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**Executive Board  
First Regular Session**

**Rome, 18–19 February 2013**

# REPORTS OF THE EXECUTIVE DIRECTOR ON OPERATIONAL MATTERS

Agenda item 9

*For information\**



Distribution: GENERAL  
**WFP/EB.1/2013/9-A/1**  
4 January 2013  
ORIGINAL: ENGLISH

## DEVELOPMENT PROJECTS APPROVED BY THE EXECUTIVE DIRECTOR (1 JANUARY–31 DECEMBER 2012) — GUINEA-BISSAU 200322

### Food and Nutrition Assistance to Malnourished Children and HIV-and TB-Affected People

Number of beneficiaries	11,300
Duration of project	12 months (1 January–31 December 2012)
WFP food tonnage	990 mt
<b>Cost (United States dollars)</b>	
WFP food cost	573,903
Total cost to WFP	1,402,641

\* In accordance with the Executive Board's decisions on governance, approved at the Annual and Third Regular Sessions, 2000, items for information should not be discussed unless a Board member specifically requests it, well in advance of the meeting, and the Chair accepts the request on the grounds that it is a proper use of the Board's time.

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## NOTE TO THE EXECUTIVE BOARD

**This document is submitted to the Executive Board for information.**

The Secretariat invites members of the Board who may have questions of a technical nature with regard to this document to contact the WFP staff focal points indicated below, preferably well in advance of the Board's meeting.

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Should you have any questions regarding matters of dispatch of documentation for the Executive Board, please contact Ms I. Carpitella, Senior Administrative Assistant, Conference Servicing Unit (tel.: 066513-2645).

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## ABSTRACT

1. Guinea-Bissau has a population of 1.6 million, of whom 30 percent live in urban areas. It is one of the poorest countries in the world, ranking 176 out of 187 countries in the 2011 human development index. Two-thirds of the population live on less than US\$2 per day.
2. Guinea-Bissau's infrastructure and social services have suffered from more than 20 years of socio-political unrest and related destruction, looting and neglect. Schools, health facilities and transport infrastructure are in very poor condition. Access to basic services – including clean and safe water, health, education and electricity – is extremely limited. Only 53 percent of the rural population have access to potable water, 5 percent to latrines, and 38 percent to health care.
3. The HIV prevalence in Guinea-Bissau of 2.6 percent is one of the highest in West Africa. The incidence of tuberculosis (TB) is also high (203 cases per 100,000 people) and co-infection with HIV is 38 percent. Adherence to treatment remains low with high default rates and high mortality in the first weeks of initiation of treatment due to inadequate access to food. Twenty-five percent of households with people living with HIV and TB are food-insecure, while 19 percent of clients on anti-retroviral therapy and 42 percent of clients being treated for TB are undernourished.
4. While the prevalence of acute malnutrition in children under 5 is decreasing, it is still classified as “poor” by the World Health Organization (6 percent in 2010), and the prevalence varies between 4 and 8 percent regionally. Chronic malnutrition remains serious at 32 percent, with regional prevalence ranging from 20 to 42 percent.
5. The proposed development project will focus on: i) providing nutrition support to 2,200 people living with HIV and people affected by TB, accompanied by nutrition assessment, education and counselling activities pre- and post-treatment and supplementary food support for their households; ii) supporting the treatment of moderate acute malnutrition in 2,000 children aged 6–59 months and 1,000 pregnant and lactating women through targeted supplementary feeding; and iii) building national capacity towards full national ownership of hunger solutions.
6. This development project is part of WFP's transition from humanitarian assistance in Guinea-Bissau towards development action. It is aligned to WFP Strategic Objectives 4 and 5, moving towards full national ownership of hunger solutions in support of the Government's National Poverty Reduction Paper. This 12-month project will serve as a transition between the protracted relief and recovery operation implemented from 2009 to 2011 and a future country programme that will be aligned with the next United Nations Development Assistance Framework cycle (2013–2017). The project directly contributes towards Millennium Development Goals 1, 4, 5 and 6.