

Executive Board Second Regular Session

Rome, 14–17 November 2011

COUNTRY PROGRAMMES

Agenda item 8

For approval on a no-objection basis

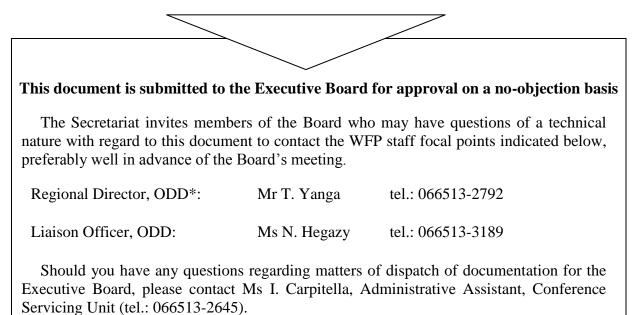


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COUNTRY PROGRAMME GHANA 200247 (2012–2016)

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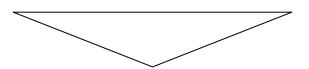
NOTE TO THE EXECUTIVE BOARD



* Regional Bureau Dakar (West Africa)



EXECUTIVE SUMMARY



Ghana is a food-deficit country, but positive economic developments in recent years have led Ghana to achieve lower middle-income status. The country is largely on track to achieve Millennium Development Goal 1 - Eradicate extreme poverty and hunger – but is lagging on others. Ghana is ranked 130th out of 169 countries in the 2010 human development index, and has slipped into the "low human development" category.

There are large disparities in poverty levels between the north and south of Ghana. Seventy percent of the poor live in the three regions in the north: Northern, Upper East and Upper West. Acute malnutrition rates in these regions are considered "serious" by World Health Organization standards: 13 percent in Northern, 11 percent in Upper East and 14 percent in Upper West. While the stunting rate is 28 percent nationally, in the Northern and Upper East regions it is "serious" at 32 and 36 percent respectively. Recurrent droughts and floods increase communities' vulnerability to food insecurity and malnutrition. The three northern regions have the highest rates of out-of-school children, varying from 18 to 28 percent. Ghana's HIV prevalence rate for adults is 3 percent, while food insecurity among people living with HIV in the most vulnerable regions ranges from 25 to 42 percent.

Country programme 200247 targets beneficiaries in the poorest, most food-insecure and HIVaffected regions. It will assist a total of 879,000 people over its five-year period. Based on the Ghana country strategy for 2012–2016, the country programme's goal is to enhance the capacity of the Government and communities to ensure sustainable food and nutrition security through: i) support for primary and girls' education; ii) nutrition support for vulnerable groups; and iii) resilience against climatic shocks and support for livelihoods. The Purchase for Progress initiative will promote smallholder farmers' access to markets.

The programme contributes to Millennium Development Goals 1 to 7. It is aligned with WFP's Strategic Objectives 2, 4 and 5,¹ and the 2012–2016 United Nations Development Assistance Framework. WFP will continue to advocate with the Government to prioritize food security and nutrition issues, and will consult other development partners for complementary partnerships and joint programming.

Country programme 200247 addresses recommendations from the evaluation of the previous country programme by adopting a sharper focus, targeting the most deprived populations and districts, and establishing clear hand-over strategies, including government capacity development for more effective safety nets, governance and policy frameworks.

¹ Strategic Objective 2 – Prevent acute hunger and investment in disaster preparedness and mitigation measures; Strategic Objective 4 – Reduce chronic hunger and undernutrition; and Strategic Objective 5 – Strengthen the capacity of countries to reduce hunger, including through hand-over strategies and local purchases.



DRAFT DECISION*

The Board approves on a no-objection basis country programme Ghana 200247 (2012–2016) (WFP/EB.2/2011/8/3), for which the food requirement is 52,317 mt at a total cost to WFP of US\$44.9 million.

^{*} This is a draft decision. For the final decision adopted by the Board, please refer to the Decisions and Recommendations document issued at the end of the session.



SITUATION ANALYSIS

Political, Social and Economic Context

- 1. Ghana's 2010 census reported a population of 23.5 million people. Its rankings for political rights, civil liberties and freedom of the press are among the highest in Africa.² Successful political and economic reforms facilitated Ghana's peaceful transfer of power in the 2008 elections and have led the country to lower middle-income status.
- 2. Ghana is largely on track to attain Millennium Development Goal (MDG) 1,³ but is lagging behind on MDGs 4 and 5.⁴ Ghana presents a mixed picture of development, with large rural–urban and inter-regional disparities. In 2010, it ranked 130th out of 169 countries in the human development index, and had slipped from the "medium" into the "low" human development category.
- 3. Subsistence farming accounts for 39 percent of the gross domestic product and employs 60 percent of the workforce. Twenty-nine percent of the population lives in extreme poverty, and subsistence farming is the predominant livelihood for the poor. Seventy percent of Ghana's poor are concentrated in the north, in Northern, Upper East and Upper West Regions.⁵
- 4. Over the past decade, adult HIV prevalence has stabilized at 3 percent nationally,⁶ ranging from 2 percent in Northern Region to more than 4 percent in Eastern Region; six regions have prevalence of 3 percent or higher. Increased mortality of people living with HIV (PLHIV) is associated with their poor nutrition status.⁶
- 5. Twenty-seven percent of primary school-age children do not attend school, owing to poverty, food insecurity and seasonal migration for employment. There are significant gender gaps in school completion rates. Northern Ghana has the highest rates of out-of-school children, ranging from 18 to 28 percent; the gender parity index in Northern Region is 0.85, attesting to a large disparity in school attendance between girls and boys.⁷
- 6. Food security in northern Ghana remains susceptible to weather-related shocks; climate variables show increasing mean annual air temperatures and increasingly frequent extreme temperature events.⁸ Desertification is increasing by 20,000 ha a year, significantly contributing to drought-related vulnerability. Since the late-1990s, severe floods have been increasingly frequent in northern regions. Floods affected more than 300,000 people in 1999, 630,000 in 2007/08 and 140,000 in 2010, causing deaths, damaging farmlands and destroying livelihoods.

⁸ Government of Ghana. 2008. *Ghana Climate Change Impacts, Vulnerability and Adaptation Assessments*. Published under the Netherlands Climate Assistance Programme, Accra.



² http://info.worldbank.org/governance/wgi/sc_chart.asp- (accessed January 2011).

³ United Nations Development Programme (UNDP). April 2010. *Ghana MDG Report*. Available at www.undp.org/africa/documents/mdg/ghana_april2010.pdf

⁴ MDG 1 – Eradicate extreme poverty and hunger; MDG 4 – Reduce child mortality rates; and MDG 5 – Improve maternal health.

⁵ Ghana Statistical Service (GSS). Ghana Living Standards Survey 4, 2005–2006. Accra.

⁶ National AIDS/Sexually Transmitted Infections (SDI) Control Programme/Ghana Health Service (GHS). 2010. 2009 HIV Sentinel Survey Report. Accra.

⁷ Ghana Educational Management Information Systems (a government database).

Food Security and Nutrition

- 7. Currently, 1.2 million people are food-insecure, and 2 million are vulnerable to food insecurity, particularly during the March–September lean season or following shocks such as floods and drought.⁹ Food insecurity is highest in Upper West, Upper East and Northern Regions, at 34, 15 and 10 percent, respectively.
- 8. The most food-insecure livelihood groups are subsistence farmers and pastoralists, cash crop farmers, small-scale processors of food and unskilled labourers. The underlying factors of food insecurity are high food prices, the impact of the global financial crisis and natural hazards. At the household level, food insecurity is compounded by lack of education, high dependence on small-scale agriculture, limited market access and poverty.⁹
- 9. Food insecurity is also high among PLHIV, reaching 42 percent in Upper East, 37 percent in Upper West, 36 percent in Ashanti, and 28 percent in Northern Region.¹⁰ PLHIV often face malnutrition in addition to the effects of HIV, hindering both their uptake and the efficacy of anti-retroviral treatment (ART).
- 10. Among children under 5, the global acute malnutrition rate is 9 percent nationally, but in the three northern regions during the lean season can reach 13.5 percent.¹¹ This is considered "serious" according to World Health Organization (WHO) thresholds. The underweight rate is 14 percent nationally, reaching 27 percent in the Upper East region. The chronic malnutrition/stunting rate is 28 percent nationally, and exceeds WHO's "serious" threshold of 30 percent in Northern and Upper East regions.
- 11. Based on body mass index (BMI), 9 percent of women of reproductive age from 15 to 49 years – are malnourished. Low pre-pregnancy BMI contributes significantly to a maternal mortality rate of 350 deaths per 100,000 live births¹² and high child mortality¹³ of 80 per 1,000 live births.
- 12. Anaemia affects 78 percent of children aged 6–59 months and 59 percent of women. Iodine deficiency also contributes to adverse pregnancy outcomes.

Government Strategies and Policies

- 13. In 2008, Ghana became a signatory to the Comprehensive Africa Agriculture Development Programme (CAADP) and committed to allocating 10 percent of its national budget to agriculture, particularly to improve the productivity of smallholder farmers. The second Food and Agriculture Sector Development Policy was based on CAADP, with the goal of promoting sustainable economic growth and social development.
- 14. Ghana's Shared Growth Development Agenda for 2010–2013 identifies seven thematic areas where food security and nutrition are considered to be essential cross-cutting issues for addressing human development. It calls for efforts to reduce malnutrition-related disorders, to reduce deaths among infants, young children and women of reproductive age, and to promote the consumption of locally available and nutritionally adequate foods. The Health Sector Medium-Term Plan for 2010–2013 envisages development of a national

¹³ GHS. Multiple-Indicator Cluster Survey 2006. Accra.



⁹ Republic of Ghana/WFP. May 2009. Comprehensive food security and vulnerability analysis. Accra.

¹⁰ WFP/Ghana AIDS Commission/GHS. November 2010. Draft Report of Food Security Assessment of People Living with HIV/AIDS. Accra.

¹¹ GSS/GHS/ICF Macro. 2009. Ghana Demographic and Health Survey. Accra.

¹² A 44 percent decrease from 630 in 1990; WHO. 2010. Trends in Maternal Mortality: 1990 to 2008. Geneva.

nutrition policy as a platform for tackling malnutrition. Preparation for the second Ghana Joint Assistance Strategy (2011–2014) has recently been discussed among development partners; WFP will be fully engaged in this process.

- 15. The National Strategic Plan for HIV (2011–2015) includes food and nutrition support for vulnerable households as part of the comprehensive HIV/AIDS response. This links to WFP's HIV and AIDS policy and to priority areas of the Joint United Nations Programme on HIV/AIDS (UNAIDS) Outcome Framework, 2009–2011.
- 16. The Government is committed to bridging the developmental gap between northern and southern Ghana through the Savannah Accelerated Development Authority (SADA). The SADA strategy adopts a growth and sustainable development approach to increase incomes among the poorest people. The aim is to transform the northern Ghanaian economy and society into a region of increased food productivity, with a buffer against persistent droughts and sporadic floods. WFP programme activities are fully aligned with the SADA strategy. Other government social protection policies and safety nets include:
 - the National Social Protection Strategy (NSPS), which includes Livelihood Empowerment Against Poverty (LEAP), a cash-based safety net programme for the ultra-poor;
 - the Ghana School Feeding Programme (GSFP) and the Capitation Grant, to increase access to education and boost local food production;
 - Community-based Management of Acute Malnutrition (CMAM) through the Ghana Health Service (GHS), which empowers communities to prevent, identify and respond to malnutrition.
- 17. The significant risks identified include new emergencies that could divert attention and capacity away from implementing longer-term programmes. To mitigate these risks, WFP plans to develop government capacity in emergency response. Contingency plans in government-led projects would be able to cope with anticipated emergencies.

PAST COOPERATION AND LESSONS LEARNED

- 18. An evaluation of country programme (CP) 104180 (2006–2011) concluded that WFP should continue activities through a subsequent CP, owing to the prevalence of food and nutrition insecurity in the three northern regions.
- 19. The evaluation found that on-site school meals and take-home rations (THRs) for girls had contributed to increased net enrolment. Gender parity was achieved in two of the three WFP-assisted northern regions, and attendance rates for girls increased in WFP-assisted schools. The evaluation recommended continuation of THRs for girls.
- 20. Collaboration between WFP and the GSFP had improved; the evaluation recommended that WFP focus on advocacy and policy dialogue with the Government, in partnership with the World Bank, and that it refocus its resources on fewer, needs-based target areas.
- 21. The evaluation found that supplementary feeding, and health and nutrition education components had contributed to reducing underweight and wasting, but had not adequately addressed stunting. The evaluation recommended that WFP focus supplementary feeding in districts with the highest levels of malnutrition, linking it to income-generating activities (IGAs), community-based management of malnutrition, livelihood programmes, water and sanitation interventions, and improved feeding practices.
- 22. WFP was advised to facilitate linkages between the women's groups engaged in food fortification/milling and other marketable skills and the community health and nutrition



centres (CHNCs). The evaluation emphasized that WFP should improve the monitoring of timeliness and quality control, particularly with government counterparts; quality/efficiency assurance along the supply chain, including storage facilities; and appropriate activity outcomes.

23. The evaluation recommended a narrower geographical focus for the CP. WFP has therefore concentrated its development activities in the poorest districts of the three most vulnerable regions.

STRATEGIC FOCUS OF THE COUNTRY PROGRAMME

- 24. Country programme 200247 supports the country strategy aim of contributing to increased government and community capacity to ensure sustainable food and nutrition security for Ghanaians. In order to achieve this, national capacity development efforts must address the underlying causes of poverty, food insecurity and malnutrition in the targeted areas pertaining to:
 - Iow levels of household education (particularly among women), hygiene and income;
 - malnutrition among vulnerable groups including children under 5, pregnant and lactating women, and PLHIV;
 - loss of food crops and livelihoods among the rural poor, as a result of recurring natural disasters including floods and droughts; and
 - Iow productivity and poor market access physical and economic for smallholder farmers.
- The three components of this CP address these underlying causes of vulnerability to 25. food insecurity and malnutrition, particularly in the northern regions. In line with WFP's mandate, the CP emphasizes direct assistance to the vulnerable to address root causes of poverty and food insecurity. However, the CP also includes attention to the means by WFP provides assistance _ enhancing cooperation, training. which and responsibility-sharing mechanisms with national and sub-national partners for each CP component - so as to promote national systems and capabilities to deliver essential assistance to those in need.
- 26. The CP's strategic focus is aligned with the Ghana Shared Growth and Development Agenda and its Human Development, Productivity and Employment component; focus areas of the Accelerated Agricultural Modernization and Sustainable Natural Resource Management initiative; MDGs 1 to 7;¹⁴ and United Nations Development Assistance Framework (UNDAF) thematic areas 1, 2 and 3.¹⁵ It addresses WFP Strategic Objectives 2, 4 and 5.
- 27. The three components of the CP are:
 - support for primary education and girls' education Strategic Objectives 4 and 5;
 - nutrition support for vulnerable groups Strategic Objective 4; and
 - ▶ resilience to climate shocks and support for livelihoods Strategic Objective 2.
- 28. Based on geographical distributions of poverty, food insecurity, malnutrition and HIV, and the occurrence of natural disasters, all CP components apart from some HIV-related

¹⁵ UNDAF thematic areas 1 – Food security and nutrition; 2 – Human development and productive capacity for improved social services; and 3 – Sustainable environment, energy and human settlement.



¹⁴ MDG 2 – Achieve universal primary education; MDG 3 – Promote gender equality and empower women; MDG 6 – Combat HIV/AIDS, malaria and other diseases; and MDG 7 – Ensure environmental sustainability.

activities – will target the three vulnerable northern regions. The CP has gender-sensitive beneficiary targeting, supports gender parity in education, and promotes increased access to IGAs for women. It aims to empower marginal groups to reduce poverty and improve food and nutrition security.

- 29. Cash transfers and/or vouchers to support the Government's urban poverty-reduction programmes such as LEAP, may be included through a budget revision following a feasibility assessment in the urban areas of Accra, Tamale and Kumasi.
- 30. To help ensure ownership and gradual hand-over to the Government, a school feeding expert will be seconded to the GSFP Secretariat to support the development of a school feeding policy and the transition to sustainable home-grown school feeding (HGSF) that links school feeding to smallholder farmers, re-targets schools based on needs, and ensures cost-effectiveness and an appropriate school feeding model.
- 31. Collaboration with United Nations partners will increase through joint programming. WFP, the Food and Agriculture Organization of the United Nations (FAO), the United Nations Children's Fund (UNICEF) and WHO will help the Ministry of Health develop a nutrition policy. The REACH partnership aims to reduce child hunger and undernutrition.
- 32. WFP will support the Ministry of Food and Agriculture's expansion of the Food Security and Nutrition Monitoring System (FSNMS) from three to five regions. Partnerships for climate change adaptation and sustainable livelihoods will be developed with the United Nations Development Programme (UNDP) and FAO. The National Disaster Management Organization will receive capacity development on contingency planning, early warning and emergency assessment. Support to IGAs and community capacity development will sustain the nutrition interventions when they are handed over to communities at the end of the CP.



TABLE 1: BENEFICIARY COVERAGE BY COMPONENT			
	Men/boys	Women/girls	Total
Component 1 – Support for primary education and girls' education	75 000	135 000	210 000
Children receiving school meals	75 000	75 000	150 000
Girls receiving THRs ¹⁶	-	60 000	60 000
Component 2 – Nutrition support for vulnerable groups	255 384	314 616	570 000
Supplementary feeding for malnourished pregnant and lactating women to prevent chronic malnutrition in children under 2	-	60 000	60 000
Targeted supplementary feeding for malnourished children 6–59 months	240 000	240 000	480 000
Nutrition support for ART clients	2 520	3 480	6 000
Household food support for ART clients	12 864	11 136	24 000
Component 3 – Resilience to climate shocks and support for livelihoods	48 607	50 118	98 725
FFW	30 013	33 387	63 400
IGA (FFT)	18 594	16 731	35 325
TOTAL	378 991	499 734	878 725

Component 1: Support for Primary Education and Girls' Education

- 33. The objectives of this component are to increase access to education, improve school attendance and gender parity, reduce micronutrient deficiencies, and improve the capacity of GSFP. Through a complementary P4P initiative, WFP and the Government will increasingly source the food for school feeding from smallholder farmers, thereby increasing farmers' income through access to markets. This component is in line with WFP Strategic Objectives 4 and 5.
- 34. WFP will deliver school meals to targeted public primary schools and provide THRs for girls in Northern, Upper West and Upper East Regions and the Millennium Village of Bonsaaso. Scholarship awards for needy girls promote education for girls among communities.¹⁷
- 35. A hot and nutritionally balanced meal will be provided on every school day, consisting of cereal, pulses, fortified vegetable oil, iodized salt and micronutrient powder (MNP). THRs will target girls in the seven districts¹⁸ of the Northern Region, where gender disparity remains high. Girls in grades 1 to 3 of junior high school with 80 percent attendance will receive a monthly THR of 11 kg of cereals, vegetable oil and salt, with a market value of approximately US\$15.

¹⁸ Bunkurugu, Gushiegu, Karaga, Sawla-Tuna-Kalba, Yendi, Namumba South and ZabzuguTatale districts.



¹⁶ Of these 30,000 girls are in grades 7 to 9, so are additional to the beneficiaries of school meals.

¹⁷ Awards are financed by the private sector as a one-off payment of US\$400 per girl. To date, 90 girls have received awards, and an additional 100 will be awarded in 2011.

- 36. WFP will continue to provide institutional support and technical inputs to the Government's School Feeding Policy Framework, focusing on WFP/World Bank quality standards for:
 - support for development of the national policy on school feeding;
 - demonstration of different nutritionally balanced, cost-effective menus;
 - improved needs-based targeting; and
 - linking school caterers to smallholder farmers.
- 37. Additionally, WFP and the Partnership for Child Development¹⁹ are providing institutional and technical support to the GSFP Secretariat through the placement of two consultants in the Ministry of Education to support monitoring and evaluation (M&E), and linkages between the school meals programme and local food production.
- 38. Under a realistic and practical hand-over strategy for the transition to full government management and financing of school meals, WFP will begin by covering 40 percent of requirements and GSFP covering 60 percent. Starting from 2014, the number of students covered by WFP-assisted schools will be gradually reduced and, subject to an evaluation, programmes for about 75 percent of them will be handed over to the Government by 2016. The capacity development and technical support including local food procurement are scaled up to assist the Government in meeting the eight quality standards of WFP's school feeding policy.²⁰ This will involve partnerships with the ministries of Education, Local Government and Rural Development, Food and Agriculture, Health, and Employment and Social Welfare; the Ghana Education Service; and the World Bank, the Partnership for Child Development and UNICEF. The Government has already committed to this hand-over strategy and expressed its commitment to reaching 1 million school children by the 2011/12 scholastic year.

Component 2: Nutrition Support for Vulnerable Groups

- 39. The objectives of this component include prioritizing interventions targeting children and pregnant and lactating women during the critical 1000-day window of opportunity from the womb to two years of age and improving government capacity to manage effective and sustainable nutrition safety nets. The component aims to reduce chronic malnutrition in children under 2 and acute malnutrition in children under 5, and to support improved nutrition among ART clients. Activities will include:
 - prevention of chronic malnutrition/stunting among children under 2;
 - ▶ treatment of moderate acute malnutrition in children aged 6–59 months;
 - nutrition support to ART clients and their families;
 - support for development of a national nutrition policy, in collaboration with UNICEF, FAO and WHO, and within the REACH partnership.
- 40. *Prevention of stunting*. To help prevent stunting during gestation, malnourished pregnant women in the five districts of Northern and Upper East Regions with the highest chronic malnutrition rates will receive rations of fortified foods during the lean season, from as early in their pregnancies as possible²¹ for up to seven months. As part of a larger package to prevent chronic malnutrition, the mother-and-child health and nutrition programme will

²¹ Nutrition status determined through mid-upper arm circumference of less than 23 cm.



¹⁹ The Partnership for Child Development is a global consortium of civil society organizations, academic institutions and technical experts. According to its website, it engages specific experts, in specific countries, on specific issues.

²⁰ The Government has endorsed these standards.

include partners' activities and WFP income-generating and livelihood activities aimed at increasing the availability of micronutrient-rich foods, including fortified cereal meals, iodized salt and fortified blended foods.

- 41. *Treatment of acute malnutrition.* Targeted supplementary feeding of children aged 6–59 months with moderate acute malnutrition will be provided in the districts with the highest global acute malnutrition levels. In line with national standards, entry and discharge criteria for children under 5 will be based on anthropometric measurements.²² During the seven-month lean season, when global acute malnutrition rates exceed 10 percent, a THR of corn-soya blend++ (CSB++) will be provided for children aged 6–23 months, while those aged 24–59 months will receive a hot meal of fortified food at a CHNC, on an average of five days per week.
- 42. Nutrition activities are fully integrated into government plans for improving nutrition among vulnerable groups, and will be implemented through GHS centres in coordination with other health and nutrition activities. Children's carers will share the cooking of meals at CHNCs. WFP will ensure that the CMAM model integrates supplementary feeding with complementary activities such as IGAs for milling, fortification, food processing, etc. and health/nutrition education. Local management committees will ensure community involvement and ownership. Women's groups engaged in IGAs will contribute 10 to 15 percent of their proceeds to CHNCs to ensure sustainability, and capacity will be enhanced for the gradual hand-over of centres to communities and local authorities. WFP will phase out its assistance as nutrition in the targeted areas improves and as communities acquire the capacity to run centres.
- 43. Support for people living with HIV. WFP's nutrition support for PLHIV began under protracted relief and recovery operation 200046, which ends in December 2011. Poor nutrition among PLHIV can have adverse consequences on disease progression and adherence to treatment, with additional impact on livelihoods and income.²³ Malnourished ART clients with BMI below 18.5 will receive food assistance for up to six months, as will their family members, identified through a food security assessment questionnaire. This will be through a monthly nutrition supplement of CSB, pulses, vegetable oil and iodized salt, and a family ration in line with the National HIV Nutrition Protocol. When their BMI exceeds 18.5, clients will be discharged. Once they recover and regain their productivity, livelihood support initiatives will help them become self-reliant, preventing the need for them to receive food assistance indefinitely.
- 44. The Ghana Health Service will provide nutrition and food support for vulnerable groups, while the Ghana AIDS Commission, the National AIDS Control Programme and UNAIDS provide guidance on an HIV policy framework. Collaboration with the Food and Nutrition Technical Assistance Project II will facilitate synergies with the Food by Prescription initiative and CMAM. WFP, FAO, UNICEF and WHO will support the Ministry of Health's development of a national nutrition policy.

Component 3: Resilience to Climate Shocks and Support for Livelihoods

45. The objective of this component is to increase physical and economic resilience to extreme weather events through targeted reconstruction/rehabilitation interventions, diversification of livelihood opportunities and reduction of poverty among communities in the three northern regions. Technical assistance will be provided to strengthen the national FSNMS. This component is in line with WFP Strategic Objective 2.

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



 $^{^{\}rm 22}$ Weight-for-height of between 2 and 3 z-scores below the reference.

- 46. Interventions will include water harvesting, de-silting of small dams for dry-season irrigation, rehabilitation of small irrigation infrastructure, flood mitigation works, tree planting, and seed multiplication for community reforestation. Activities will be supported through food for work (FFW), capacity development and provision of tools, technical assistance and project management. Participants will be selected from vulnerable groups on a project-by-project basis and will receive a family food ration of maize, beans, vegetable oil and iodized salt.
- 47. Activities will be identified through a participatory approach, and implemented and managed by village development committees, government institutions and other partners such as the German Agency for International Cooperation, the Japan International Cooperation Agency and United Nations agencies; it will use an area-based development approach in a maximum of ten communities in the districts most vulnerable to climate shocks.²⁴ WFP FFW activities will support initiatives such as the Government's flood mitigation strategy under the SADA programme. The community-based approach will include technical assistance and training for both community members and government counterparts. This aims to ensure ownership and sustainability of the interventions. Synergies will be created with the other CP components, to maximize impact. Community involvement will ensure the sustainability of assets once WFP food assistance ends.
- 48. Support for livelihoods will involve skills training for food-insecure groups including households headed by women, and others vulnerable to malnutrition and climate shocks. Activities will include seedling cultivation, reforestation, food processing/fortification, maize meal fortification, and re-bagging of iodized salt. Marketable skills such as baking, dyeing, weaving and embroidery will also be promoted. In addition to increasing incomes for targeted groups, some of these activities will also provide micronutrient-rich foods to complement the other CP components. Participants will receive a family ration of maize and salt for three months.
- 49. Income-generating activities will be aligned with the Government's NSPS, and will be implemented with community and government institutions, including the Ministry of Social Welfare's Department of Community Development. Local non-governmental organizations (NGOs) will develop training curricula.

²⁴ Central Gonja, East Gonja, Kpandai and West Mamprusi in Northern Region; Lawra, Wa East and Wa West in Upper West Region; and Talensi-Nabdam, Bawku West and Builsa in Upper East Region.



	TABLE 2: DAILY FOOD RATION BY COMPONENT (g/person/day)								
	Component 1: Support for primary education				Component 3: Resilience to climate shocks and support for livelihoods				
	Children receiving school meals	Girls receiving THRs	Children 6–23 months	Children 24–59 months	Pregnant and lactating women	PLHIV ART clients	HIV- affected households	FFW	FFT
Cereals	120	266	-	65	250	300	300	500	333
Pulses	30	-	-	-	-	20	20	50	-
CSB++	-	-	200	-	-	-	-	-	-
CSB	-	-	-	80	-	250	-	-	-
Vegetable oil	20	66	-	15	30	20	15	30	-
Salt	3	33	-	3	10	5	5	5	5
MNP	0.5*	-	-	-	-	-	-	-	-
Sugar	-	-	-	15	-	-	-	-	-
TOTAL	174	365	200	178	290	595	340	585	338
Total kcal/day	710	1 515	840	747	1 181	2 294	1 250	2 183	1 166
% kcal from protein	8.1	7.0	18.0	10.2	7.2	13.8	10.9	11.0	11.4
% kcal from fat	26.6	45.5	13.5	24.3	26.1	18.5	19.6	20.9	10.3
Feeding days per year (average)	93**	270	210	154	210	180	180	180	90

* 10 g provides the full recommended nutrient intake of micronutrients for 20 children. ** WFP covers some school feeding days; the remainder are met by the Government.



TABLE	TABLE 3: TOTAL FOOD REQUIREMENTS BY COMPONENT (mt)			
Commodity	Component 1: Support for primary education and girls' education	Component 2: Nutritional and food support for vulnerable groups	Component 3: Resilience to climate shocks and support for livelihoods	Total
Coarse cereals	16 388	8 912	6 766	33 066
Maize meal	-	4 140	-	4 140
Pulses	1 404	540	571	2 515
Vegetable oil	3 609	1 226	342	5 177
CSB	-	6 088	-	6 088
MNP	23	-	-	23
Salt	1 477	344	73	1 894
Sugar	-	416	-	416
TOTAL	22 901	21 666	7 752	52 317
% of total	44	41	15	100

PROGRAMME MANAGEMENT, MONITORING AND EVALUATION

- 50. The country office has developed a results-based M&E system developed that will be adapted to the CP and harmonized with UNDAF and government M&E systems. Adequate training and support will be provided to cooperating partners to ensure high-quality and timely reporting. Quarterly joint monitoring visits with the Government and other partners will identify weaknesses and strengths for improving programme quality. Follow-up surveys on nutrition, education and food security will be carried out with government institutions and other partners; studies and reports by cooperating partners will also be used to report on outcomes.
- 51. The country office will hold quarterly coordination meetings with concerned ministries to review CP implementation. At the sub-office level, coordination meetings will be held with regional authorities.
- 52. In 2014, a mid-term review of the CP will assess the degree of programme ownership at all levels of Government and in communities, and the Government's political and financial commitment to sustaining the programmes. A plan for gradual phase-out from school meals and nutrition and food support for vulnerable groups will be prepared and included in the CP action plan.
- 53. WFP has a country office in Accra; warehouses and a sub-office in Tamale, the capital of Northern Region; and two satellite offices/warehouses in Bolgatanga and Wa in Upper East and Upper West regions.
- 54. The evaluation report of CP 104180 stressed that it was crucial to have adequate staffing to ensure effective implementation and monitoring. The country office has added seven international and a number of national staff to reach a total staff of 60. The P4P unit has a coordinator and support staff at the country office and support staff at sub-offices.
- 55. Depending on availability and local price competitiveness against regional and international sources, WFP plans to purchase 60 percent of CP food locally, including



through P4P. WFP will conduct ongoing market analysis to expand the list of suppliers for local procurement. Support for local producers is also provided via the P4P programme through mechanisms such as forward contracting and the warehouse receipt system, which serves as a risk-management strategy. Procurement of food will be carried out at the right time – harvest time – to minimize the impact of food price volatility. WFP plans to purchase from a government buffer stock company that functions to stabilize domestic food prices.

- 56. Regular donor consultations and field visits will inform on progress on expected results. WFP has a good relationship with local donors and will continue mobilizing resources for the CP. During national donor consultations on the country strategy, donors indicated their satisfaction with WFP's strategic reorientation and priority interventions, which they recognize as valuable complements to Government and their own programmes.
- 57. A change in Ghana's income status resulting from prospective oil revenues, along with a shift to becoming a lower middle-income country, could reduce Official Development Assistance; this presents a contextual risk to funding the CP. However, WFP is a valued partner of the Government, in particular in the CAADP, Feed the Future and Global Agriculture and Food Security Programme context. This is expected to help secure additional funding from the Government. At the same time, WFP will continue to advocate with the Government to prioritize food security and nutrition issues and will consult other development partners for complementary partnerships and joint programming.
- 58. Other risks such as new emergencies and food price volatility have been identified and mitigation actions have been put in place. If necessary, WFP would launch emergency operations to address food requirements for natural disasters.
- 59. To ensure efficient programme management and M&E, the country office has developed a risk-management matrix for implementation of the country strategy process along with a risk register with mitigation measures. The country office will conduct risk and performance reviews and update the risk register regularly.



ANNEX I-A

BUDGET SUMMARY (<i>US\$</i>)				
	Component 1	Component 2	Component 3	Total
Food (<i>mt</i>) ¹	22 900	21 665	7 752	52 317
Food	13 972 811	12 489 694	3 833 135	30 295 640
Total by component	13 972 811	12 489 694	3 833 135	30 295 640
External transport				1 879 837
Other direct operational costs				1 838 719
Total direct operational costs				33 754 403
Direct support costs ²				7 915 120
Indirect support costs (7.0 percent) ³				2 935 052
TOTAL WFP COSTS				44 864 369

³ The indirect support cost rate may be amended by the Board during the project.



¹ This is a notional food basket for budgeting and approval. The contents may vary.

² 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	2 833 320	
Local staff – national officers	365 000	
Local staff – general service	2 035 000	
Local staff – overtime	42 000	
International consultants	118 000	
Local consultants	59 000	
Staff duty travel	739 000	
Subtotal	6 191 320	
Recurring expenses		
Rental of facility	90 000	
Utilities	210 000	
Office supplies and other consumables	150 000	
Communications services	180 000	
Equipment repair and maintenance	150 000	
Vehicle running cost and maintenance	300 000	
Office set-up and repairs	150 000	
United Nations organization services	30 000	
Subtotal	1 260 000	
Equipment and capital costs		
Vehicle leasing	204 000	
Communications equipment	123 000	
Local security costs	136 800	
Subtotal	463 800	
TOTAL DIRECT SUPPORT COSTS	7 915 120	



Results	Performance indicators	Risks, assumptions
UNDAF Outcomes	UNDAF outcome indicators	Risks: Natural disasters; in-country and/or
An additional 10% at least of households consume adequate levels of safe, nutritious foods and adopt positive dietary behaviour	Dietary diversity score	regional political instability
Women and children have improved and equitable access to and utilization of quality, high-impact maternal, neonatal and child health and nutrition interventions	Prevalence of underweight among children under 5 % of food-insecure and malnourished PLHIV/AIDS and	Assumptions: Economic growth is pro-poor; good level of resources mobilized; Governme commitment
Strengthened and scaled up national multi-sectoral, decentralized AIDS response to achieve ART universal access targets by 2016	affected families with improved access to nutrition support	
Socio-economically excluded and disadvantaged groups have increased access to education services and demonstrate increased attainment in literacy, numeracy and life skills	Attendance, enrolment and completion rates for girls and boys	
National systems and existing institutional arrangements for disaster management as defined in the Hyogo Framework for Action 2005–2015, and for climate change mitigation and adaptation are reinforced at district, regional and national levels	Gender parity index at junior high school level Flood early warning is issued regularly by 2015	
Component 1: Support for primary education and girls' educat	ion	
Strategic Objective 4 – Reduce chronic hunger and undernutri	tion	
Outcome 1 Increased access to primary education and human development	 Enrolment: average annual rate of girls and boys enrolled 	Government commitment to universal school enrolment and partnerships
	 Target 2016 = 55%, baseline 2010 = 40.6% ➢ Rate of girls and boys attendance in assisted primary schools, as % of total school days 	No reduction in official development assistant to Ghana
	Target 2016 = 100%; baseline 2010 = 98%	
	Gender ratio	
	Target 2016 = 0.80 ; baseline = 0.60	
	> Pass rate for girls and boys	
	Target 2016 = 60%; baseline = 37.2% ➤ Increased micronutrient intake	

ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Risks, assumptions
<i>Output 1.1</i> Sufficient quantity and quality of food rations distributed	 Numbers of targeted pupils receiving food rations, by gender and as % of planned figures Target = 100% Tonnage of food distributed, by type and as % of planned distribution Number of girls receiving THRs Target 2016 = 30,000 Tonnage of food distributed, by type and as % 	Adequate and timely funding Adequate partner support
Strategic Objective 5 – Strengthen the capacities of countries	of planned THR distribution s to reduce hunger, including through hand-over strategi Hand-over strategy developed and implemented	es and local purchase
Sustainable HGSF hand-over strategy developed and implemented		Political stability
Output 2.1 Capacity development of Ministry of Local Government and School Feeding Secretariat carried out through WFP-organized actions/training	 Number of Ministry and Secretariat staff members trained on school meals programme design and management Target 2016 = 100 Number of schools handed over to government HGSF programme Target 2016 = 308 	Adequate partners to support school meals Government commitment to gradual hand-over
Outcome 3 Increased marketing opportunities at national level with	 Food purchased locally, as % of food distributed in-country 	Continued Government commitment Political stability

Increased marketing opportunities at national level with cost-effective WFP local purchases

	ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Risks, assumptions	
Component 2: Nutrition and food support for vulnerable group	ups		
Strategic Objective 4 – Reduce chronic hunger and undernu	trition		
Outcome 4 Reduced level of malnutrition among pregnant and lactating women and children under 5	 Prevalence of stunting among children under 2 in targeted areas Target < 20%; baseline 28.2–39.4% Prevalence of underweight among targeted children under 5 (weight-for-age) Target < 20%; baseline 30.3–41.6% Prevalence of acute malnutrition among targeted children under 5 (weight for height) Target < 5%; baseline = 8% Perevalence of malnourished children Target < 5% Default rate of malnourished children Target < 5% Supplementary non-response rate Target < 5% Death rate Target < 3% Prevalence of iron-deficiency anaemia among children under 5 Target = 85%; baseline = 92% Prevalence of iron-deficiency anaemia among pregnant and lactating women Target = 70%; baseline = 85% 	Continued socio-political stability Continued government and donor community commitment No major food production shortfall or disease outbreak	

	٩	NNEX II: LOGICAL FRAMEWORK	
Res	sults	Performance indicators	Risks, assumptions
	<i>Itput 4.1</i> fficient quantity and quality of food distributed to children	Numbers of people receiving food, by category	Adequate and timely funding
und	under 5, and women of childbearing age, particularly pregnant and lactating, in targeted areas	 and as % of planned figures Tonnage of food distributed, by type, as % of planned distribution 	Adequate partner support
		 Quantity of fortified foods distributed, by type, as % of planned distribution 	
Incr	rtcome 5 reased production capacity for fortified food and special trition products	 % increase in production of fortified products Target 2016 = 30% 	
	Itput 5.1 cally fortified food products distributed in schools	 Tonnage of locally produced fortified food, by type Tonnage purchased from local communities through P4P scheme 	
Incr	t come 6 reased survival of adults and children with HIV after 6 and months of ART	 ART survival rate 6–12 months after initiation Target to be determined 	Continued government and donor communi commitment No major food production shortfall
Suf	Itput 6.1 Ifficient quantity and quality of food distributed to targeted ART ents and their food-insecure households	 Numbers of targeted people receiving food, by category and as % of planned figures Tonnage of food distributed, by type, as % of planned distribution Quantity of fortified foods, distributed, by type, as % of planned distribution 	
Imp	tcome 7 proved nutritional recovery of targeted ART clients in first months of ART	 Prevalence of malnutrition among targeted ART clients Target to be determined 	
Imp	t come 8 proved food consumption over assistance period for targeted HIV and their families	 Household food consumption score Target = > 35 for 80% of affected households 	

ANNEX II: LOGICAL FRAMEWORK			
Results	Performance indicators	Risks, assumptions	
Component 3: Resilience to climate shocks and support for live	elihoods		
Strategic Objective 2 – Prevent acute hunger and invest in disa	ster preparedness and mitigation measures		
Outcome 9 Early warning system, food security and nutrition monitoring system and contingency plans in place and enhanced with WFP capacity development support	 Disaster preparedness index Target = 8 	Government implementation of accelerated growth. Continued socio-political stability. Continued government and donor community commitment	
<i>Output 9.1</i> FSNMS expanded into at least three additional regions	 Number of government staff trained and equipped to strengthen FSNMS Target = 38 extension staff Monthly FSNMS bulletin produced Target = 12 per year 	Ministry of Food and Agriculture capacity to sustain FSNMS as an ongoing activity	
Outcome 10 Improved food consumption over assistance period for targeted households at risk of falling into acute hunger	 Household food consumption score Target = 10% increase per year; baseline = current FCS % of communities consuming iodized salt 		
<i>Output 10.1</i> Food distributed in sufficient quantity and quality	 Numbers of targeted households receiving food, by category and as % of planned figures Numbers of FFW/FFT participants, by gender. Number of women's groups trained for income-generating activities Tonnage of food distributed, by type, as % of planned distribution Tonnage of food milling and fortification and iodized salt produced by women's groups Amount contributed to CHNC by women's groups 		

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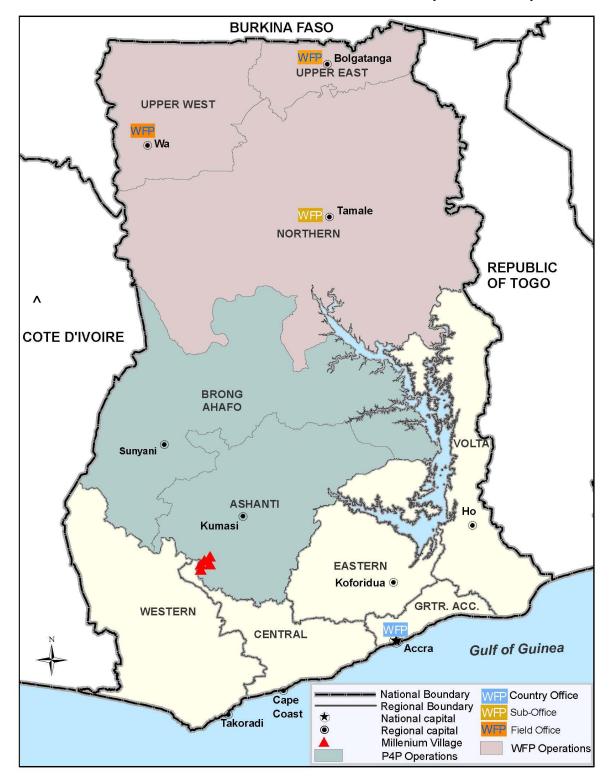
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ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Risks, assumptions
Outcome 11 Hazard risk reduced at community level in targeted communities	 Community asset score in targeted areas 	
Output 11.1 Disaster mitigation assets built or restored by targeted communities	 Risk reduction and disaster mitigation assets created or restored, by type and unit of measure 	
Outcome 12 Enhanced and sustained resilience to disasters within communities	 Number of assets maintained by communities 	



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ANNEX III



GHANA COUNTRY PROGRAMME MAP (2012–2016)

The designations employed and the presentation of material in this publication do not imply the expression of any opinion whatsoever on the part of the World Food Programme (WFP) concerning the legal status of any country, territory, city or area or of its frontiers or boundaries.



ACRONYMS USED IN THE DOCUMENT

ART	anti-retroviral treatment
BMI	body mass index
CAADP	Comprehensive Africa Agriculture Development Programme
CHNC	community health and nutrition centre
CMAM	Community-based Management of Acute Malnutrition
СР	country programme
CSB	corn-soya blend
FAO	Food and Agriculture Organization of the United Nations
FFT	food for training
FFW	food for work
FSNMS	Food Security and Nutrition Monitoring System
GHS	Ghana Health Service
GSFP	Ghana School Feeding Programme
GSS	Ghana Statistical Service
HGSF	home-grown school feeding
IGA	income-generating activity
LEAP	Livelihood Empowerment Against Poverty
M&E	monitoring and evaluation
MDG	Millennium Development Goal
MNP	micronutrient powder
MUAC	mid-upper arm circumference
NGO	non-governmental organization
NSPS	National Social Protection Strategy
P4P	Purchase for Progress
PLHIV	people living with HIV
REACH	[a partnership for ending child hunger]
SADA	Savannah Accelerated Development Authority
THR	take-home ration
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WHO	World Health Organization

