

Emergency Plan of Action Preliminary Final Report

Mauritania: Food Insecurity

Emergency appeal n° MDRMR007	Glide n° OT-2011-000205-NER
Date of issue: 31 May 2016	
Operation start date : 13 May 2015	Operation end date : 13 February, 2016
Host National Society : Mauritanian Red Crescent	Operation budget: CHF 998,467
Number of people affected: 260,000 people in crisis (phase 3). Projected situation for June is: 851,000 people under pressure (phase 2), 443,000 people in crisis (phase3) and 21,000 in emergency (phase 4).	Number of people assisted: 10,400 people immediate assistance; 27,000 medium-term assistance
National Societies and partners involved in the operation: British and French Red Cross Societies, IFRC, ICRC	

A. Situation analysis

Description of the disaster

This Food Security crisis is a regional crisis affecting the Sahel area. According to the last Harmonized Framework in March 2015, the food insecure population within Mauritania was estimated at 723,000 people in IPC Phase 2 (Stressed) and an additional 260,000 people in IPC Phase 3 (Crisis). The number of households in IPC Phase 2 has risen sharply over the last months. This reflects a gradual deterioration of the situation particularly for the rain-fed farming areas that face a second year of poor crop harvest. The projected situation for June-August 2015 estimated that the number of people affected would increase to 851,000 people under Stressed (Phase 2), 443,000 people in Crisis (Phase 3) and 21,000 people in emergency (Phase 4) on the IPC scale. The food insecurity situation affected the provinces of Hodh Elchargui (19.5%) of the total population), Assaba (16.3%), Brakna (14.9%), Gorgol (14.6%), Hodh Elgharbi (14%) and Guidimakha (13.9%).

According to the Harmonized Framework, (March 2015) the Global Acute Malnutrition (GAM) prevalence is 6.2%. This is supported by the various nutritional surveys carried out at the post-harvest period, which ranged from 5.6 to 8.5% nationally. No region of the country exceeds the 10% threshold, but the regions of Hodh El Charqui (9.6%), Guidimakha (9.4%), Brakna (8.8%) and Gorgol (7.7%) are the most affected. It is in this context that the International Federation supported the Mauritanian Red Crescent to respond and provide relief to the most affected people.

Summary of current response

Overview of Host National Society

To ensure the relief activities were implemented in an effective and efficient manner, the Mauritanian Red Crescent (MRC) invested in trainings. The trainings included two nutrition training sessions targeting 30 volunteers from the two intervention areas. The training enhanced the volunteers' knowledge of malnutrition, screening techniques, referral of severe malnutrition cases to health facilities, recording, water, hygiene and sanitation, awareness techniques for behavioural change.

The training was followed by nutrition screening campaigns simultaneously conducted in Magtaa Lahjar and Tintane. The campaigns enabled the identification and registration of 2,000 beneficiaries (i.e. children from 6 to 23 months old, pregnant and lactating women). 1,933 beneficiaries out of the targeted 2,000 beneficiaries benefited from the distribution of enriched food. The screening activities were complemented by awareness campaigns to promote good nutrition practices and behavioural change. A total of 1,400 households (8,400 people) were reached by the promotion of good hygienic practices.

Overview of Red Cross Red Crescent Movement in country

With support from the British Red Cross, 25 volunteers benefited from NDRT training on food security, livelihoods, nutrition and cash transfer programming organized in Nouakchott in June-July 2015.

French Red Cross (FRC) also supported training in livelihoods and cash transfer programming in September, 2015. The FRC supported training targeted 20 volunteers from local committees that had not participated in the NDRT training.

Additionally, together with the French Red Cross, the National Society started implementing a prevention and response plan for the Ebola Virus Disease (EVD) in Mauritania for a period of six months. This response plan against EVD aims at contributing to the reduction of morbidity and mortality related to EVD targeting 23 villages in Trarza, Brakna, Gorgol, Assaba, Guidimaka, HodhCharghi, and Hodh Gharbiand in Nouakchott regions.



Malnutrition screening activities MRC/IFRC

Mauritanian Red Crescent was technically supported by the IFRC Regional office in Dakar that first deployed an RDRT followed by an operation manager. In terms of resource mobilisation, regular communication with donors was held in order to raise more resources for the appeal.

In collaboration with the International Committee of the Red Cross (ICRC) and within the framework of its annual partnership action plan with Mauritanian Red Crescent, there was a capacity building program where training of staff and volunteers on first aid, communication, and economic security (ECOSEC) was conducted.

Overview of non-RCRC actors in country

The Mauritanian Government has been leading the coordination of responses by national agencies such as the Food Security Commissioner (CSA), the Agriculture Department as well as humanitarian actors including WFP, FAO, UNICEF, OCHA, ACF, Oxfam and Save the Children. The latter supported the affected people through the distribution of either food items or cash. The National Society regularly participated in the coordination meeting held at national and regional levels.

Please note that this Preliminary Report is issued in advance of the Final Report, which is expected to be issued by the end of June 2016.

B. Operational strategy and plan

Overall Objective

The overall objective of this intervention was to contribute to mitigating the impact of food insecurity and malnutrition, and to build the community resilience in assisting 8,400 vulnerable people (1,400 households) plus 2,000 pregnant, lactating women and children under-two years old that are in food insecurity situation in Brakna and Hodh El Gharbi Regions through food parcel distribution and distribution of enriched food. It was also geared towards supporting 3,500 households (21,000 people) in terms of enhancing livestock production and agricultural production.

Proposed strategy

This operation was part of wider response in the Sahel Region and was included in the IFRC Sahel Food Insecurity Regional Operational Strategic Plan. Actions taken have been based on a holistic and integrated approach to meet not only immediate needs of targeted households with a food distribution programme, but also to meet the nutritional needs of children under two years of age and pregnant or lactating women (PLW) by providing enriched supplements and related activities. The strategy also aimed at strengthening livelihoods through the distribution of agricultural and livestock inputs (seeds, tools, livestock feed, livestock replenishment, etc.) to support middle-term livelihood recovery. The strategy was built on IFRC's Twin Track approach, which includes emergency intervention actions with resilience building activities to provide support to immediate and longer-term needs of the affected population.

Food Security, Nutrition and Livelihoods

Population to be assisted: 1,400 households (8,400 beneficiaries).

Food security, nutrition and livelihoods

Outcome 1: 1,400 households (8,400 beneficiaries receive food assistance during 3 months through food distribution.

Output 1.1: Immediate food needs of 1,400 households (8,400 beneficiaries) are met through food distribution) per month per household for 3 months.

Activities:

- Information for authorities/setting up of targeting committee / awareness session in village assemblies
- Targeting process, and surveys verification.
- Validation of beneficiary list and contract with partners (UPA and shops)
- Food distribution (three distributions).
- Post distribution monitoring and impact analysis

Outcome 2: Middle/longer-term twin track approach, to build community resilience through livelihoods reinforcement to avoid future food crisis to 3,500 households (21,000 people) including 500 herders + 3,000 cooperative members in two targeted regions.

Output 2.1: 500 herders (3,000 beneficiaries) receive appropriate livestock inputs to reinforce and replace their livestock production in two regions.

Output 2.2: 100 women cooperatives with at least 30 members/cooperative totalling 3,000 cooperative members receive adequate agricultural inputs (seeds, fertilizers and tools) and training to undertake the vegetable gardening campaign (September-October).

- Detailed assessment, on recovery needs
- Identification of farmer households on needs about agriculture
- Distribution of agriculture inputs (seeds, tools, fertilizers etc.) by volunteers
- Post distribution monitoring and impact analysis
- Awareness sessions on destocking during the lean period (4 awareness sessions x regions)
- Detailed assessment and market analysis on recovery needs
- Identification of beneficiary cooperatives
- Agricultural inputs distribution (seeds, tools, fertilizers, etc.) for 100 women groups
- Organize CTP pilot distribution with a limited number of cooperatives
- Beneficiaries training on productive best practices, management, market basis and finance
- Post distribution monitoring and monitoring and impact analysis

Achievements

None was reported

Challenges

The low funding coverage 4% has not allowed the implementation of the planned activities.

Lessons learned

None was reported

Health and Care

Health and Care

Outcome 3: To improve the immediate nutritional status of children under 2, pregnant and lactating women for 2,000 beneficiaries

Output 3.1: Assisting the screening and referral to existing health facilities in two regions of children under 2, lactating and pregnant women at risk of malnutrition until end of lean period (September-October 2015)

Output 3.2: Distributing enriched food for 2,000 children under 2, lactating and pregnant women in targeted regions to prevent malnutrition with these vulnerable targets for three months

Activities:

- Information for authorities / setting up of targeting committee /awareness session in village assemblies
- Training on malnutrition screening by MUAC and referral and on delivery of messages on nutrition and health
- Screening of child and women (pregnant and lactating) at risk of malnutrition in targeted communities and referral to existing nutrition/health facilities
- Identification of populations targeted by the activity (PLW, under 2 years children) resulting from very poor households targeted by the project
- Fortified food for distributions (3 distributions)
- Performing social mobilization activities on causes of malnutrition, best practices about nutrition ways of improving family diets using available resources, specific food needs for sick and other vulnerable people etc., These messages will be established with partners and government agencies to establish key messaging
- Monitoring and evaluation of the activity

Outcome 4: Increase the medium-term access to safer water and the promotion of good hygienic practices among the most vulnerable communities in the targeted regions

Output 4.1: 1,000 households (6,000 beneficiaries) reached through hygiene promotion

Activities:

- Workshop to elaborate and adapt sensitization material
- Community sensitization on main hygiene practices and distribution of soap, aqua tabs and any other disinfectant materials according to Sphere standards
- Monitoring and evaluation of the activity

Achievements

In Magtaa Lahjar: A total of 1,000 beneficiaries were screened and registered as beneficiaries for the nutritional supplement distribution and received the enriched food. The National Society referred 81 severely malnourished beneficiaries (47 children and 34 pregnant and breastfeeding women) to health facilities for medical care. A total of 570 mothers were reached through sensitization on good nutritional practices.

In Tintane: The 1,000 registered and targeted beneficiaries received nutritional supplement. Mauritanian Red Crescent (MRC) referred 19 severely malnourished beneficiaries to health facilities for medical care. 510 mothers were reached through sensitization on good nutritional practices.

The nutrition supplement distribution activities were followed by demonstration on how to cook the enriched flour.

Regarding the community sensitization on main hygiene practices, they reached a total of 1,500 households or 9,000 beneficiaries. In Magtaa Lahjar, 800 hygiene kits were distributed to 800 households.

Challenges

The enriched flour could not be accessed on the local market. The Mauritanian Red Crescent with support from the IFRC had to procure the flour from Senegal in the process delaying the distribution activities.

Lessons learned

None reported.

Disaster preparedness and risk reduction

Population to be assisted: [Provide a concise summary of the **target population**, including the selection rationale as it applies to their vulnerabilities and the sector, **with an update if this target was revised**].

Disaster preparedness and risk reduction

Outcome 5: Improve NS capacity on community, branch and national level in preparation, risk reduction and response to future crisis.

Output 5.1: The capacity of staff and volunteers (10 staff and 50 volunteers) are built in food & nutrition security, livelihoods and cash transfer programing and in better information collection and operational

efficiency in targeted regions

- NDRT Food Security refresher course
- Volunteers operational training in different activities (assessment, distribution, nutrition awareness)
- Training and Capacity Building in Livelihoods and Cash Programming among the staff and volunteers (implementation of a pilot in CTP)
- Deployment of food security RDRT, a HES and a CTP delegate for training and capacity building in CTP, FS and Livelihoods

Achievements

In its endeavours to carry out the relief activities in an effective and efficient manner, the Mauritanian Red Crescent (MRC) invested in trainings. The trainings targeted 30 volunteers from the two intervention areas, 2 supervisors and two technicians from the National Society. The training enhanced the volunteers' knowledge of malnutrition, screening techniques, referral of severe malnutrition cases to health facilities, recording, water, hygiene and sanitation, awareness techniques for behavioural change.

With support from the British Red Cross, 25 volunteers benefited from NDRT training on food security, livelihoods, nutrition and cash transfer programming organized in Nouakchott from in June-July 2015.

It is worth mentioning that an additional training on basic concepts in Food Security reached 20 Red Cross volunteers from Red Crescent branches in Tintane and Magtar.

The Human Resource capacity of the Mauritanian Red Crescent was enhanced through the recruitment of operational staff and trained Red Crescent volunteers. These teams benefited from a technical support of a RDRT deployed by IFRC as well as an Operations manager who was recruited. MRC's Food Security Coordinator, Health coordinator, administration and logistics officer, reporting officer and Watsan officer were fully involved in the operation.

Challenges

The low funding coverage did not allow the recruitment of additional international staff (CTP delegate) as planned.

Lessons learned

None reported.

Quality Programming / Areas Common to all Sectors

Quality programming/areas common to all sectors

Outcome 6: The quality of the operation is ensured and documented by participatory in-depth needs assessments and accountability measures.

Output 6.1: The management of the operation is informed by a comprehensive monitoring and evaluation system which will enhance branch capacity to report on the operations.

Activities:

- Coordination and engagement with key stakeholders (NDMA, MOA, MoH, Community leaders, INGOs, Red Cross and Red Crescent Movement, UN Agencies and funding agencies).
- Joint monitoring of operations by MRCS & IFRC
- Preparation of the FS & Resilience Media Campaign
- Conduct lesson learned workshop with targeted branches and HQ staff.
- Beneficiary communication for all livelihood activities
- Evaluation of assistance impact in supported households (related to all livelihoods activities)
- Volunteer Insurance
- Activity and Response Monitoring
- Coordination within the Regional Strategic Framework

Achievements

The Mauritanian Government led and undertook the coordination of actions of national agencies (the Food Security Commissioner (CSA), the Agriculture Department) and the humanitarian actors, including WFP, FAO,

UNICEF, OCHA, ACF, Oxfam and Save the Children. The National Society regularly participated in the coordination meetings held at national and regional levels. Besides, the Mauritanian Red Crescent Communications department ensured the visibility to this food security operation through; publication of training and distribution activities. IFRC provided support to the National Society through advocacy to foreign embassies present in Mauritania as well as other technical and financial partners.

Challenges

The low funding coverage did not allow some activities such as a lesson learned workshop to be held. Besides, during the reporting period, a SMART assessment and a micro planning jointly conducted with the Government Nutrition Technical department allowed raise the concern regarding flooding risk in Brakna region. Indeed, the main interventions areas were flooded which challenged their access. The concerned villages are located in the western part of Magtaa Lahjar and are cut with supply routes during a long period after the raining season. This resulted to a high mobility of the populations forced to settle elsewhere awaiting the withdrawal of the flooding water which may take several weeks.

This situation negatively impacted the implementation of the response activities and slowed down the work. Indeed the operational team was obliged to wait two to three days after the rains to go in the field.

Lessons Learned

None reported.

Contact Information

For further information specifically related to this operation please contact:

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and peace.
