 3,885,700 | | 3,885,700 |
| Others | 955 | 601,809 | | 601,809 |
| Cash Transfer to beneficiaries | | | | |
| Voucher Transfer to beneficiaries | | | | |
| | | | | |
| Total commodity / Cash & voucher | 27,498 | | | 10,636,844 |
| External transport | | | | |
| | | 2,078,086 | | 2,078,086 |
| LTSH | | | | |
| | | 8,498,256 | | 8,498,256 |
| ODOC (Other direct operational costs) | | | | |
| | | 1,118,716 | | 1,118,716 |
| DSC (Direct support costs)²⁸ (see table below for details) | | | | |
| | | 2,144,040 | | 2,114,040 |
| Total WFP direct costs | | | | |
| | | 24,445,942 | | 24,445,942 |
| Indirect support costs (7%)²⁹ | | | | |
| | | 1,711,216 | | 1,711,216 |
| TOTAL WFP COSTS | | | | |
| | | | | 26,157,158 |

ANNEX IB

²⁷ This is a notional food basket for budgeting and approval. The contents may vary.

²⁸ Indicative figure for information purposes. The direct support costs allotment is reviewed annually.

²⁹ The indirect support costs rate may be amended by the Board during the project.

DIRECT SUPPORT REQUIREMENTS (US\$)

| Staff and Staff Related Costs | |
|---------------------------------------|------------------|
| International Professional Staff | 640,517 |
| International GS Staff | - |
| Local Staff - National Officers | 82,250 |
| Local Staff - General Service | 407,322 |
| Local Staff - Temporary assistance | 53,550 |
| Local Staff - Overtime | 9,000 |
| Hazard Pay & Hardship Allowance | |
| International Consultants | 40,500 |
| Local Consultants | - |
| Non Staff HR: UNV | - |
| Commercial Consultancy Services | - |
| Staff duty travel | 215,800 |
| Subtotal | 1,448,939 |
| Recurring Expenses | |
| Rental of Facility | 18,800 |
| Utilities General | 47,000 |
| Office Supplies and Other Consumables | 31,000 |
| Communications and IT Services | 73,500 |
| Equipment Repair and Maintenance | 54,000 |
| Vehicle Running Cost and Maintenance | 38,500 |
| Office Set-up and Repairs | 92,000 |
| UN Organization Services | 10,500 |
| Subtotal | 365,300 |
| Equipment and Capital Costs | |
| Vehicle leasing | 40,800 |
| TC/IT Equipment | 111,000 |
| Local Security Costs | 148,000 |
| Subtotal | 299,800 |
| TOTAL DIRECT SUPPORT COSTS | 2,144,040 |

ANNEX II - LOGICAL FRAMEWORK SUMMARY CMR EMOP 200127

Emergency Food assistance to drought-affected population and acute malnourished groups in northern Cameroon

| Results-Chain (Logic Model) | Performance Indicators | Risks, Assumptions |
|---|---|--|
| SO 1: Save lives and protect livelihoods of drought-affected populations in emergency | | |
| <p>Outcome 1 1.1 Reduce prevalence of acute malnutrition through the treatment of moderately malnourished children aged 6-59 months and pregnant and lactating women through a targeted supplementary feeding programme.</p> | <ul style="list-style-type: none"> • Prevalence of acute malnutrition among children under 5 in Far North and North regions in particularly in Logone-and-Chari division (Kousseri, Zina, Logone Birni, Goulfey, Hile-Alifa, Fotokol, Makary, Blangoua) Target: Reduction of GAM (target: < 5%) to achieve by the end of project. • Recovery rate among beneficiaries of Supplementary Feeding programmes (target: above 80%) • Defaulter rate among Supplementary Feeding programme beneficiaries (target: below 10%) • Mortality rate among beneficiaries admitted to Supplementary Feeding programmes (target: above 70%) • Average Length of stay in supplementary feeding centres (less than three months) | <ul style="list-style-type: none"> • Government, other United Nations agencies and partner organizations respect their commitments and achieve planned results • Weak capacity of cooperating partners in intensively TFD • The weak of decentralised services of the Ministry of Health in Nutrition Programmes. |

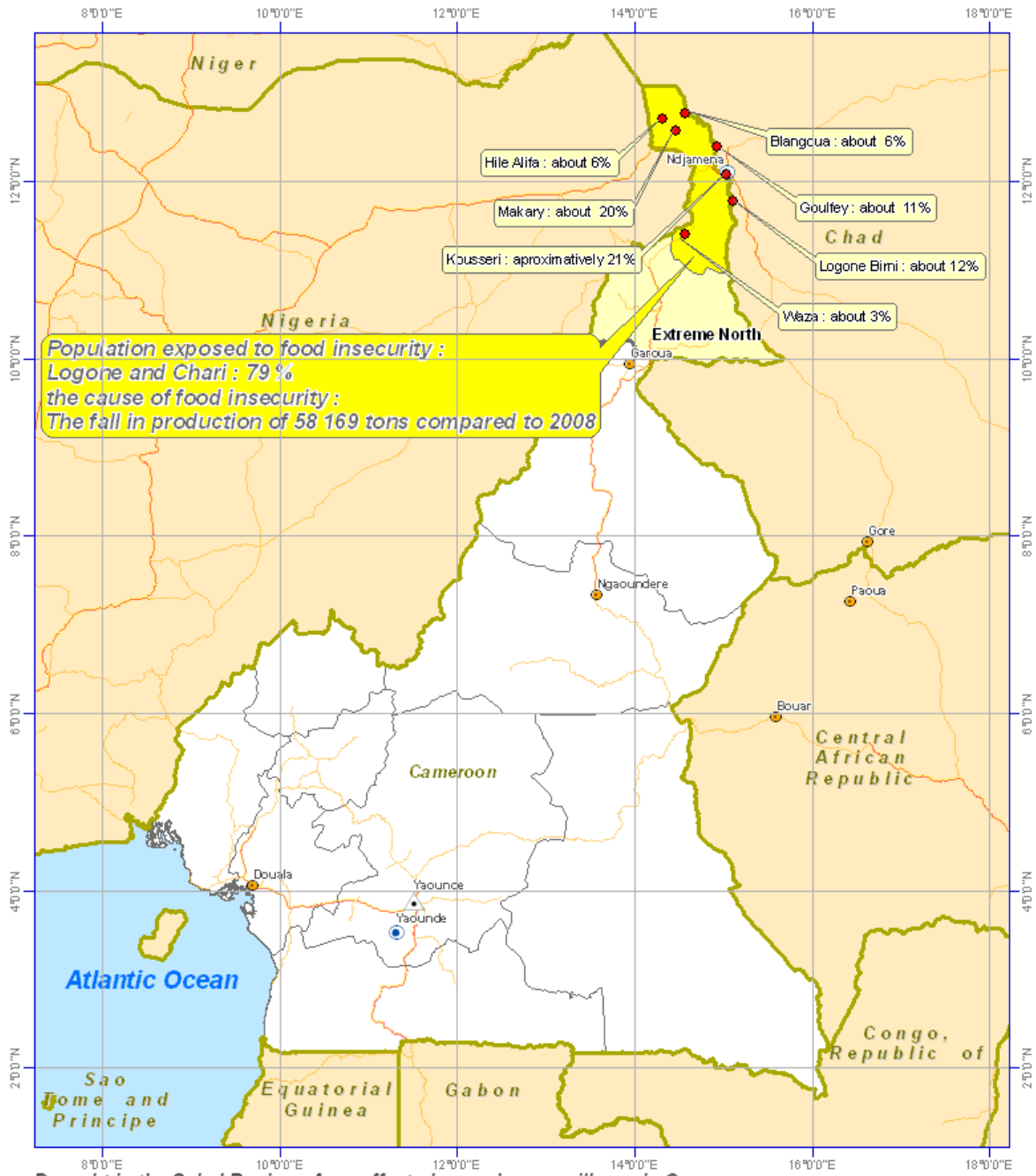
| | | |
|---|---|--|
| <p>Output 1.1 1.1.1 TFD and blanket feeding rations are distributed in sufficient quantity and quality in an timely to drought-affected households in targeted areas.</p> <p>1.1.2 Food is timely provided in sufficient quantity and quality to beneficiaries of supplementary feeding programme</p> | <ul style="list-style-type: none"> • Number of beneficiaries received WFP food assistance expressed as a percentage of planned beneficiaries (by activity category, by age groups, and by gender) • Total quantity of food distributed through each activity as a percentage of planned tonnage (by commodity types) • Number of malnourished children assisted through supplementary feeding programme a percentage of planned number of beneficiaries (by sex and by age group) • Total quantity of food distributed through supplementary feeding centres as a percentage of planned tonnage by type of commodity • Number of supplementary centres jointly supported by WFP, UNICEF and MINSANTE as a percentage of planned number of centres per region. • Percentage of food deliveries to supplementary centres done on time (i.e. not later than 5 days from the planned date of deliveries) target: > 80% | <ul style="list-style-type: none"> • Other basic needs such as health, and education protection, etc. are provided by the Government, other UN agencies and NGOs. • Difficulties of food delivery during raining season. • Timely contribution of funds and commodities is secured. |
|---|---|--|

ANNEX III - LIST OF ACRONYMS

| | |
|-----------------|---|
| ADERSA | Action pour le Développement Rural du Sahel (Implementing Partner) |
| BMI | Body Mass Index |
| CFSAM | Crop and Food Supply Assessment Mission |
| CFSVA | Comprehensive Food Security and Vulnerability Assessment |
| CAR | Central African Republic |
| CNS/CNT | supplementary and therapeutic feeding centers |
| CSB+ | Corn-Soya blend plus |
| CIAR | National Early Warning Unit |
| GIE | Common Initiative Group |
| DOC | direct operational cost |
| DSC | direct support cost |
| DESA | the Directory of Surveys and Agricultural Statistics |
| DHS | Demographic and Health Survey |
| EDP | extended delivery point |
| EMOP | Emergency Operation |
| GAM | Global Acute Malnutrition |
| TFD | Targeted Food Distribution |
| FAO | Food and Agriculture Organization |
| FFW | Food for Work |
| ISC | indirect support cost |
| INS | National Institute of Statistics) |
| HCT | Humanitarian Coordination Team |
| HKI | Helen Keller International |
| LTSH | Landside Transport, Storage and Handling |
| LBW | Low Birth Weight |
| M&E | monitoring and evaluation |
| MINSANTE | Ministry of Public Health |
| MINADER | Ministry of Agriculture and Rural Development |
| MINEPAT | Ministry of Economy and Planning |
| MOSS | Minimum Operating Security Standards |
| MISTS | minimum Security Telecommunications Standards |
| MICS | Multiple Indicators Cluster Survey |
| MAM | Moderate Acute Malnutrition |
| MT | metric tones |

| | |
|---------------|--|
| NGO | Non Governmental Organization |
| ODOC | other direct operational cost |
| PLW | pregnant and lactating women |
| SFP | Supplementary Feeding Programme |
| SMT | Security Management Team |
| SAM | Severe acute malnutrition |
| SO | Strategic Objective |
| UNDAF | United Nations Development Assistance Framework |
| UNICEF | United Nations Children’s Fund |
| UNHCR | United Nation High Commission for Refugees |
| UNDP | United Nations Development Programme |
| UNCT | United Nation Country Team |
| UN | United Nations |
| VDC | Village development committees |
| VAM | Vulnerability Assessment Mapping |
| WHO | World Health Organization |
| WFP | World Food Programme |

ANNEX IV – MAP



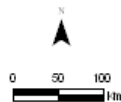
Drought in the Sahel Region : Area affected or under surveillance in Cameroon

Projection : UTM
 Datum: WGS 1984
 Prime Meridian: 0
 Angular Unit: Degree



The names and boundaries on this map do not imply acceptance or recognition by the United Nations.

Sources : Global Discovery Europa Technologies LTD 2000, 2001, ESRI 2002



- | | |
|---------------------|----------------------|
| WFP Offices | Area affected |
| ● Country Office | ● Area affected |
| ● Field-Office | ■ Logone and Chari |
| ▲ Regional Bureau | ■ Extreme North |
| ● Sub-Office | Borders |
| Road network | ■ National borders |
| — Main roads | □ Cameroon (Admin1) |
| — Secondary roads | |



