

PROTRACTED RELIEF AND RECOVERY OPERATION CENTRAL AFRICAN REPUBLIC 200315

Assistance to Conflict-Affected Populations in the Central African Republic	
Number of beneficiaries	258,000
Duration of project	24 months (January 2012 – December 2013)
WFP food tonnage	20,628 mt
Cost (United States dollars)	
WFP food cost	US\$11,889,694
WFP cash/voucher cost	0
Total cost to WFP	US\$36,062,264

EXECUTIVE SUMMARY

Despite its considerable potential, the Central African Republic is one of the world's poorest countries, ranking 179 out of 187 countries on the 2011 human development index. Socio-political instability stemming from a series of *coups d'état* and armed conflicts since the 1990s has caused large-scale displacement of people and has impeded the country's development. A lack of infrastructure, the degradation and disruption of the education and health systems, and limited government presence in some parts of the country leave the conflict-affected population vulnerable to further shocks.

Although peace accords were signed in 2008, the country's disarmament, demobilization, and reintegration process only started recently, following the conclusion of the peaceful presidential elections in January 2011. Increased stability has since been felt in much of the country, allowing conflict-affected populations to start working towards rebuilding their livelihoods.

There are currently 176,000 internally displaced persons in the country and the Central African Republic hosts 16,000 refugees, mainly from the Democratic Republic of Congo.

The overall objective of this protracted relief and recovery operation is to meet the immediate food needs of populations that continue to feel the impact of conflict, while contributing to peace consolidation through recovery measures targeted to the most vulnerable people in areas where peace has been established. This operation will target six conflict-affected prefectures in the northwest, northeast and southeast of the country.

Under a relief component, WFP will meet the basic food needs of internally displaced persons, refugees, and conflict-affected households, and support supplementary feeding for malnourished children aged 6-59 months, caretakers of severely malnourished children in centres, and malnourished pregnant and lactating women. Under a recovery component, WFP will support vulnerable internally displaced persons, returnees, host communities and ex-combatants to rebuild their livelihoods and strengthen their asset-base for future self-sufficiency. Children affected by the conflict will be encouraged to return to school through the provision of daily school meals. Nutritional support will also be provided to food-insecure people living with HIV and tuberculosis.

This operation is aligned with WFP Strategic Objectives 1 “Save lives and protect livelihoods in emergencies” and 3 “Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations”, and contributes to achieving the Millennium Development Goals 1, 2 3, 4, and 5. It is fully aligned to the national poverty reduction strategy paper, and the Common Humanitarian Action Plan.

SITUATION ANALYSIS AND SCENARIO

The Overall Context

1. The Central African Republic is a landlocked country and sparsely populated with 4.4 million inhabitants.¹ Despite its high agricultural potential and mineral wealth, the country ranks 179 out of 187 in the 2011 human development index.² The main factor impeding development has been socio-political instability, a consequence of recurring *coups d'état* and armed conflicts since the 1990s.
2. Positive steps toward peace consolidation since the signature of the comprehensive peace agreement in 2008 include the start of the disarmament, demobilization and reintegration (DDR) of military-political groups and the peaceful presidential and legislative elections held in early 2011. However, the socio-political context remains complex due to continued internal conflict and violent attacks from actors in neighbouring countries - Chad, the Democratic Republic of Congo (DRC) and the Sudan. The causes and dynamics of the clashes vary by region and have involved government troops, rebel factions, and local self-defence groups.
3. Continued violence has triggered the internal displacement of some 176,000 people over the past five years and forced 130,000 people to seek refuge in southern Chad, eastern Cameroon and the Sudan.³ Internally displaced people are mainly in the prefectures of the northwest, northeast and southeast.
 - In the northwest, 100,000 internally displaced persons (IDPs) are located in the prefectures of Ouham and Ouham-Pendé. Although an extremely fertile zone, formerly referred to as the 'breadbasket' of the Central African Republic, it has suffered from years of intense conflict. The DDR process has begun to make progress in this region, creating the basic conditions for the durable return of IDPs and refugees to their villages and farmland. In October 2011, the Office for the Coordination of Humanitarian Affairs (OCHA) reported that 63,500 IDPs and refugees had returned to their villages in Ouham and Ouham Pendé since the beginning of 2011.⁴ If the DDR process continues as planned, it is expected such voluntary returns will continue.
 - In the northeast, there are occasional attacks from renegade armed groups from Chad, inciting violence among rebel groups, self-defence groups and villages. In the remote and sparsely-populated prefectures of Bamingui-Bangoran, Haute-Kotto and Vakaga, a combination of continued inter-community and inter-ethnic conflict, a weak government presence, and the proliferation of weapons have created a state of perpetual insecurity that has caused internal displacement (29,500 IDPs⁵) and

¹ Demographic projections based on data from the 2003 *General Population and Territorial Census*.

² UNDP. 2011. *Human Development Report 2011*. New York.

³ UNHCR, 2012 *Country operations profile - Central African Republic*: <http://www.unhcr.org/4ec230f8b.html>

⁴ OCHA, October 2011, *Overview of Displacement in the Central African Republic*.

⁵ 14,500 IDPs in Bamingui-Bangoran, 7,000 in Vakaga, and 8,000 in Haute-Kotto (OCHA, October 2011).

limited access for local and international aid organizations. Due to uncontrolled borders with Chad and the Sudan, Vakaga is particularly susceptible to attacks from Chadian rebels and Sudanese bandits, and military authorities have restricted humanitarian access in certain parts of the prefecture.

➤ In the southeast, the violence caused by attacks from the Lord's Resistance Army (LRA) has led to internal displacement (22,500 IDPs) along the border and an influx of refugees (5,350) from the DRC.⁶ Haut-Mbomou and Mbomou prefectures have endured attacks from the LRA since June 2009 and although the frequency has subsided lately, the population remains traumatized and many IDPs are reluctant to return home. Violence in the Darfur region of the Sudan also caused an influx of Sudanese refugees to this area, 2,200 of whom are registered by the Office of the United Nations High Commissioner for Refugees (UNHCR).⁷

4. The Central African Republic hosts 12,650 refugees from DRC, 2,600 from the Sudan and 500 from Chad. Most of these refugees are assisted by UNHCR.
5. Decades of conflict have weakened social indicators and destroyed basic social and economic infrastructure. While 52 percent of the country's rural population is classified as "poor" or "very poor", poverty rates are highest in the conflict-affected areas: 71 percent in Nana-Gribizi, 68 percent in Ouham-Pendé, 59 percent in Haut-Mbomou, and 58 percent in Ouham.⁸
6. Displacement and insecurity have forced many school-age children out of school, and poverty and food insecurity make it difficult for them to return. Access to education in conflict-affected regions is very low: net enrolment levels are only 23 percent in the northeast compared with the national average of 56 percent.⁹ The humanitarian country team estimates that 137,000 children need assistance in the conflict-affected regions.

The Food Security and Nutrition Situation

7. The Central African Republic has 15 million hectares of fertile agricultural land but only 0.7 million hectares are under cultivation. Though the rural sector contributes 55 percent of gross domestic product and employs nearly 70 percent of the workforce, the country context offers limited incentives or guarantees for crop production beyond subsistence needs.
8. A 2011 WFP market assessment confirmed that the agricultural sector is severely limited by structural constraints stemming from long-standing insecurity, inadequate road infrastructure, poor storage practices, a lack of inputs, limited investment, and severely

⁶ 8,500 IDPs in Mbomou; and 14,000 IDPs and 5,350 refugees in Haut-Mbomou (OCHA, October 2011); UNHCR reports that 12,000 refugees are being assisted from DRC as of January 2012.

⁷ UNHCR, *2012 Country operations profile - Central African Republic*: <http://www.unhcr.org/4ec230f8b.html>

⁸ WFP, 2009, *Comprehensive Food Security, Vulnerability and Nutrition Analysis*, Central African Republic.

⁹ Ministry of National Education, 2009, *Biannual school statistics 2006-2007 and 2007-2008*.

underdeveloped and poorly integrated markets.¹⁰ While 64 percent of households use the market as a source of food, the market cannot meet the needs of consumers. In addition to the structural constraints on the agricultural sector, there is a lack of organization and structure among traders, low levels of credit to finance business activities, and a costly and inefficient domestic transportation system.

9. In August 2011, there was a rapid food security assessment (RFSA) by WFP and government counterparts in five of the six prefectures covered by this protracted relief and recovery operation (PRRO), as well as among Congolese and Sudanese refugee households.¹¹ This confirmed that agriculture is the main livelihood activity of the conflict-affected areas, with 64 percent of households involved in land cultivation, most by smallholders cultivating less than 0.4 hectare of land.¹²
10. While the 2009 comprehensive food security, vulnerability and nutrition analysis reported a food insecurity rate of 30 percent country-wide, the 2011 RFSA reports that 35 percent of households in the conflict-affected areas targeted are food-insecure: 30 percent of IDP households (31 percent in the northwest) and 36 percent of resident households (61 percent in the northwest). The high rate of food insecurity among resident households in northwest region is attributed to the lack of targeted assistance this group has received in the recent past. In the southeast, 31 percent of IDPs and 14 percent of residents were found to be food-insecure.
11. Data from the most recent multiple-indicator cluster survey (MICS) in 2010 indicates high malnutrition levels at the national level: prevalence of wasting is 7 percent, stunting is 41 percent, and underweight 23 percent. The survey data has yet to be validated and disaggregated by prefecture, but the previous MICS (2006) reported global acute malnutrition rates among children under 5 as follows: 16 percent in Bamingui-Bangoran, 14 percent in Ouham-Pendé, 11 percent in Nana Gribizi, and 11 percent Haute-Kotto - all above the “serious” threshold defined by World Health Organization (WHO).¹³
12. Recent surveys carried out jointly by the Government, United Nations agencies and non-governmental organizations (NGOs) indicate that high malnutrition rates are linked to insufficient access to high-quality diversified food; poor childcare practices; inadequate access to healthcare services; repeated illness; limited access to safe water, hygiene and sanitation; a high prevalence of human immunodeficiency virus (HIV) infection; high poverty levels; and socio-political insecurity. Iodine deficiencies are also prevalent - only 62 percent of households consume iodized salt compared with a regional average of 72 percent in West and Central Africa.¹⁴

¹⁰ WFP, September 2011, *Analyse du fonctionnement des marchés en relation avec la sécurité alimentaire des ménages* (data collected in July 2011).

¹¹ Ouham, Ouham-Pendé, Nana-Gribizi, Mbomou, Haut-Mbomou; the Congolese refugee camps in Zemio, Mboki, Obo, and Batalimo; Sudanese refugee camp in Bambari.

¹² WFP, September 2011, *Rapid Food Security Assessment*, Central African Republic.

¹³ WHO, 1995. Cut-off values for public health significance. <http://www.who.int/nutgrowthdb/en>. Wasting between 5-9 percent is considered “poor”, between 10-14 percent is “serious”, and over 15 percent is “critical”.

¹⁴ UNICEF, 2008, *Sustainable Elimination of Iodine Deficiency*.

13. With the national prevalence of HIV at 6.2 percent (7.8 percent for women), the Central African Republic is the most affected country in West and Central Africa. Four out of the six prefectures targeted under this operation are among those with the highest HIV prevalence nationwide.¹⁵ The continuing violence and poor living conditions of displaced persons has disrupted family and social networks as well as health care services. Gender-based violence against women and girls has also increased, leading to greater vulnerability to HIV infection.¹⁶ At least 24 percent of people living with HIV (PLHIV) in the Central African Republic are moderately food-insecure, while 7 percent are severely food-insecure.¹⁷ The incidence of tuberculosis (TB) is 319 per 100,000 people, with 39 percent of those infected with TB also infected with HIV.¹⁸

Scenario

14. Based on the scenario outlined in the Common Humanitarian Action Plan (CHAP) for 2012, WFP anticipates a continued improvement of the security situation in the northwest, though peace-building efforts, including the DDR process and the reintegration of demobilized soldiers, will require support from the international community. The continued return of displaced populations both inside and outside of Central African Republic provides the opportunity to support the recovery of returnees and vulnerable resident populations, and for WFP to begin to carry out activities to help these populations rebuild their livelihoods. At the same time, the tension and violence in the northeast and parts of the southeast, combined with a weak government presence and unreliable access for humanitarian actors, is likely to continue to hinder access and prevent a transition toward recovery operations in these regions.

POLICIES, CAPACITIES AND ACTIONS OF THE GOVERNMENT AND OTHERS

Policies, Capacities and Actions of the Government

15. The Government's policies since 2005 have largely focused on restoring the rule of law under the constitution. A poverty reduction strategy paper (PRSP) was developed for 2011-2015, with the following long-term objectives: i) restore security, governance and the rule of law; ii) ensure economic recovery; and iii) improve access to basic social services.
16. The 2008 comprehensive peace agreement provides the country with a strategic framework for peace consolidation, most notably a DDR process, which is starting to make progress in the northwest. Despite the Government's willingness to provide emergency

¹⁵ Haut-Mbomou (13.6 percent), Bamingui-Bangoran (10.7 percent), Nana Gribizi (8.4 percent), and Haute-Kotto (7.4 percent).

¹⁶ Columbia University /UNICEF, August 2009, *Serious Violation of Child Rights and Mortality in the Central African Republic*.

¹⁷ WFP/UNICEF (October 2007), *Evaluation of Food Security in Emergency Conditions among Northern Rural Households, Persons Living with HIV and Sudanese Refugees*.

¹⁸ WHO, 2011, *Global Tuberculosis Control Report*.

assistance to IDPs, the magnitude and complexity of the situation surpasses its capacity for response.

17. A national health development plan for 2004-2016 frames all health and nutrition activities and includes the formulation of a national nutrition policy for 2012. The national nutrition protocol was revised and validated in 2010 and is currently being disseminated to all nutrition stakeholders to ensure harmonization of the treatment of moderate acute malnutrition (MAM) and severe acute malnutrition.

Policies, Capacities, and Actions of other Major Actors

18. OCHA coordinates the production of the annual CHAP, which will have two strategic priorities in 2012:
 - Ensure access to basic services and the respect of human rights for conflict-affected people.
 - Support vulnerable populations emerging from conflict by strengthening their livelihoods and assisting them to become self-reliant.
19. United Nations agencies providing relief and development assistance to improve the living conditions of local populations and refugees include: the Food and Agriculture Organization (FAO), which provide tools, seeds and technical assistance; UNICEF, WHO and the United Nations Population Fund (UNFPA), which deliver medical assistance, undertake vaccination campaigns, and implement water and sanitation programmes; and the Joint United Nations Programme on HIV/AIDS (UNAIDS), which conducts HIV surveys. Local and international NGOs also collaborate with WFP to provide assistance. The World Bank, the African Development Bank, and bilateral aid agencies have also initiated cooperation programmes to assist the country.

Coordination

20. At the government level, the Ministry of Planning coordinates humanitarian operations, with the unit for the coordination of food aid (CEGAL - *Cellule de Gestion de l'Assistance Alimentaire*) acting as secretariat.
21. The humanitarian and development partnership team (HDPT), under the guidance of the Humanitarian Coordinator, coordinates the efforts of international organizations involved in humanitarian activities, including United Nations agencies and national and international NGOs. Aid agencies coordinate their activities by sector through the cluster approach: WFP leads the logistics/telecommunications cluster while participating in the food security, nutrition, protection, and education clusters.

OBJECTIVES OF WFP ASSISTANCE

22. The overall objective of this PRRO is to meet the immediate food needs of populations that continue to be affected by conflict, while contributing to peace consolidation and recovery measures in areas where peace has been established. The operation aims to:
- Increase the food consumption of IDPs, refugees, and returnees affected by armed conflicts and displacements (WFP Strategic Objective 1 “Save lives and protect livelihoods in emergencies”).
 - Improve the nutritional status of moderately malnourished children and pregnant and lactating women (Strategic Objective 1).
 - Improve the nutritional recovery of anti-retroviral therapy (ART) and TB clients and improve their adherence to treatment (Strategic Objective 3 - “Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations”).
 - Increase primary school enrolment and retention rates (Strategic Objective 3).
 - Support conflict-affected populations to rebuild their livelihoods and create an asset base for future self-sufficiency (Strategic Objective 3).
23. This PRRO is part of the 2012 CHAP and is aligned with the 2011-2015 PRSP, the 2012-2016 United Nations Assistance Framework (UNDAF). The PRRO contributes to the achievement of the following Millennium Development Goals (MDGs): MDG 1: Eradicate extreme poverty and hunger; MDG 2: Achieve universal primary education; MDG 3: Promote gender equality and empower women; MDG 4: Reduce child mortality; MDG 5: Improve maternal health; MDG 6: Combat HIV/AIDS, malaria & other diseases; MDG 7: Ensure environmental sustainability.

WFP RESPONSE STRATEGY

Nature and Effectiveness of Food Security-Related Assistance to Date

24. WFP has implemented several operations in response to recurring crises in the Central African Republic. The most recent PRRO 200050 assisted 637,000 people in eight prefectures in 2011.
25. General food distribution (GFD) met the immediate food needs refugees and IDPs, and WFP was able to assist UNHCR in responding to influxes of refugees fleeing the LRA. Hot meals provided to school children through emergency school feeding contributed to increasing the average net enrolment rates in targeted areas from 49 percent to 54 percent for girls and 53 percent to 66 percent for boys in the 2010/2011 school year.
26. An internal review concluded that the operation’s impact was difficult to measure due to a weak monitoring and evaluation (M&E) capacity among WFP and partners at the time of implementation. Resource constraints, volatile security conditions, pipeline breaks and poor infrastructure in remote areas delayed and restricted the implementation of activities. The

review recommended a smaller operation that would allow WFP to deliver and monitor with greater quality, focusing assistance in accessible areas that could provide a context for reliable implementation and with greater ability to demonstrate impact.

27. This PRRO 200315 downsizes and refocuses WFP operations in the Central African Republic, drawing from the internal review and the findings of several appraisal missions from the WFP regional bureau in programme design, food security and markets, nutrition, and rural rehabilitation, as well as the results of a school feeding consultation.

Strategy Outline

28. WFP will continue to provide humanitarian relief to conflict-affected populations, while also supporting a gradual shift towards recovery and asset development in areas where peace has been established. Activities will be focused on a small, tightly-targeted population, as identified by the 2011 RFSA. Under the relief component, WFP will meet the basic food needs of IDPs, returnees, and refugees, and ensure appropriate targeted supplementary feeding for moderately malnourished children aged 6-59 months and malnourished pregnant and lactating women (PLW).
29. Through the recovery component, WFP will help to rebuild the livelihoods of conflict-affected populations by rehabilitating their productive assets. WFP will encourage primary school children to return to school through the provision of daily school meals. WFP will also improve the nutritional recovery of ART and TB clients through “food by prescription”, which links nutritious food assistance to treatment programmes.
30. The WFP market assessment in September 2011 indicates that cash/voucher transfers are not a suitable transfer modality for the Central African Republic at the moment. WFP will continue to keep open the possibility of cash/voucher transfers.
31. From January 2012, WFP will implement a country programme (200331) which will target the southern prefectures affected by chronic food insecurity¹⁹ and will consist of components to support education and nutrition. The implementation modalities are better-suited to the more stable security context in the south. When conditions allow, WFP aims to shift appropriate activities of this PRRO to the country programme.

Relief Component

32. *General food distribution:* This will support conflict-affected populations as follows:
 - Recently displaced IDPs will receive GFD rations to meet their basic food requirements and prevent them from resorting to negative coping strategies. In cases where displacement is temporary and IDPs become returnees, they will be progressively integrated into recovery and livelihood support activities. The duration of IDP assistance will be for a maximum of 6 months per year and adjusted based on regular government/United Nations joint assessments.

¹⁹ The country programme will target the regions of Kémo, Basse Kotto, Ouaka, Lobaye, Nana Mambéré, Ombella M’Poko, Mambere-Kadei, Sangha-Mbaere, and the peri-urban areas of Bangui.

- Congolese refugees in four camps are not expected to repatriate in 2012. Security constraints and restrictions on land use by the Government limit the livelihood opportunities for these refugees. They will receive WFP support for 12 months per year but assistance may be adjusted according to the results of a joint Government/UNHCR/WFP assessment mission (JAM) in mid-2012.
 - Sudanese refugees in Bambari, who have access to a limited amount of land, will receive WFP support for 6 months during the lean season to cover production gaps.
33. *Supplementary feeding*: Based on malnutrition rates and following consultations with the Ministry of Health and UNICEF, WFP will support the following nutrition interventions:
- Treatment of moderately acute malnourished children aged 6-59 months admitted in supplementary feeding programmes.
 - Support to malnourished PLW to reduce the incidence of low birth weight and prevent malnutrition among children.
 - Provision of a food ration to caretakers of severely malnourished children receiving treatment in therapeutic feeding centres to reduce defaulting.
34. There is a high prevalence of stunting but the current context is not stable enough for WFP to efficiently implement a sustained intervention, which would be essential to address stunting. WFP and partners will continue to monitor and review this strategy.

Recovery Component

35. *Food-for-assets*: In the northwest, the region's strong agricultural potential and the recent establishment of peace under the DDR process provide a context for high-impact recovery activities. WFP, together with other United Nations and food security cluster agencies will support IDP returnees and food-insecure households to transition from relief to recovery through the rehabilitation of farmland, the sustainable management of natural resources, and agricultural skills training. Joint activities will include: seed distribution; support to a government-led initiative to boost cotton production;²⁰ rehabilitation of roads and bridges to improve market integration and enable farmers to transport their surpluses to neighbouring markets; and skills and livelihoods training for former combatants.²¹ Food-for-assets (FFA) activities will be implemented in collaboration with FAO, United Nations Development Programme, and partners from the HDPT food security cluster.
36. *School Feeding*: To facilitate a return to normalcy for children of primary school age in conflict-affected and post-conflict areas, WFP will provide school feeding supporting UNICEF's back-to-school campaign. A daily meal will be distributed to children attending a half-day of school, contributing to the retention of children in schools and lessening

²⁰ *Le Projet National de Relance de Coton*, led by the Government agency *Agence Centrafricaine de Developpement Agricole*.

²¹ Support to the DDR process will depend on the progress of its implementation and a demonstrated need for food assistance among former combatants.

children's risk of exploitation and recruitment into armed groups. Areas with IDP returnees and host communities in six prefectures will be prioritised.²²

37. *Food by Prescription:* Nutritional support is an integral part in life-saving ART and TB treatment: it improves uptake and initial adherence to treatment, as well as nutritional recovery, reducing mortality rates and enhancing the effectiveness of the treatment itself.²³ WFP's past nutritional support to patients in Central African Republic has been hampered by weak government capacity to administer activities in public health centres. WFP and UNAIDS will therefore pilot an innovative food-by-prescription approach for malnourished ART and TB clients in six treatment structures, with a maximum of 2,400 participants.

Hand-Over Strategy

38. WFP will focus on gradually phasing-out relief assistance to households that achieve a sustainable level of self-sufficiency. To complement this, WFP will advocate for improved social protection policies and the strengthening of government structures to improve attention to vulnerable groups, including IDPs. These efforts will be directed at the ministries of education (management of school feeding activities), social development (strengthening communities and health centres), planning, and agriculture (monitoring of food and nutritional security).

BENEFICIARIES AND TARGETING

39. This PRRO will focus on six conflict-affected prefectures: Ouham and Ouham-Pendé in the northwest, Bamingui-Bangoran and Haute-Kotto in the northeast, and Mbomou and Haut-Mbomou in the southeast. Targeting is based on presence of IDPs and refugees, a high prevalence of food insecurity, and relative levels of security and accessibility necessary for implementation²⁴ using the findings of recent assessments.
40. *General food distribution:* WFP will provide food rations to 19,200 IDPs in the prefectures of Ouham, Ouham-Pendé, Mbomou, Haut-Mbomou, and Haute-Kotto. The most vulnerable households will be selected through food consumption and asset ownership criteria, as well as those headed by women. In addition, 14,000 Congolese and Sudanese refugees registered by UNHCR will receive food rations. This support to refugees will be revised based on the results of the planned JAM in mid-2012.

²² School feeding will be targeted to the prefectures of Ouham, Ouham-Pendé, Mbomou, Haut-Mbomou, Haute-Kotto, and Bamingui-Bangoran.

²³ WFP HIV and AIDS Policy document (WFP/EB.2/2010/4-A).

²⁴ With the exception of GFD to refugees in Bambari (Ouaka prefecture) and Batalimo (Lobaye prefecture) camps, and the implementation of food-by-prescription pilot in three health posts in Bangui and Nana-Mambéré, this PRRO will not implement activities in the southern prefectures covered by country programme 200331.

41. *Supplementary Feeding:* Activities will be based on consultations with partners in the HDPT Nutrition Cluster and in partnership with partner NGOs:

- 45,300 moderately acute malnourished children aged 6-59 months will receive ready-to-use supplementary food (Plumpy'Sup®) and 12,600 PLW will receive fortified blended foods (Supercereal).
- WFP will support 5,400 caretakers with a wet ration during childrens' stay in the therapeutic feeding centres, to prevent defaulting of severely malnourished children in the geographic zones assisted by UNICEF.

Admission and discharge from the supplementary feeding activities will be based on the criteria in the National Protocol for the Treatment of Acute Malnutrition (2006).²⁵ Planning figures consider the prevalence of acute malnutrition, the coverage of nutritional care centres, and the capacity of WFP and its implementing partners. If conflict areas stabilize, WFP plans to transition assistance towards more durable modalities, supporting government clinics as they re-open and reducing reliance on NGO partners.

42. *Food-for-assets:* Participants will be selected and validated through a participatory, community-based approach in line with recent food security assessment recommendations.²⁶ At least 50 percent of the participants will be women, who will also be encouraged to be part of community relief committees and play a central role in beneficiary selection. Each participant will work and be provided with food rations for a maximum of 120 days. The family rations provided will benefit 90,600 people. Activities will be undertaken in partnership with United Nations agencies and NGOs that have demonstrated capacities and are able to provide the necessary complementary inputs.

43. *School Feeding:* This will target the prefectures of Bamingui-Bangoran, Mbomou, Haut-Mbomou, Haute-Kotto, Ouham, and Ouham-Pendé, prioritising sub-prefectures most affected by conflict, with the highest levels of food insecurity and IDPs, and where NGO partners are present. School feeding is expected to reach 68,800 beneficiaries. Targeting will be in collaboration with the Ministry of Education, UNICEF, and NGO partners, which are also supporting assisted schools with infrastructure, school equipment and training.

44. *Food by prescription:* Undernourished ART and TB clients receiving treatment in the six health posts selected for this pilot activity will receive food assistance.²⁷ Clients will be

²⁵ Children 6-59 months of age are admitted based on: z-score weight-for-height > -3 SD and < -2 SD, mid-upper arm circumference (MUAC) > 115 mm and < 120 mm., or discharged from therapeutic feeding; pregnant women are admitted from 6 months, or if lactating with a child under 6 months of age based on MUAC < 210 mm. Discharge for children 6-59 months of age is based on weight-for-height Z-score ≥ -2 during 2 consecutive visits, an average weight gain of 15 percent and a maximum of 3 months of stay in the programme. For PLW, the discharge is based on MUAC > 225 mm after 2 consecutive visits.

²⁶ Groups identified by the 2011 RFSA as the most food-insecure, in areas where FFA activities would be appropriate, include recent returnees and resident communities in Ouham and Ouham-Pendé, and IDP host communities in Mbomou and Haut-Mbomou.

²⁷ Two in Bangui, one in Mbomou, one in Nana-Mambéré, and two in Nana-Gribizi. The combination of rural and urban settings will provide opportunities for learning for future scale-up.

targeted based on their anthropometric status²⁸ for a duration of 6-8 months, depending on progress made by individual clients. Undernourished PLHIV on ART or prophylaxis and undernourished people receiving TB treatment, will qualify to receive an individual food ration. A maximum of 2,400 patients will participate in the pilot, based on the national protocol for nutritional support to PLHIV.

TABLE 1: BENEFICIARIES BY ACTIVITY

Component	Activity	Men/boys	Women/girls	Total
Relief	General food distribution - Refugees	7 560	6 440	14 000
	General food distribution - IDPs	9 584	9 661	19 245
	Supplementary feeding - Children 6-59 months	22 547	22 728	45 275
	Supplementary feeding - PLW	-	12 600	12 600
	Support to therapeutic feeding - Caretaker's ration	-	5 400	5 400
Recovery	Food-for-assets ²⁹	44 772	45 859	90 631
	School feeding	39 983	28 835	68 818
	Food by prescription	1 195	1 205	2 400
	TOTAL	125 641	132 728	258 369

NUTRITIONAL CONSIDERATIONS AND RATIONS

45. The ration compositions conform to WFP specifications and nutritional guidelines, taking into account local preferences.
- The rations for GFD, caretakers, school feeding and FFA include maize meal, pulses, vitamin A-fortified vegetable oil, and iodized salt.
 - Supplementary feeding rations consist of fortified micronutrient-rich commodities (Plumpy'sup® for children, Supercereal and oil for PLW).
 - ART and TB clients will receive fortified blended food (Supercereal) and oil, complemented by nutrition education and counselling, cooking demonstrations, and HIV/TB awareness sessions in partnership with UNICEF, UNFPA, and UNAIDS.
 - School feeding rations cover a quarter of schoolchildren's daily kilocalorie requirements and ensure one hot meal a day for children attending a half-day of school.
 - FFA rations supply participants' minimum protein-energy and micronutrient requirements, while also providing an in-kind income transfer at a value lower than the prevailing rate for casual labour.

²⁸ Entry and discharge criteria: adults and non-pregnant women entry BMI <18.5, exit >18.5; adolescents using BMI for age.

²⁹ FFA beneficiaries refer to recipients of a family ration (average family size of 5 persons).

TABLE 2: FOOD RATION BY ACTIVITY (g/person/day)

	GFD	Supp. Feeding-children 6-59 months	Supp Feeding-PLW	Caretakers' ration	Food For Assets	School Feeding	Food by Prescription
Cereals	400	-	-	400	300	120	
Pulses	60	-	-	60	80	30	
Veg. Oil	25	-	25	25	30	15	25
Salt	5	-	-	5	5	3	
Supercereal (pre-mixed with sugar)	50	-	220	50	-	-	250
Plumpy'sup®	-	92	-	-	-	-	
TOTAL	540	92	245	540	415	168	275
Total kcal/day	2,100	500	1,100	2,100	1,350	665	1,900
% Kcal from protein	10.7	10.1	14.4	10.7	5.6	10.1	15.5
% Kcal from fat	15.4	59.2	31.2	15.4	17.9	58.3	25.7
Number of feeding days per year	180(IDPs) 360(refugees)	60	360	21	120	171	180

TABLE 3: TOTAL FOOD REQUIREMENTS BY ACTIVITY (mt)

	GFD	Supp. Feeding-children 6-59 months	Supp. Feeding-PLW	Caregivers' ration	Food For Assets	School Feeding	Food by Prescription
Cereals	5 507	-	-	45	5 999	2 407	-
Pulses	826	-	-	7	1 600	602	-
Veg. Oil	344	-	113	3	600	301	11
Salt	68	-	-	1	100	60	-
Supercereal (+sugar)	688	-	998	6	-	-	108
Plumpy'Sup®	-	234	-	-	-	-	-
TOTAL	7 433	234	1 111	62	8 299	3 370	119

IMPLEMENTATION ARRANGEMENTS

46. *Participation:* Beneficiary selection and registration will be in collaboration with cooperating partners, targeted communities and local authorities, particularly for recovery activities. Local committees (least 50 percent women) will be involved in identifying beneficiaries and implementing projects. WFP will work closely with NGO partners, UNICEF, and the Ministry of Health for targeting and distribution through health centres. Parent-teacher associations (PTAs) will take part in the management of school canteens. WFP will also work with partners to ensure that distribution points allow women to receive their rations without transport and security problems. Distribution lists will be in the name of women to account for polygamous families and female-headed households.
47. *Partners:* WFP will partner with United Nations agencies, NGOs, and the ministries of education, rural development, agriculture, and social development to maximize the impact of food assistance, including through sector-specific strategies and joint programming. WFP and UNHCR are developing a joint action plan, and WFP will cooperate with WHO and UNICEF for nutritional interventions. Existing field-level agreements with NGO partners for food distribution will be reviewed and extended as appropriate. CEGAL will continue to be the government partner responsible for coordinating WFP assistance.
48. *Procurement:* Findings from the September 2011 market assessment indicate that local maize prices are competitive with prices on the international market.³⁰ WFP will prioritize local and regional purchases of fortified maize meal, depending on price and availability, which will also contribute to the government's engagement in the CAADP process.³¹ WFP currently purchases 10 percent of the required fortified maize meal from the local market, and ongoing initiatives with local suppliers are expected to increase local purchases.
49. *Non-Food Inputs:* WFP has budgeted for utensils, tools, and equipment for recovery interventions. Complementary resources from partners will also be required, including: supporting information systems to improve targeting and follow-up of activities; institutional strengthening of local NGOs; and contingency planning. Measuring tapes, scales, height boards, body mass index/mid-upper arm circumference charts, and materials for cooking demonstrations and awareness sessions will be provided by UNAIDS with funding already secured from a multilateral grant.
50. *Logistics:* WFP is responsible for the international transportation of commodities which are shipped to the port of Douala in Cameroon and forwarded through Bouar in the west of the Central African Republic. The WFP logistics base, truck workshop, and primary warehouses are located in Bangui. The storage capacity of WFP warehouses in-country is

³⁰ "Analyse du fonctionnement des marchés en relation avec la sécurité alimentaire des ménages." WFP, September 2011. Data collected in July 2011.

³¹ The Comprehensive Africa Agriculture Development Programme (CAADP) compact was signed in April 2011. WFP, the World Bank, FAO, and other development actors will support the Government to implement the strategy with specific attention food production and hunger.

approximately 7,000 mt. Stocks will be pre-positioned whenever possible, in order to avoid food pipeline breaks. From the main warehouses in Bouar and Bangui, food is dispatched to extended delivery points in Paoua, Kaga-Bandoro and Bambari as well as directly to final delivery points using WFP and commercial trucking capacity.

51. Road conditions within the Central African Republic are exceptionally poor, raising overland transport costs considerably. Most roads are unpaved and often only small four-wheel drive (4x4) trucks can be used for secondary distribution, particularly during the rainy season (April–September). As these trucks are not commercially available for contracting in sufficient quantity, WFP maintains a fleet of 18 trucks, which also support other United Nations and NGO operations.

PERFORMANCE MONITORING

52. An improved M&E system will allow WFP to better monitor and report progress and to take corrective action where needed. To reinforce M&E capacity and ensure availability of baseline data, WFP will advocate for increased involvement of government authorities, decentralised government entities, and local NGOs in establishing a common M&E framework, yearly action planning, and periodic joint reviews. WFP's own M&E capacity will be enhanced through an upgraded database, additional monitoring staff and results-based management training. Annual performance reviews will be conducted and informed by systematic and periodic outcome reporting. A country portfolio evaluation is foreseen in 2013.
53. Monthly distribution and post-distribution monitoring will be supervised by WFP field staff, in collaboration with NGO cooperating partners. The nutritional recovery of children will be monitored through data from the feeding centres and, where appropriate, jointly with other agencies. The food-by-prescription pilot will be closely followed through regular progress reports, with a view to inform a scale-up of the model. A final evaluation will be conducted at the end of the activity.
54. WFP will continue to participate in food and nutrition security assessments and Standardized Monitoring and Assessment of Relief and Transitions (SMART) surveys with FAO, UNICEF, WHO, national partners and NGOs. A follow-up emergency food security assessment (EFSA) and a JAM are planned in 2012 to evaluate changes in living conditions, food security and nutrition of the refugee populations in Central African Republic; WFP will adjust its food assistance to this beneficiary group, if necessary.

RISK ASSESSMENT AND CONTINGENCY PLANNING

Hazard and Risk Assessment

55. *Contextual Risks:* The main risks centre on insecurity and volatility in many parts of the country. The Government's military capacity cannot guarantee the physical protection of the targeted populations. WFP and other United Nations agencies regularly review their level of preparedness within the framework of an inter-agency contingency planning process. Close liaison will be maintained with counterparts in Chad, DRC, and Cameroon to anticipate and monitor refugee movements, coordinate assistance, and prepare for repatriation. In the event of a major crisis, WFP will prepare a budget revision according to the results of a rapid needs assessment involving United Nations agencies and the Government.
56. *Programmatic risks:* The main risks are related to weak institutional capacity, unpredictable and untimely availability of resources and delayed delivery of commodities, inadequate implementation capacity of Government and NGO partners, and insufficient non-food items or services to complement WFP assistance. To ensure agreed operating conditions are rigorously implemented, WFP is investing in a robust monitoring regime to ensure resources are properly used. Compliance with the improved M&E system will be closely monitored. WFP will leverage capacity-development activities of the WFP country programme 200331 that will provide training for government and other partners in beneficiary targeting, project planning and implementation, M&E, reporting, and commodity storage and distribution. Food delivery is also complicated by long distances and poor roads: trucks are at risk of being blocked, resulting in delivery delays and increased costs. WFP pre-positions food where possible.
57. *Institutional risks:* Adequate and timely funding is necessary for efficient stock planning and delivery. Without sufficient resources, WFP would have to reduce the number of feeding days and/or prioritize support to particular population groups.

SECURITY CONSIDERATIONS

58. The United Nations Security Management Team in the Central African Republic has determined the country's Security Levels to be 2, 3 and 4³² based on a comprehensive threat assessment. WFP will ensure compliance to minimum operational security standards and minimum security telecommunications requirements.

³² Level 2 (low) for the city of Bangui and Lobaye, Ombella M'Poko, Mambere Kadei, Sangha Mbaere et Kemo and Nana Mambere; level 3 (moderate) for Ouham, Ouham-Pendé, Bamingui-Bangoran, Nana-Gribizi, Ouaka, Basse Kotto, Haute-Kotto; level 4 (high) for Mbomou, Haut-Mbomou and Vakaga.

RECOMMENDATION

The Executive Director is requested to approve the proposed protracted relief and recovery operation 200315 for the Central African Republic.

APPROVAL

.....
Josette Sheeran
Executive Director
United Nations World Food Programme

Date:.....

ANNEX I-A

PROJECT COST BREAKDOWN			
Food³³	Quantity (mt)	Value (US\$)	Value (US\$)
Cereals	13,966.00	US\$6,977,272	
Pulses	3,045.00	US\$1,461,600	
Oil and fats	1,379.00	US\$1,516,900	
Mixed and blended food	2,007.00	US\$1,915,442	
Others	231.00	US\$18,480	
Total food	20,628.00	US\$11,889,694	
Cash transfers		00 000	
Voucher transfers		00 000	
Subtotal food and transfers			US\$11,889,694
External transport			US\$1,517,398
Landside transport, storage and handling			US\$13,396,028
Other direct operational costs			US\$1,163,623
Direct support costs ³⁴ (see Annex I-B)			US\$5,736,307
Total WFP direct costs			US\$33,703,050
Indirect support costs (7.0 percent)			US\$2,359,214
TOTAL WFP COSTS			US\$36,062,264

³³ This is a notional food basket for budgeting and approval. The contents may vary.

³⁴ Indicative figure for information purposes. The direct support costs allotment is reviewed annually.

ANNEX I-B

DIRECT SUPPORT REQUIREMENTS (US\$)	
Staff and staff-related costs	
International professional staff	1,717,932
Local staff - national officers	529,292
Local staff - general service	455,504
Local staff - temporary assistance	875,487
Local staff – overtime	28,600
International consultants	20,650
Local consultants	34,550
United Nations volunteers	324,000
Staff duty travel	391,431
Subtotal	4,377,445
Recurring expenses	
Rental of facility	59,180
Utilities	237,000
Office supplies and other consumables	37,600
Communications services	114,454
Equipment repair and maintenance	43,800
Vehicle running costs and maintenance	167,400
Subtotal	659,434
Equipment and capital costs	
Vehicle leasing	244,800
Communications equipment	212,328
Local security costs	242,300
Subtotal	699,428
TOTAL DIRECT SUPPORT COSTS	5,736,307

ANNEX II - Logical Framework: Central African Republic PRRO 200315

Results	Performance Indicators	Means of verification	Assumptions and risks
Strategic Objective 1: Save Lives and Protect Livelihoods in Emergencies			
OUTCOME 1: Reduced or stabilized moderate acute malnutrition in children under 5	<ul style="list-style-type: none"> ➤ Prevalence of acute malnutrition among children under 5 (weight-for-height (baseline and target to be confirmed) ➤ Supplementary feeding performance indicators (baseline to be established in 2012): <ul style="list-style-type: none"> • recovery rate >75% • defaulter rate <15% • death rate <3% 	<ul style="list-style-type: none"> • Nutritional surveys (humanitarian partners) • Counterpart reports (health centres, NGOs on performance indicators) 	<p>Stalling of the DDR exercise in the north of the country could prevent implementation of activities in a large part of the project area</p> <p>Lack of complementary activities by partners/Government</p> <p>Epidemics/diseases</p> <p>Health and sanitation not adequately addressed</p>
OUTCOME 2: Improved food consumption over assistance period for IDPs, returnees and refugees in the conflict-affected areas and camps	<ul style="list-style-type: none"> ➤ Household food consumption score (FCS) >24 for 90% of beneficiaries 	<ul style="list-style-type: none"> • EFSA • Post distribution monitoring reports 	<p>Adequate funding to avoid pipeline breaks</p>
OUTPUTS 1.1 and 1.2: Food and non-food items distributed in sufficient quantity and quality to: (1.1) moderately malnourished children under 5 and PLW targeted IDPs; and (1.2) refugees in conflict-affected areas; under secure conditions.	<ul style="list-style-type: none"> ➤ Number of women, men, girls and boys receiving food and non-food items, by category and as percentage of planned figures ➤ Tonnage of food distributed, by type, as percentage of planned distribution ➤ Quantity of fortified foods, complementary foods and special nutritional products distributed, by type, as percentage of planned distribution ➤ Number of security incidents 	<ul style="list-style-type: none"> • WFP food aid monitor reports and WFP heads of sub-office monthly reports • Cooperating partner reports • COMPAS data 	

Results	Performance Indicators	Means of verification	Assumptions and risks
Strategic Objective 3 : Restore and Rebuild Lives and Livelihoods in Post-Conflict, Post-Disaster or Transition Situations			
OUTCOME 3 Adequate food consumption over assistance period for targeted households among host communities, IDPs and refugees	<ul style="list-style-type: none"> ➤ Household food consumption (between 34 and 42) for 80% of households participating in assets creation activities 	<ul style="list-style-type: none"> • Joint monitoring reports FAO/WFP • EFSA (baseline) and post distribution monitoring (follow up) 	<p>Increased insecurity prevents IDPs from returning to their village and communities and thus from carrying out their activities. This could also lead to a deterioration in the nutritional status of mothers and children</p> <p>Lack of complementary inputs, technical assistance, lack of community interest</p>
OUTCOME 4 Targeted communities have increased access to assets in fragile, transition situations	<ul style="list-style-type: none"> ➤ Community asset score (baseline and target to be confirmed) 	<ul style="list-style-type: none"> • Cooperating partner reports • Ad-hoc/tailored surveys 	Low partner capacity to identify and carry out income-generating and productive asset activities
OUTPUT (related to outcomes 3 and 4) Food and non-food items distributed in sufficient quantity and quality to targeted men, women , boys and girls under secure conditions	<ul style="list-style-type: none"> ➤ Number of women, men, girls and boys receiving food and non-food items, by category and as percentage of planned figures ➤ Tonnage of food distributed, by type, as percentage of planned distribution 	<ul style="list-style-type: none"> • WFP food aid monitor reports and WFP head of sub-office monthly reports • COMPAS reports • Cooperating partner reports 	
Output 4: Developed, built or restored livelihood assets by targeted communities and individuals	<ul style="list-style-type: none"> ➤ Number of community assets created or restored by targeted communities and individuals, by type and unit of measure targets under discussion with partners) 	<ul style="list-style-type: none"> • M&E Reports (WFP and partner reports) • Government reports 	Improved security conditions are conducive for returnees to settle
OUTCOME 5 Enrolment of girls and boys, including IDPs and refugees, in assisted schools stabilized at pre-crisis levels	<ul style="list-style-type: none"> ➤ Retention rate Enrolment: average annual rate of change in number of girls and boys enrolled 	<ul style="list-style-type: none"> • WFP standardized school feeding survey (to be carried out in February/March 2012) • WFP and partner monitoring and evaluation reports 	<p>Increased insecurity prevents the setting up of schools in conflict-affected areas</p> <p>Availability of complementary inputs from the Government and other partners</p>

Results	Performance Indicators	Means of verification	Assumptions and risks
		<ul style="list-style-type: none"> Ministry of Education and partners annual reports 	<p>Lack of community involvement in PTA, no complementary inputs from other partners</p> <p>Limited government support to communities (provision of qualified teachers)</p>
<p>OUTPUT 5. Food and non-food items distributed in sufficient quantity and quality to targeted IDPs and refugees school children in conflict-affected areas under secure conditions</p>	<ul style="list-style-type: none"> Tonnage of food distributed, by type, as percentage of planned distribution Number of girls and boys who receive a food ration in WFP-assisted schools as a percentage of planned 	<ul style="list-style-type: none"> WFP food aid monitor (FAM) reports and WFP heads of sub-office monthly reports FAM field monitoring reports Cooperating partner reports 	
<p>Outcome 6: Improved nutritional recovery of ART and/or TB treatment clients</p>	<ul style="list-style-type: none"> Nutritional recovery rate (WFP is recruiting expertise to conduct a baseline study in the context of the pilot project) 	<ul style="list-style-type: none"> Baseline study M&E Reports (WFP and partner reports) 	<p>All other inputs from the health centres are available (anti-retrovirals, staffing, counseling etc.)</p>
<p>OUTPUT 6 Food and non-food items, distributed in sufficient quantity and quality to ART and/or TB treatment clients under secure conditions</p>	<ul style="list-style-type: none"> Quantity of fortified foods, complementary foods and special nutritional products distributed, by type, as percentage of planned distribution 	<ul style="list-style-type: none"> WFP food aid monitor (reports and WFP heads of sub-office monthly reports) Government and Cooperating partner reports 	

ANNEX III - List of Acronyms Used in the Document

ART	anti-retroviral therapy
BMI	body mass index
CEGAL	<i>Cellule de Gestion de l'Assistance Alimentaire</i>
CHAP	Common Humanitarian Action Plan
COMPAS	Commodity Movement Processing and Analysis System
DDR	Disarmament Demobilization and Reintegration
DRC	Democratic Republic of Congo
EFSA	emergency food security assessment
FAM	food aid monitor
FAO	Food and Agriculture Organization of the United Nations
FCS	food consumption score
FFA	food for assets
FFT	food for training
HDPT	Humanitarian and Development Partnership Team
HIV	human immunodeficiency virus
IDP	internally displaced person
JAM	joint assessment mission
LRA	Lord's Resistance Army
M&E	monitoring and evaluation
MAM	moderate acute malnutrition
MDG	Millennium Development Goal
MICS	Multiple-Indicator Cluster Survey
MUAC	mid-upper arm circumference
NGO	non-governmental organization
OCHA	Office for the Coordination of Humanitarian Affairs
PLHIV	people living with HIV
PRRO	protracted relief and recovery operation
PRSP	poverty reduction strategy paper
PTA	parent-teacher association
RFSA	rapid food security assessment
SD	standard deviation
SFP	supplementary feeding programme
TB	tuberculosis
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDAF	United Nations Assistance Framework
UNHCR	Office of the United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
WHO	World Health Organization

ANNEX IV – Map

