



**RESIDENT / HUMANITARIAN COORDINATOR  
REPORT ON THE USE OF CERF FUNDS  
MALAWI  
RAPID RESPONSE  
DROUGHT 2015**

**RESIDENT/HUMANITARIAN COORDINATOR**

**Ms. Mia Seppo**

## REPORTING PROCESS AND CONSULTATION SUMMARY

- a. Please indicate when the After Action Review (AAR) was conducted and who participated.

*An After Action Review for the entire response did not occur instead each of the response clusters involved conducted a lessons learnt exercise. This was due to the fact that the impact of the El Niño made it imperative for Humanitarian Actors to engage in planning for the next response much earlier than normal, long before the completion of the 2015/16 response.*

- b. Please confirm that the Resident Coordinator and/or Humanitarian Coordinator (RC/HC) Report was discussed in the Humanitarian and/or UN Country Team and by cluster/sector coordinators as outlined in the guidelines.

YES  NO

*It was shared with the members of the HCT and the clusters for their input, feedback and information.*

- c. Was the final version of the RC/HC Report shared for review with in-country stakeholders as recommended in the guidelines (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

YES  NO

*It was shared with members of the HCT who comprise: UN Agencies, International NGOs, National NGOs, Government and donors.*

## I. HUMANITARIAN CONTEXT

TABLE 1: EMERGENCY ALLOCATION OVERVIEW (US\$)		
Total amount required for the humanitarian response: 149,364,847		
Breakdown of total response funding received by source	Source	Amount
	CERF	9,963,628
	COUNTRY-BASED POOL FUND (if applicable)	10,916,364
	OTHER (bilateral/multilateral)	118,666,909
	<b>TOTAL</b>	<b>139,546,901</b>

TABLE 2: CERF EMERGENCY FUNDING BY ALLOCATION AND PROJECT (US\$)			
Allocation 1 – date of official submission: 26 September 2015			
Agency	Project code	Cluster/Sector	Amount
UNICEF	15-RR-CEF-118	Nutrition	487,639
FAO	15-RR-FAO-029	Agriculture	1,999,987
WFP	15-RR-WFP-068	Food Aid	7,200,932
WFP	15-RR-WFP-069	Nutrition	275,070
<b>TOTAL</b>			<b>9,963,628</b>

TABLE 3: BREAKDOWN OF CERF FUNDS BY TYPE OF IMPLEMENTATION MODALITY (US\$)	
Type of implementation modality	Amount
Direct UN agencies/IOM implementation	7,906,810
Funds forwarded to NGOs and Red Cross / Red Crescent for implementation	2,005,965
Funds forwarded to government partners	50,853
<b>TOTAL</b>	<b>9,963,628</b>

### HUMANITARIAN NEEDS

The cropping season 2014/2015 was characterized by late onset of rains, but by the time rains started falling a large part of Malawi received above average rainfall in a very short period of time. This resulted in flooding that affected more than a million people and resulted in destruction of 64,000 hectares of crops in 15 of the 28 districts in the country during the month of January. Towards, February a large part of the country experienced prolonged dry spells that led to reduction in crop production for many farmers. The Malawi Vulnerability Assessment Committee (MVAC) undertook the annual food security assessment in June 2015. The report indicated that 2.8 million people were at risk of food insecurity representing 17.5% of the population.

The double impact of floods, heavy rains and prolonged dry spells affected parts of the Centre which is a traditionally food surplus region, but also parts of the south and the north, thereby affecting supplies of maize as well as cost of maize on the market. There was therefore a need to ensure that vulnerable households are supported to meet their food needs either through food aid or cash transfers.

Additionally, program data from Community Management of Acute Malnutrition (CMAM) showed an increase in admissions in the drought affected districts compared to the same period in 2014. There were also reports of increasing death rates at Nutritional Rehabilitation Units in the same period, reaching 24 percent in some districts which is 14 percent higher than SPHERE standards. The nutrition situation pointed to the need for a nutrition response to prevent the worsening of the already bad nutrition situation. The increasing trends were observed in moderate acute malnourished admissions under the supplementary feeding programme as well as severe acute malnourished admissions hence a need for an intervention targeting SAM and MAM.

Drawing lessons from implementation of previous CERF supported agricultural activities; the HCT agreed that food insecure communities' productive capacity be sustained. Agriculture was identified as a sector in need of support, as it would enable farmers to cope with the food insecurity but also to get their productive capacity back on track. This agricultural support was meant to rapidly save peoples' livelihood by producing sufficient food for the family.

## **II. FOCUS AREAS AND PRIORITIZATION**

The MVAC report indicated that 2.8 million people would be at risk of food insecurity. Following a Humanitarian Response Committee meeting on 11 August 2015, where the MVAC report was presented and a discussion on priority needs was held. Meanwhile discussions had already commenced earlier through an Inter cluster meeting where it had been agreed that the findings from the MVAC showed that the needs were identified in the following sectors: Agriculture, Food Security, Nutrition, Education and Protection. The prioritization was based on a discussion on which sectors were mainly affected during a food insecurity crisis. The decision was based both on past experiences but also available monitoring data like nutrition reports and agricultural monitoring data. It was agreed further that Health and WASH have a bearing on the response but these clusters would be using existing funding to complement the response. These recommendations were then discussed at a meeting of the Humanitarian Response Committee comprising donors, government, UN, INGO and NGOs.

With support from the HCT, the Government through the Department of Disaster Management Affairs (DoDMA) facilitated the development of response plans in Coordination, Food Security, Agriculture, Education, Nutrition and Protection. Follow up meetings of the UNCT however agreed to only prioritize Nutrition, Food Security, and Agriculture for the CERF application. This was on the grounds that these three sectors had time critical interventions yet funding was not flowing in as fast to allow early start of implementation, as such CERF was seen as the only mechanism that would enable kick start of activities.

Separate cluster prioritization meetings were held where priority needs for CERF application under each cluster were identified and agreed. At a prioritization meeting, the Food Security Cluster agreed that priority needs were food for the vulnerable populations. Vulnerable households will thus be supported to meet their food needs either through food aid or cash transfers. While in previous years, affected population were mostly concentrated in southern region of Malawi and few parts of the central region, 2015 food insecurity affected a large part of traditionally food surplus areas of the centre and north. This meant, the humanitarian response would cover a much wider geographical area than before. Although contributions towards food security were received, the funds were not enough to purchase grain and additional items to meet the standard ration and also meet associated costs for the distribution of in kind contribution from the government. Funding was thus required to procure additional maize and other food commodities to be able to provide a complete standard humanitarian food basket at the onset of the response. CERF funds were thus agreed to be used to kick-start the response in order to save lives and prevent further deterioration the food insecurity situation by supporting procurement of food items.

The Agriculture cluster had indicated a need to support vulnerable farmers to resume their productive capacity by enabling them to plant in the October rainy season.

Time was running out yet the cluster was unable to mobilise resources for the immediate agricultural support. The cluster thus recommended that the CERF application prioritise provision of a combination of improved and diversified agricultural inputs including seeds, fertilisers, vegetative material and small scale complementary irrigation that would enable farmers to cope with potential prolonged dry spells. This was against a background that the prevailing food insecurity threatened the local seed security especially of the most vulnerable affected households and that time was of critical essence given that planting rains would be falling in October and yet vulnerable farmers had no inputs.

As indicated above the country was recording alarmingly high malnutrition rates and deaths in NRUs. Annual trends also showed that malnutrition worsen during the hungry period October to March. Given that resources were not forthcoming as quickly as required, the Nutrition Cluster agreed to prioritize the expansion of lifesaving therapeutic treatment of acute malnutrition which is essential in preventing avoidable morbidity and mortality. CERF funding was thus prioritised for procurement of supplies for the treatment of moderately acute and severely acute malnutrition among children.

### **III. CERF PROCESS**

The Government of Malawi through DoDMA leads and coordinates the development of the emergency response plans in line with the national contingency plan. At the same time, the UN through the HCT supports the Government in overseeing the work of the clusters; from preparedness, response planning, implementation and resource mobilization. The Agriculture, Food Security, Protection and Nutrition clusters are coordinated through an Inter Cluster coordination cluster (led by DoDMA and co-chaired by the RCO) which in turn feeds back into the HCT. Participation at all levels, i.e. clusters, inter cluster and HCT, is open to INGOs, national NGOs, UN Agencies and Government.

Individual clusters conducted cluster prioritization based on available information. Food Security cluster identified needs and priorities based on the 2015 MVAC report, the Cost of Hunger report, and monitoring reports from FEWSNET. The first stage involved dividing caseloads into cash transfers and food transfer groups as recommended by the market assessment report. Then following a joint nutrition/ food security cluster discussion a decision was made to include items in the relief basket that would help reduce moderate acute malnutrition. This followed a recommendation from Nutrition Cluster to reduce the burden on their inpatient or supplementary feeding program. After breaking down the needs for the cluster, and potential sources of funding then cluster isolated twinning costs and purchase of additional items as priorities for funding under CERF due to lack of potential interest from donors to fund that components.

The Agriculture Cluster had a discussion over prevailing conditions and potential impact of El Niño. This is why with the clusters member a decision was made to prioritize provision of root crops and other cereals other than maize. The decision was based on the performance of root crops in the just ended season and the root crops' ability to withstand dry spells. The cluster further considered the frequency of prolonged dry spells in the targeted areas. Considering that the cluster always has challenges mobilizing resources, the cluster identified time bound and immediate activities that depend on the start of the rains and proposed them for CERF funding in complementarity with nutrition and food security the cluster aims to also encourage dietary diversity among vulnerable populations by not sticking to the traditional staple maize but sweet potatoes, cassava, sorghum and millet.

The Nutrition Cluster based their prioritization on the Nutrition reports that indicated high numbers of deaths at Nutritional Rehabilitation Units, with national average of 10.3% but in some selected districts the rates were as high as 40%. Thus they prioritized treatment of Severe Acute Malnutrition and strengthening of capacity in NRU. Realizing however that these deaths also have to do with late presentation of cases and other diseases, the cluster linked with the food security component on messaging and sensitization as well as prevention of moderate acute malnutrition through provision of super cereal as part of the ration. On the health side, the cluster worked with the health sector to ensure that malnutrition related to untreated diseases like Malaria, Diarrhoea and HIV/AIDS complications are well taken care of.

## IV. CERF RESULTS AND ADDED VALUE

**TABLE 4: AFFECTED INDIVIDUALS AND REACHED DIRECT BENEFICIARIES BY SECTOR<sup>1</sup>**

Total number of individuals affected by the crisis: 2.83 million people									
Cluster/Sector	Female			Male			Total		
	Girls (< 18)	Women (≥ 18)	Total	Boys (< 18)	Men (≥ 18)	Total	Children (< 18)	Adults (≥ 18)	Total
Agriculture	58,212	71,148	<b>129,360</b>	45,738	55,902	<b>101,640</b>	118,080	142,896	<b>260,976</b>
Food Aid	519,392	480,400	<b>999,792</b>	499,024	461,561	<b>960,585</b>	960,716	923,041	<b>1,883,757</b>
Nutrition	4,729	2,028	<b>6,757</b>	4,543		<b>4,543</b>	12,126	4,208	<b>16,334</b>

<sup>1</sup> Best estimate of the number of individuals (girls, women, boys, and men) directly supported through CERF funding by cluster/sector.

### BENEFICIARY ESTIMATION

The combined response reached an approximate total of 1,883,757 people of which 960,716 were females and 923,041 males in the 25 districts. Of all the cluster beneficiary figures, this figure represents the highest number of beneficiaries; the Food Security Cluster covered the highest number of beneficiaries. The response covered the same geographical areas as such the population targeted were the same. Due to the same geographical targeting there are no overlaps in counting the number of beneficiaries reached under the CERF intervention.

**TABLE 5: TOTAL DIRECT BENEFICIARIES REACHED THROUGH CERF FUNDING<sup>2</sup>**

	Children (< 18)	Adults (≥ 18)	Total
<b>Female</b>	489,965	470,751	960,716
<b>Male</b>	470,751	452,290	923,041
<b>Total individuals (Female and male)</b>	<b>960,585</b>	<b>923,041</b>	<b>1,883,757</b>

<sup>2</sup> Best estimate of the total number of individuals (girls, women, boys, and men) directly supported through CERF funding. This should, as best possible, exclude significant overlaps and double counting between the sectors.

### CERF RESULTS

The CERF application was mainly developed to assist the humanitarian community achieve the following objectives:

- Provide lifesaving therapeutic treatment to moderate and severe acute malnutrition cases in 13 drought affected and food insecure districts
- Improve food availability and access to vulnerable farmers affected by climate shocks in Malawi during 2015.
- Provide life-saving food assistance during the lean season to targeted food insecure population affected by floods and dry spells.

With funds received from CERF the various agencies were able to reach a large number of vulnerable people with nutrition, agricultural and food support.

In nutrition the project assisted in timely management and treatment of acute malnourished children thus averting morbidity and mortality in malnourished children in 13 drought affected districts. This intervention came at a time when there were reports of increasing death rates at NRUs but with supplies procured through the project these vulnerable children were assisted. This can be evidenced from the improved cure rates outlined in the nutrition project component. Through the strong community mobilization component more malnourished children were identified and referred for treatment thereby preventing late presentation of cases to treatment centres which is also one contributing factor to low cure rates. The project reached a total of 3,943 SAM under-fives and 11,445 children, pregnant and lactating women with MAM, this represented 147% of the planned beneficiaries. Under this component lives of malnourished children and pregnant and lactating mothers were thus saved.

The food security component managed to reach 1.88 million people with food items. As is evident from the narrative the food security cluster did not have sufficient funds for purchasing all food items to make the full internationally acceptable food basket. With CERF funds the vulnerable people were able get a balanced food basket, instead of just receiving maize only CERF funds enabled the purchase of pulses, super cereal to more than 1.8 million people. This helped reduce incidences of malnutrition that are rampant in the country but providing easy access to highly nutritious foods to food insecure families. Vulnerable families were also able to have a somehow diversified diet as pulses were added to their otherwise vegetable /maize daily menu. Besides the purchase CERF funds made it possible to move 22,566 MT of maize, 1,234 MT of pulses and 401 MT of Super Cereal to the various areas where the vulnerable populations were located. As such with CERF funds 24,201 MT of food stuffs was able to reach its intended beneficiaries in good time thanks to CERF.

Part of the response also consisted of agricultural support to vulnerable farmers, who due to the dry spells and floods had lost seed they would have planted in the 2016/17 cropping season. The CERF project managed to reach 42,000 households with improved inputs that enabled them participate in their agricultural activities thereby enabling them produce food. It is just unfortunate that the El Nino effects hit the same areas really hard, these people would have harvested something. But still because the package also contained tubers most of the participating households were able to produce little food from the sweet potatoes and cassava.

## **CERF's ADDED VALUE**

### **a) Did CERF funds lead to a fast delivery of assistance to beneficiaries?**

YES  PARTIALLY  NO

CERF funds led to a fast delivery of assistance, for instance the food security cluster had secured much of the resources in kind and without CERF funds it was impossible to deliver the relief items. Fast delivery was thus made possible with CERF funds.

### **b) Did CERF funds help respond to time critical needs<sup>1</sup>?**

YES  PARTIALLY  NO

For the agricultural component time was of critical need given that planting rains in Malawi are received in October. By August the agriculture cluster had not received any contributions. Had it been that no funds from CERF were received the cluster would have missed the agricultural season entirely. The cluster was able to catch up with the rains by giving inputs to farmers in time for planting rains due to the availability of the CERF funds.

### **c) Did CERF funds help improve resource mobilization from other sources?**

YES  PARTIALLY  NO

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<sup>1</sup> Time-critical response refers to necessary, rapid and time-limited actions and resources required to minimize additional loss of lives and damage to social and economic assets (e.g. emergency vaccination campaigns, locust control, etc.).

CERF funds reduced funding gaps in some clusters thereby creating more space for the underfunded sectors to lobby for funds. For instance, with the other clusters partially resourced through CERF the HCT was able to decide to allocate funds from the local pooled fund to protection which had not received any funding.

**d) Did CERF improve coordination amongst the humanitarian community?**

YES  PARTIALLY  NO

The response required a large number of responders as well as funds for responding. This made it imperative for agencies/organizations to seek out partnerships with others because no single agencies had sufficient resources both human as well as financial resources to cover all needs. This led to greater collaboration among the institutions

**e) If applicable, please highlight other ways in which CERF has added value to the humanitarian response**

The response required a large number of responders as well as funds for responding. This made it imperative for agencies/organizations to seek out partnerships with others because no single agencies had sufficient resources both human as well as financial resources to cover all needs. This led to greater collaboration among the institutions

**V. LESSONS LEARNED**

TABLE 6: OBSERVATIONS FOR THE <u>CERF SECRETARIAT</u>		
Lessons learned	Suggestion for follow-up/improvement	Responsible entity

TABLE 7: OBSERVATIONS FOR <u>COUNTRY TEAMS</u>		
Lessons learned	Suggestion for follow-up/improvement	Responsible entity
Regular Nutrition Cluster and Inter-cluster meetings provided an excellent forum for transparency on implementation of the emergency response. There is need to translate into actions the agreements made on the inclusion criteria of malnourished children households in the food, agriculture and protection clusters response	Strengthen collaboration and linkages of Nutrition Cluster with Health, Food Security, WASH, and Protection Clusters in order to ensure that all cross cutting issues are mainstreamed and well addressed.	DoDMA, Ministry of Health (Department of Nutrition and HIV and AIDS (DNHA-Cluster lead), UNICEF (The Cluster Co- Lead Agency), UNRCO
Multi-sectoral collaboration with government leadership is key in resource mobilisation	Strengthening coordination and participation/involvement of nutrition cluster members to harmonise the implementation plans which are not integrated with the national nutrition response plan	DoDMA, Ministry of Health (DNHA), UNICEF



## VI. PROJECT RESULTS

**TABLE 8: PROJECT RESULTS**

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CERF project information						
<b>1. Agency:</b>	UNICEF WFP		<b>5. CERF grant period:</b>	16/10/2015 – 15/04/2016		
<b>2. CERF project code:</b>	15-RR-CEF-118 15-RR-WFP-069		<b>6. Status of CERF grant:</b>	<input type="checkbox"/> Ongoing		
<b>3. Cluster/Sector:</b>	Nutrition			<input checked="" type="checkbox"/> Concluded		
<b>4. Project title:</b>	Management of Severe and Moderate Acute Malnutrition in 25 drought affected districts.					
<b>7. Funding</b>	a. Total funding requirements <sup>2</sup> :	US\$9,500,000	d. CERF funds forwarded to implementing partners:			
	b. Total funding received <sup>3</sup> :	US\$8,802,370	▪ NGO partners and Red Cross/Crescent:		US\$ 42,305	
	c. Amount received from CERF:	US\$ 762,709	▪ Government Partners:		US\$ 50,853	
Beneficiaries						
<b>8a. Total number (planned and actually reached) of individuals (girls, boys, women and men) <u>directly</u> through CERF funding (provide a breakdown by sex and age).</b>						
Direct Beneficiaries	Planned			Reached		
	Female	Male	Total	Female	Male	Total
Children (< 18)	4,729	4,543	9,272	5,930	6,196	12,126
Adults (≥ 18)	2,028		2,028	4,208		4,208
<b>Total</b>	<b>6,757</b>	<b>4,543</b>	<b>11,300</b>	<b>10,138</b>	<b>6,196</b>	<b>16,334</b>
8b. Beneficiary Profile						
Category	Number of people (Planned)			Number of people (Reached)		
Refugees						
IDPs						
Host population	11,300			16,334		
Other affected people						
<b>Total (same as in 8a)</b>	<b>11,300</b>			<b>16,334</b>		
<i>In case of significant discrepancy</i>	The difference in planned and the actual beneficiaries reached under MAM treatment is					

<sup>2</sup> This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

<sup>3</sup> This should include both funding received from CERF and from other donors.

<i>between planned and reached beneficiaries, either the total numbers or the age, sex or category distribution, please describe reasons:</i>	attributed to the fact that more commodities were purchased (68 per cent more and above planned) hence reaching 147 per cent of the planned beneficiaries. More commodities were purchased because the commodities were purchased locally hence lower prices and no external transport cost.
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CERF Result Framework			
<b>9. Project objective</b>	Provide lifesaving therapeutic treatment to moderate and severe acute malnutrition cases in 13 drought affected and food insecure districts.		
<b>10. Outcome statement</b>	Reduced morbidity and mortality through efficient management of acute malnutrition		
<b>11. Outputs</b>			
<b>Output 1</b>	Acutely malnourished children in the 13 affected districts have access to therapeutic feed.		
<b>Output 1 Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Reached</b>
Indicator 1.1	# of new admissions to SFP program	7,800	11,445
Indicator 1.2	# of new admissions to OTP program	3,500	3,943
Indicator 1.3	# of new admissions to NRU/Inpatient program	700	946
Indicator 1.4	# OTP sites in affected districts stocked with RUTF, # NRU sites in affected districts stocked with 708 cartons of F100 and 39 cartons # of SFP sites in affected districts stocked with Super Cereal plus	44MT 708 cartons F-100, 13 Cartons F-75 , 39 cartons of Resomal 181MT	255 OTP sites (100% of planned)
<b>Output 1 Activities</b>	<b>Description</b>	<b>Implemented by (Planned)</b>	<b>Implemented by (Actual)</b>
Activity 1.1	Procurement of 13 cartons of F-75 and 78 cartons of F-100, 39 cartons of ReSoMal, 3500 Cartons (44MT) of RUTF, 130 bottles of Vitamin A 100,000IU and 390 Vitamin A bottles 200,000IU for 3500 Severe Acute Malnutrition cases in OTP and 700 SAM cases in NRU to full treatment	UNICEF	UNICEF procured 48.3MT of RUTF, 78 cartons F-100, 13 Cartons F-75, 39 cartons of ReSoMal and treated 3,943 SAM cases.
Activity 1.2	Procurement of Anthropometric Equipment - 4940 packs of MUAC Tapes	UNICEF	UNICEF procured 4,940 packs of MUAC tapes used during mass screening of underfive children
Activity 1.3	Procurement of 181MT tones fortified food blend for MAM treatment of 7800 MAM cases.	WFP	WFP procured and distributed 305 MT of super cereal treating 11,445 MAM cases.
Activity 1.4	Support distribution of the therapeutic supplies and CMAM routine medication supplies.	UNICEF	UNICEF supported distribution of

			therapeutic supplies to the last point of distribution at 255 Health Facilities.
Activity 1.5	Support distribution of fortified food blend for MAM treatment	WFP	WFP distributed 304 MT to facilities in the affected districts.
Activity 1.6	Supportive supervision/Monitoring visits by the zone and district level supervisors in all the priority districts once per month	UNICEF & WFP	UNICEF and WFP conducted monthly supportive supervision to the districts.
Activity 1.7	Draw cooperating Partner agreements with NGOs partners	UNICEF & WFP	UNICEF entered partnership with two NGOs (Save the Children and Concern Worldwide).
<b>Output 2</b>	Community mobilisation and mass screening for children ,supportive supervision ,monitoring and reporting conducted in the 13 drought affected and districts.		
<b>Output 2 Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Reached</b>
Indicator 2.1	# and/or % of children aged 6 – 59 months screened for acute malnutrition	70%	71% (439,485)
Indicator 2.2	# of children aged 6 – 59 months referred for treatment of acute malnutrition	80%	121% (52,428)
Indicator 2.3	# of supportive supervision and monitoring visits	6 visits	8 visits were conducted (4 visits by each UNICEF and WFP)
<b>Output 2 Activities</b>	<b>Description</b>	<b>Implemented by (Planned)</b>	<b>Implemented by (Actual)</b>
Activity 2.1	Conduct monthly community mobilisation ,mass screening ,passive case finding and active case finding	WFP/UNICEF	UNICEF
Activity 2.2	Support quality CMAM data documentation and timely reporting	WFP/UNICEF	WFP/UNICEF
Activity 2.3	CMAM project monitoring and mentorship to community health workers/Homecraft workers	WFP/UNICEF	WFP/UNICEF

**12. Please provide here additional information on project's outcomes and in case of any significant discrepancy between planned and actual outcomes, outputs and activities, please describe reasons:**

The project successfully assisted in timely management and treatment of acute malnourished children thus averting morbidity and mortality in malnourished children in 13 drought affected districts. In addition to the above indicators, data on project performance was collected using the sphere standards of recovery rates, death rates and default rates. These indicators are used to check effectiveness of treatment services. Quality of the CMAM program was maintained within the acceptable WHO SPHERE thresholds of greater than 75 percent cure rates, less than 3 per cent death rate and less than 15 per cent default rate throughout the implementation phase from October 2015 to January 2016.

<p>Cumulative rates are as follow: NRU; Cure rate: 85 per cent, Death rate: 10.1 per cent and default rate: 2 per cent; OTP; Cure rate: 88 per cent, Death rate: 2 per cent and Default rate: 7 per cent and SFP; cure rate: 86 per cent, Death rate: 0.2 per cent and Default rate: 11.1 per cent</p> <p>A total of 3,943 Severely Acute Malnourished under-five children were treated; a total of 11 445 children and pregnant and lactating women were treated for Moderate acute malnutrition representing 147 per cent of the planned beneficiaries. This is attributed to that fact that more commodities (68 per cent more and above the planned) were purchased since it was local procurement with lower prices and no external transport, the budget was based on international purchase.</p>	
<p><b>13. Please describe how accountability to affected populations (AAP) has been ensured during project design, implementation and monitoring:</b></p>	
<p>Accountability to the affected population was assured through various activities among others:</p> <ul style="list-style-type: none"> <li>• Provision of project information to the affected population. This was done at both community and facility level. At community level through various channels (theatre, community radios, talks), the affected population were informed about malnutrition, its impacts, availability of the project to treat malnutrition, how they can access it and to help them make informed decisions.</li> <li>• At each and every clinic, beneficiaries were informed about their entitlements i.e. how much ration they are supposed to receive with their condition as part of treatment and their utilisation.</li> <li>• In order to ensure participation, community members in the form of volunteers were part of the committees that supported implementation of the project.</li> <li>• To ensure feedback and complaints mechanisms, various facilities have various mechanisms, some had suggestion boxes while others have a help desk at each clinic to receive, communicate and respond to various complaints. The suggestions were also used for course correction.</li> </ul> <p>In addition to the facility and community level mechanisms, for MAM treatment, WFP conducts post distribution monitoring to have feedback from the beneficiaries on the implementation of the project. WFP takes this opportunity to explain to the beneficiaries on various aspects of the projects. Furthermore this is also used as a feedback mechanism for the beneficiaries.</p>	
<p><b>14. Evaluation: Has this project been evaluated or is an evaluation pending?</b></p>	<p>EVALUATION CARRIED OUT <input type="checkbox"/></p>
<p>This project was part of the national response and operated under the established national CMAM program which generates monthly reports providing the performance indicators. The nutrition assessment survey was planned to assess the nutritional status of all the twenty five drought affected districts.</p>	<p>EVALUATION PENDING <input type="checkbox"/></p>
	<p>NO EVALUATION PLANNED <input checked="" type="checkbox"/></p>

**TABLE 8: PROJECT RESULTS**

CERF project information						
<b>1. Agency:</b>	FAO		<b>5. CERF grant period:</b>	16/10/2015 – 15/04/2016		
<b>2. CERF project code:</b>	15-RR-FAO-029		<b>6. Status of CERF grant:</b>	<input type="checkbox"/> Ongoing		
<b>3. Cluster/Sector:</b>	Agriculture			<input checked="" type="checkbox"/> Concluded		
<b>4. Project title:</b>	Emergency Agricultural Assistance to Support Food Insecure Rural Households who's Food Production Cycle was Severely Disrupted by Drought During the 2014 – 2015 Cropping Season in Malawi.					
<b>7. Funding</b>	a. Total funding requirements <sup>4</sup> :	US\$ 44,655,000	d. CERF funds forwarded to implementing partners:			
	b. Total funding received <sup>5</sup> :	US\$ ≤10.5Million	▪ NGO partners and Red Cross/Crescent:		US\$263,345	
	c. Amount received from CERF:	US\$ 1,999,987	▪ Government Partners:			
Beneficiaries						
<b>8a. Total number (planned and actually reached) of individuals (girls, boys, women and men) <u>directly</u> through CERF funding (provide a breakdown by sex and age).</b>						
Direct Beneficiaries	Planned			Reached		
	Female	Male	Total	Female	Male	Total
Children (< 18)	58,212	45,738	103,950	66,125	52,955	119,080
Adults (≥ 18)	71,148	55,902	127,050	79,350	63,546	142,896
<b>Total</b>	<b>129,360</b>	<b>101,640</b>	<b>231,000</b>	<b>145,475</b>	<b>116,501</b>	<b>261,976</b>
8b. Beneficiary Profile						
Category	Number of people (Planned)		Number of people (Reached)			
Refugees						
IDPs						
Host population						
Other affected people			231,000		261,976	
<b>Total (same as in 8a)</b>			<b>231,000</b>		<b>261,976</b>	
<i>In case of significant discrepancy</i>	The project reached more beneficiaries than targeted because the project ended up having					

<sup>4</sup> This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

<sup>5</sup> This should include both funding received from CERF and from other donors.

<i>between planned and reached beneficiaries, either the total numbers or the age, sex or category distribution, please describe reasons:</i>	additional money in local currency due to the appreciation of the dollar during project implementation. As such, the money accrued due to appreciation of the dollar value was allocated to additional inputs for additional equally vulnerable beneficiaries who were initially left out due to limited funds.
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<b>CERF Result Framework</b>			
<b>9. Project objective</b>	Improve food availability and access to vulnerable farmers affected by climate shocks in Malawi during 2015.		
<b>10. Outcome statement</b>	Agricultural production activities of food insecure households affected by drastic climate related shocks restored		
<b>11. Outputs</b>			
<b>Output 1</b>	Food production has been resumed by at least 200,000 persons in six (6) district affected by climate shocks in Malawi by mid-April 2016.		
<b>Output 1 Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Reached</b>
Indicator 1.1	Total acreage planted with distributed improved seeds/inputs	14,700 hectares	16,610
Indicator 1.2	Increase access to essential agricultural inputs to 42,000 (231,000 persons) affected households in Chikwawa Zomba, Balaka, Neno, Phalombe and Nsanje by mid April 2016.	42,000 households (231,000 persons)	47,460
Indicator 1.3	Total Kcal contribution to individual beneficiaries by the project	≥2100	Not determined
Indicator 1.4	Household dietary diversity	≥ 4 with more diversity on legumes, leafy vegetables and cereals.	Not determined
<b>Output 1 Activities</b>	<b>Description</b>	<b>Implemented by (Planned)</b>	<b>Implemented by (Actual)</b>
Activity 1.1	Contract implementing partners to execute seed and input fairs.	FAO	FAO
Activity 1.2	Undertake the seeds fairs in the targeted communities in six (6) districts	FAO	FAO
Activity 1.3	Lead in community mobilisation activities jointly with implementing partners to 42,000 beneficiary households.	FAO	District Agriculture Offices
Activity 1.4	Undertake seed fairs in the targeted communities and distribution of sweet potato and treadle pumps	FAO	NGO Implementing Partners
Activity 1.5	Conduct a post seed fair assessment to ascertain quantities of inputs procured by farmers and usage. (farmers will get sweet potato through central procurement and buy directly the other seeds through seed fairs when feasible).	FAO, NGOs, MoAIWD, DoDMA	FAO, NGOs, MoAIWD, DoDMA
Activity 1.6	Process monitoring and reporting	FAO, NGOs	FAO, NGOs

<b>12. Please provide here additional information on project's outcomes and in case of any significant discrepancy between planned and actual outcomes, outputs and activities, please describe reasons:</b>	
The project's main outcome was 'agricultural production activities of households affected by floods and dry spells during the 2014/2015 production restored'. However, the crop production activities that were implemented during the 2015/16 rain fed season were severely affected by prolonged dry spells which hilt all the project target locations. The impact of the 2015/16 massive dry spells led to as high as 90% production loss in some project beneficiaries' fields.	
<b>13. Please describe how accountability to affected populations (AAP) has been ensured during project design, implementation and monitoring:</b>	
Accountability to targeted beneficiaries was ensured through regular on site monitoring by the implementing partners, District Agricultural Offices and occasionally by FAO. For instance, in order to ensure that the farmers benefitted in terms of accessing good quality seed during seed fairs, FAO and government participated in most of the seed fair markets to provide on spot advice to farmers and also ensure vendors did not exploit or cheat the farmers.  The project, through implementing partners, was implemented using local structures such as village development committees (VDCs), Village Civil Protection Committees (VCPCs) and the District Executive committees (DEC) at District level. The use of these structures ensured not only adequate participation of the communities in implementation and monitoring but also enhanced accountability and transparency.	
<b>14. Evaluation: Has this project been evaluated or is an evaluation pending?</b>	EVALUATION CARRIED OUT <input type="checkbox"/>
An evaluation of the project's impact has not yet been done. The evaluation may not be conducted on the project as FAO is currently planning to implementing within the same locations other activities (some of which have already started) using further sources of funding aimed at mitigating the impact of the 2015/16 severe dry spells. Therefore, priority has been given to the successor activities other than to the evaluation of previous activities	EVALUATION PENDING <input type="checkbox"/>
	NO EVALUATION PLANNED <input checked="" type="checkbox"/>

**TABLE 8: PROJECT RESULTS**

CERF project information						
<b>1. Agency:</b>	WFP		<b>5. CERF grant period:</b>	20/10/2015 – 19/04/2016		
<b>2. CERF project code:</b>	15-RR-WFP-068		<b>6. Status of CERF grant:</b>	<input type="checkbox"/> Ongoing		
<b>3. Cluster/Sector:</b>	Food Aid			<input checked="" type="checkbox"/> Concluded		
<b>4. Project title:</b>	Emergency Food Assistance to Populations Affected by Prolonged Dry Spells in Malawi					
<b>7. Funding</b>	a. Total funding requirements <sup>6</sup> :	US\$ 104,045,012	d. CERF funds forwarded to implementing partners:			
	b. Total funding received <sup>7</sup> :	US\$ 90,734,520	▪ NGO partners and Red Cross/Crescent:		US\$ 1,700,315	
	c. Amount received from CERF:	US\$ 7,200,932	▪ Government Partners:			
Beneficiaries						
<b>8a. Total number (planned and actually reached) of individuals (girls, boys, women and men) <u>directly</u> through CERF funding (provide a breakdown by sex and age).</b>						
Direct Beneficiaries	Planned			Reached		
	Female	Male	Total	Female	Male	Total
Children (< 18)	519,392	499,024	1,018,416	489,965	470,751	960,716
Adults (≥ 18)	480,400	461,561	941,961	470,751	452,290	923,041
<b>Total</b>	<b>999,792</b>	<b>960,585</b>	<b>1,960,377</b>	<b>960,716</b>	<b>923,041</b>	<b>1,883,757</b>
8b. Beneficiary Profile						
Category	Number of people (Planned)		Number of people (Reached)			
Refugees						
IDPs						
Host population						
Other affected people			1,960,377		1,883,757	
<b>Total (same as in 8a)</b>			<b>1,960,377</b>		<b>1,883,757</b>	
<i>In case of significant discrepancy</i>	WFP was able to reach a maximum of 1.9 million food insecure people with life-saving food					

<sup>6</sup> This refers to the funding requirements of the requesting agency (agencies in case of joint projects) in the prioritized sector for this specific emergency.

<sup>7</sup> This should include both funding received from CERF and from other donors.



<i>between planned and reached beneficiaries, either the total numbers or the age, sex or category distribution, please describe reasons:</i>	assistance with funding from CERF, reaching 96 percent of beneficiaries planned. The slight underachievement is due to differences in planned figures and actual figures emanating from having used a 5.5 household size for planning when in reality benefitting household size varied.
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<b>CERF Result Framework</b>			
<b>9. Project objective</b>	Provide life-saving food assistance during the lean season to targeted food insecure population affected by floods and dry spells		
<b>10. Outcome statement</b>	Food consumption stabilized or improved for targeted households (as recommended by MVAC) through general food or cash distributions		
<b>11. Outputs</b>			
<b>Output 1</b>	Food and nutritional products distributed in sufficient quantity and quality and in a timely manner to targeted beneficiary households		
<b>Output 1 Indicators</b>	<b>Description</b>	<b>Target</b>	<b>Reached</b>
Indicator 1.1	Quantity of food assistance distributed, disaggregated by type of commodities, as % of planned	100% (22,601 MT of maize (GoM 'twinned' maize), 1,121 MT of pulses, 401 MT of Super Cereal = 24,123mt)	(22,566 MT of GoM 'twinned' maize, 1,234 MT of pulses, 401 MT of Super Cereal = 24,201 MT)
Indicator 1.2	Number of women, men, boys and girls receiving food assistance, disaggregated by beneficiary category, sex as % of planned	100% (480,400 women, 461,561 men, 519,392 girls, 499,024 boys = 1,960,377)	96% (470,751 women, 452,290 men, 489,965 girls, 470,751 boys = 1,883,757)
<b>Output 1 Activities</b>	<b>Description</b>	<b>Implemented by (Planned)</b>	<b>Implemented by (Actual)</b>
Activity 1.1	Signing of Field Level Agreements (FLAs) with selected NGO partners.	NGO partners	14 NGO partners
Activity 1.2	Community sensitisations including raising awareness on the prevention of SGBV, targeting, verification and registration of the lean season food insecure	WFP	WFP and 14 NGO Partners
Activity 1.3	Mapping of Final Distribution Points (FDPs) for propositioning and dispatching food to prepositioning sites	NGO partners and district councils	NGO partners and district councils
Activity 1.4	Food distribution to the food insecure population	WFP, Government and NGO partners	WFP, Government and 14 NGO partners
Activity 1.5	Monitoring and reporting on the programme implementation	NGO partners	WFP and 14 NGO partners

**12. Please provide here additional information on project's outcomes and in case of any significant discrepancy between**

**planned and actual outcomes, outputs and activities, please describe reasons:**

Of the total 24,200 mt (22,600 mt maize twinned, 400 mt Super Cereal and 1,200 mt pulses) procured using CERF funding, WFP distributed all commodities between the months of November 2015 to March 2016 as part of the humanitarian response. This included twinning/distribution of 22,600 mt of maize that was donated as an in-kind contribution from the Government of Malawi's Strategic Grain Reserves (SGR).

Results from a second Post Distribution Monitoring (PDM) exercise conducted in March 2016 reveal that beneficiaries continued to fare better than non-beneficiaries countrywide, demonstrating the importance of the life-saving assistance supported by CERF funding. In accordance with this trend, beneficiaries from northern and central districts that began receiving assistance in January saw an improvement in food security over the three months as individuals with an acceptable Food Consumption Score (FCS) increased by 8 percent. An acceptable FCS indicates that a household is consuming staples and vegetables every day, frequently accompanied by oil and pulses and occasionally meat, fish and dairy.<sup>8</sup>

The number of beneficiaries in the south who engaged in emergency coping strategies decreased when compared to data collected in the first PDM in December. Likewise, beneficiaries in the north who started receiving food in January were found to be engaging less in emergency coping strategies come March 2016. As coping strategies tend to increase with the progression of the lean season, this decrease in beneficiaries employing strategies such as selling one's land signifies the impact of the humanitarian assistance. Nonetheless the increasingly dire situation, particularly in the south, is indicated by levels of sharing food assistance recorded as part of the PDM. It was found that 44 percent of beneficiaries in the south and 30 percent in the north and central districts are sharing food, indicating that beneficiaries and non-beneficiaries alike are experiencing high levels of food insecurity.

Given that intake of micronutrients such as Iron and Vitamin A are among public health concerns in Malawi, WFP continued to specially target households with pregnant and lactating women and children under two to receive rations of Super Cereal. Super Cereal has been documented to prevent deterioration in micronutrient status where diets are predominantly cereal-based with low diversity of other nutritious foods. These specialized nutritious foods were also essential for a Minimum Acceptable Diet for vulnerable groups.

However, according to the PDM the Dietary Diversity Score (DDS) for both non-beneficiaries and beneficiaries has worsened since the first PDM. At the Round 2 PDM, beneficiaries are consuming an average 3.8 food groups during a 7-day period, as compared to 3.36 food groups consumed by non-beneficiaries, both indicative of low dietary diversity. Overall, the 0.84 point reduction in DDS of beneficiaries from 4.64 at baseline to 3.8 at PDM is likely due to the high prevalence of sharing in the Southern districts coupled with the inability to obtain additional diverse foods due to extensive crop failure, as well as lack of income-generating opportunities or opportunities for *ganyu*. However, beneficiaries are still consuming a more diverse diet than non-beneficiaries. The calculation methodology for dietary diversity scores does not consider blended foods like Super Cereal, however, which would have otherwise contributed to further improved food security outcomes.

Noting that social behaviour change is a generational process, WFP started work with a new local NGO partner – Art & Global Health Center Africa (AGHCA), which implements arts-based programmes that inspire and mobilize communities – to optimize efforts to communicate key messages to affected communities. The main objective of the partnership is to contribute to social behaviour change through more engaging and participatory channels, including an SBCC method known as Theatre for Development (TfD), to enhance awareness and knowledge around food and nutrition related issues, motivate change and support communities in practicing trial behaviour change. In January 2016, AGHCA trained 40 participants from nine cooperating partners in the methodologies to help strengthen their typical communication channels and encourage delivery of SBCC messages in a participatory manner tailored to the needs of specific communities. Beginning in February, community drama clubs in Chikwawa and Phalombe were provided trainings meant to empower them with knowledge and skills on how to disseminate the WFP key messages through drama and dance using the TfD approach. The first step of this training was to conduct a Participatory Rural Communication Appraisal, which supports communities to identify their own challenges and opportunities, and formed the evidence base for interactive community-led dramas put on during distributions to inspire the rest of the community into action.

The dramas applied critical lenses through which community members could comprehensively explore SBCC issues related to food and nutrition security, and led to the development of Community Action Plans on dietary diversification, infant and young child feeding practices and gender and protection.

<sup>8</sup> Basic staple foods are provided to households through the WFP food basket, leaving households able to reallocate funds for purchasing food from the other nutritious food groups such as fish, dairy and occasionally meat.

In addition to enhanced SBCC, WFP and partners continued to strengthen work with partners on a range of linkage projects and complementary assistance to relief beneficiaries to support efforts to bridge the humanitarian and development divide, with a view to breaking the cycle of hunger. Complementary assistance involved working with partners to link relief beneficiaries with development and resilience-building initiatives that complemented the provided relief assistance. Complementary activities sought to enhance people's coping capacity to withstand future shocks and included productive asset creation, integration of beneficiaries into nutrition care groups, installation of community tree nurseries, building of wood-saving, fuel-efficient stoves, and distribution of seeds to encourage crop diversification for the next harvest, among others. For the first time in 2015, WFP deliberately planned these linkages with partners at the design stage and put in place a cloud-based monitoring mechanism to track partners' achievements in integrating relief beneficiaries into complementary activities. The successes of these efforts to date include over 643,000 households being linked to development/recovery projects, over 500 km of feeder roads being rehabilitated, over 29,000 trees being planted, over 1,000 village savings and loan (VSL) groups being created and over 36,000 cuttings and seeds being distributed for planting.

**13. Please describe how accountability to affected populations (AAP) has been ensured during project design, implementation and monitoring:**

WFP ensured integration of gender and protection during all stages of programming from design to planning, implementation, as well as during monitoring and evaluation. To begin with, during partner identification stage, when reviewing partner proposals, one of the considerations focused on assessing their potential in addressing gender and in integrating mechanisms that were going to ensure protection of the vulnerable populations affected by the disaster. All potential partners had also been requested to clarify in their proposals how they were going to implement complaints and feedback mechanisms to ensure accountability to affected populations. Organizations that demonstrated strong potential were identified and partnered with WFP to implement the response.

Besides ensuring identification of partners with strong potential in integrating gender, protection and accountability mechanisms in the emergency response, WFP clearly reflected in the Field Level Agreements (FLAs) obligations by the parties in adhering to the IASC core principles on Sexual Exploitation and Abuse (SEA) and in ensuring full implementation of special measures stipulated in the Secretary General's Bulletin on prevention of SEA in humanitarian contexts. During design and planning stage, WFP integrated gender and protection indicators in the M&E framework to ensure continuous tracking of progress. Protection as well as gender and age disaggregated data was collected and analysed during the baseline survey, during post-distribution monitoring, onsite monitoring and findings informed modification to the programme activities.

During implementation, WFP ensured delivered assistance in a safe, accountable and dignified manner. Monthly distributions took place in the morning hours to ensure that beneficiaries would be able to travel to and from the distribution sites in daylight, when risk of violence is lower. Sites were established through a participatory mapping exercise that was carried out with communities including women, the elderly, disabled and other vulnerable groups, in consultation with Area Development and Civil Protection Committees. This ensured that WFP distribution points were sufficiently close together in order to be reached relatively quickly and easily, in line with the WFP Humanitarian Protection Policy and corporate guidelines. By reducing the time required to collect assistance, WFP also increased the available time beneficiaries had to dedicate to other household responsibilities, such as family care work or preparing their gardens for the upcoming harvest season.

WFP also collaborated with the protection cluster co-led by the Ministry of Gender and UNICEF in designing and facilitating capacity building trainings on gender and protection for NGOs implementing the emergency response. NGO partner trainings were conducted in October even before the response fully took off. The training created space for the partners to share practical experiences on how to mainstream gender and protection in the emergency response. The training played a vital role in facilitating learning on gender and protection. It also helped raise awareness among NGO staff members on protection issues. The NGO partners had an opportunity to review the existing complaints and feedback mechanisms in terms of what works well, what does not work well and put in place mechanisms to improve on them. The protection cluster also supported WFP in crafting gender and protection messages which were disseminated by NGO partners to communities affected by food insecurity.

Towards the end of the response in April, 2016, WFP also conducted a qualitative study to assess effectiveness of the complaints and feedback mechanisms for the response. The study was done through Focused Group Discussions and Key Informant Interviews in 6

districts which were targeted by the response. Among other things, the study has helped generate lessons that have informed development of community driven standards relating to complaints and feedback mechanisms to further strengthen accountability to affected populations particularly for the next emergency response. The study has also helped WFP and its NGO partners to learn what works well and how to address the barriers that impede the elderly men and women, the illiterate, the youths, and people with disabilities in accessing and making use of the complaints and feedback mechanisms.

<b>14. Evaluation: Has this project been evaluated or is an evaluation pending?</b>	EVALUATION CARRIED OUT <input type="checkbox"/>
An evaluation of PRRO 200692, the project under which this response was implemented is currently underway and a report will be shared once finalised	EVALUATION PENDING <input checked="" type="checkbox"/>
	NO EVALUATION PLANNED <input type="checkbox"/>

## ANNEX 1: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Partner Type	Total CERF Funds Transferred to Partner US\$
15-RR-FAO-029	Agriculture	FAO	INGO	\$158,000
15-RR-FAO-029	Agriculture	FAO	INGO	\$17,500
15-RR-FAO-029	Agriculture	FAO	INGO	\$25,635
15-RR-FAO-029	Agriculture	FAO	NNGO	\$19,000
15-RR-FAO-029	Agriculture	FAO	NNGO	\$43,210
15-RR-CEF-118	Nutrition	UNICEF	GOV	\$50,853
15-RR-CEF-118	Nutrition	UNICEF	INGO	\$34,887
15-RR-CEF-118	Nutrition	UNICEF	INGO	\$7,418
15-RR-WFP-068	Food Assistance	WFP	INGO	\$210,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$102,550
15-RR-WFP-068	Food Assistance	WFP	INGO	\$245,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$141,012
15-RR-WFP-068	Food Assistance	WFP	INGO	\$165,600
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	NNGO	\$144,900
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	NNGO	\$131,253
15-RR-FAO-029	Agriculture	FAO	INGO	\$158,000
15-RR-FAO-029	Agriculture	FAO	INGO	\$17,500
15-RR-FAO-029	Agriculture	FAO	INGO	\$25,635
15-RR-FAO-029	Agriculture	FAO	NNGO	\$19,000
15-RR-FAO-029	Agriculture	FAO	NNGO	\$43,210

15-RR-CEF-118	Nutrition	UNICEF	GOV	\$50,853
15-RR-CEF-118	Nutrition	UNICEF	INGO	\$34,887
15-RR-CEF-118	Nutrition	UNICEF	INGO	\$7,418
15-RR-WFP-068	Food Assistance	WFP	INGO	\$210,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$102,550
15-RR-WFP-068	Food Assistance	WFP	INGO	\$245,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$141,012
15-RR-WFP-068	Food Assistance	WFP	INGO	\$165,600
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	NNGO	\$144,900
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	NNGO	\$131,253
15-RR-FAO-029	Agriculture	FAO	INGO	\$158,000
15-RR-FAO-029	Agriculture	FAO	INGO	\$17,500
15-RR-FAO-029	Agriculture	FAO	INGO	\$25,635
15-RR-FAO-029	Agriculture	FAO	NNGO	\$19,000
15-RR-FAO-029	Agriculture	FAO	NNGO	\$43,210
15-RR-CEF-118	Nutrition	UNICEF	GOV	\$50,853
15-RR-CEF-118	Nutrition	UNICEF	INGO	\$34,887
15-RR-CEF-118	Nutrition	UNICEF	INGO	\$7,418
15-RR-WFP-068	Food Assistance	WFP	INGO	\$210,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$102,550
15-RR-WFP-068	Food Assistance	WFP	INGO	\$245,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$141,012

15-RR-WFP-068	Food Assistance	WFP	INGO	\$165,600
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	NNGO	\$144,900
15-RR-WFP-068	Food Assistance	WFP	INGO	\$140,000
15-RR-WFP-068	Food Assistance	WFP	NNGO	\$131,253

**ANNEX 2: ACRONYMS AND ABBREVIATIONS (Alphabetical)**

ADRA	Adventist Relief Agency
CMAM	Community Managed Moderate Acute Malnutrition
FLA	Field Level Agreements
FCS	Food Consumption Score
MAM	Moderate Acute Malnutrition
MoAIWD	Ministry of Agriculture, Irrigation and Water Development
MVAC	Malawi Vulnerability Assessment Committee
NRU	Nutrition Rehabilitation Unit
PDM	Post Distribution Monitoring
SAM	Severe Acute Malnutrition
SBCC	Social Behavioural Communication and Change
SEA	Sexual Exploitation and Abuse