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DRAFT COUNTRY PROGRAMMES

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DRAFT COUNTRY PROGRAMME NICARAGUA 200434 (2013–2018)

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NOTE TO THE EXECUTIVE BOARD

This document is submitted to the Executive Board for consideration

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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EXECUTIVE SUMMARY

Nicaragua is one of the poorest countries in Latin America, with gross national income per capita at US\$1,080; 42 percent of the population live below the poverty line, and 15 percent live in extreme poverty. Poverty levels are highest in rural areas, particularly the North Atlantic Autonomous Region, home to most indigenous communities, where 37 percent of the population live in extreme poverty. In indigenous areas, 40 percent of children do not attend primary school, and the average length of schooling is only three years. Chronic malnutrition affects 22 percent of children under 5; stunting is highest in the dry corridor, reaching 35 percent in Madriz and 28 percent in Nueva Segovia. Nicaragua is also vulnerable to recurrent natural disasters that impede progress in addressing poverty and food insecurity.

The goal of the country programme is to support and complement the Government in designing and implementing long-term programmes to break the inter-generational cycle of undernutrition and hunger in line with the National Human Development Plan (2009–2011), the National Programme Towards the Eradication of Child Chronic Undernutrition (2007–2015), the National Micronutrient Plan, the Early Childhood Stimulation Programme, the National HIV Programme, the National Education Plan (2011–2015) and government social safety net programmes.

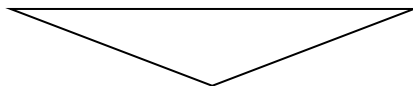
This country programme focuses on technical assistance with a view to developing the capacity of the Government to design, implement, monitor and evaluate sustainable programmes to reduce hunger and undernutrition. It will concentrate on the most food-insecure areas – Nueva Segovia, Madriz, Jinotega and the North Atlantic Autonomous Region – with a view to:

- supporting national work on preventing chronic malnutrition among children aged 6–23 months and pregnant and lactating women;
- supporting access to education for pre-school and primary school-aged children;
- enhancing resilience to shocks among food-insecure rural households that depend on degraded natural resources, especially those headed by women;
- supporting adherence to anti-retroviral therapy for HIV patients in food-insecure areas; and
- enhancing government capacities to design and implement programmes to predict and reduce hunger.

The country programme is planned for the five years from 1 April 2013 to 31 March 2018, by which time it is expected that the Government will be responsible for funding and implementing national food and nutrition security programmes, with WFP providing technical assistance only.

The country programme is in line with the new United Nations Development Assistance Framework for 2013–2017 and contributes to Strategic Objectives 2, 4 and 5 and Millennium Development Goals 1–7.

DRAFT DECISION*



The Board takes note of draft country programme Nicaragua 200434 (2013–2018) (WFP/EB.2/2012/7), for which the food requirement is 18,096 mt at a cost of US\$16.0 million, for a total cost to WFP of US\$24.2 million, and authorizes the Secretariat to formulate a country programme, taking into account the observations of the Board.

* 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

1. Nicaragua is a low-income food-deficit country ranking 129th of 187 countries in the 2011 *Human Development Report*.¹ Its human development index rose by 30 percent between 1990 and 2011, but the benefits have been uneven: 42 percent of households live in poverty and 15 percent in extreme poverty on less than US\$1.25 per day.² Poverty levels are highest in rural areas, where 63 percent of the population are poor and 27 percent live in extreme poverty. In the North Atlantic Autonomous Region (RAAN - *Región Autónoma del Atlántico Norte*), where most indigenous communities live, 37 percent of rural people live in extreme poverty.
2. Chronic malnutrition among children under 5 is 22 percent.³ The highest rates occur in Madriz – 35 percent – and Nueva Segovia – 28 percent – in the northern dry corridor and in RAAN.³ Among schoolchildren aged 6 to 9, stunting prevalence is 27 percent; it reaches 58 percent in parts of Madriz.⁴ Global acute malnutrition prevalence is 6 percent; anaemia affects 11 percent of children under 5 and 5 percent of women aged 15–49.⁵ Nicaragua's most recent health survey reported that only 46 percent of mothers exclusively breastfeed, 37 percent of the poorest households have no access to potable water and 12 percent do not have latrines.
3. Officially, Nicaragua has one of the lowest HIV prevalence rates in Central America – 7,700 people, or 0.2 percent, are registered as living with HIV – but the real number could be up to five times higher. Rates in some municipalities, particularly Chinandega and Managua, are far higher than the national rate,⁶ which increased from 7.6/100,000 in 2006 to 13.3/100,000 in 2008. Anti-retroviral therapy (ART) coverage is 57 percent.
4. The national net enrolment rate for boys and girls is 93 percent in primary schools and 57 percent in pre-school,⁷ but 500,000 rural poor and indigenous young people aged 3 to 17 are not in school. In indigenous areas, 40 percent of eligible children do not attend primary school and the average length of schooling is only three years.⁸ National retention and completion rates for primary schools are 90 percent, but poor education and sanitary services result in a 15 percent drop-out in RAAN and 13 percent in Jinotega. Of Nicaragua's 10,750 public schools, 51 percent have drinking water and 23 percent have toilets.⁹

¹ United Nations Development Programme. 2011. *Human Development Report*. New York.

² Instituto Nacional de Información de Desarrollo (INIDE - National Development Information Institute). 2009. Household survey on living standards. Managua.

³ INIDE. 2007. *Nicaraguan Population and Health Survey*. Available at: <http://www.inide.gob.ni/endesa/FinalReport07.pdf>

⁴ Ministry of Health and Ministry of Education. 2004. National height census. Managua.

⁵ Integrated Nutritional Surveillance System. 2009.

⁶ Ministry of Health. 2011. First Semester Report of the HIV/AIDS and Sexually Transmitted Diseases (STD) National Programme. Managua. National HIV prevalence is 87/100,000; in Chinandega it is 174/100,000 and in Managua 167/100,000 inhabitants.

⁷ Ministry of Education. 2010. National Education Plan. Managua.

⁸ Ministry of Education. 2008. School Census. Managua.

⁹ Directorate of School Infrastructure, Ministry of Education.

5. Limited ability to buy food is the main cause of food insecurity. Limited employment opportunities and low incomes prevent poor people from meeting their food requirements: the median income covers only 24 percent of the cost of basic foods. Inefficient use of land and water, lack of agricultural inputs and credit for smallholders constrain food production and availability in food-insecure areas.
6. The price of a basic food basket doubled between August 2007 and October 2011, and inflation reached 9 percent.¹⁰ Staple food prices have not returned to pre-2007 levels. Per capita food consumption has an estimated energy deficit of 200 kcal per day.¹¹ WFP's last vulnerability analysis and mapping survey classified 61 municipalities as highly vulnerable to food insecurity, principally in northern rural areas and RAAN.¹²
7. Nicaragua is prone to hurricanes, floods, droughts and earthquakes. It ranks eleventh in the United Nations' 2011 disaster-risk index and fourth in the long-term climate risk index of countries affected between 1991 and 2010.¹³ An estimated 45 percent of the population is annually affected by drought that causes significant losses in agricultural production, especially basic grains.¹⁴ Food-insecure people, most of whom live in areas prone to natural hazards, are least able to cope with shocks: detrimental coping strategies include reducing the frequency, quantity and quality of meals, particularly animal protein, vegetables and fortified foods; this affects pregnant and lactating women (PLW) and young children in particular.¹⁵
8. Subsistence agriculture accounts for 32 percent of the agricultural sector and is dependent on weather conditions. WFP's 2011 emergency food security assessment reported that subsistence farmers lost up to 60 percent of their grain crops and poultry and used natural resources in unsustainable ways to survive, resulting in environmental degradation and deforestation. Such farmers use low-yielding traditional methods to grow basic grains; their lack of management experience, technical capacity and financial resources lead to post-harvest losses. As a result, subsistence farmers are particularly vulnerable to shocks.
9. Low capacity to address climate change and a weak agricultural sector have a negative impact on food security and nutrition. Risk management, adaptation to climate change and environmental issues are government priorities, as set out in the National Human Development Plan and the National Environment and Climate Change Strategy.

¹⁰ FAO et. al. 2011. *Centroamérica en Cifras. Datos de Seguridad Alimentaria Nutricional y Agricultura Familiar* (Central America in Figures. Data on Nutritional Food Security and Family Agriculture). Diciembre 2011. Rome. http://www.proamo.org/sites/proamo.org/files/fao-situacion_desnutricionca.pdf

¹¹ Ministry of Agriculture and Forestry. 2009. Policy on Food and Nutrition Security and Sovereignty from the Rural and Agricultural Sector. Managua.

¹² WFP. 2008. Vulnerability analysis and mapping of food and nutrition security. The Government has asked FAO and WFP to analyse food security and nutrition to update data and refine targeting.

¹³ Germanwatch. 2012. *Global Climate Risk Index 2012*. Available at: <http://germanwatch.org/klima/crri.pdf>

¹⁴ The Economic Commission for Latin America and the Caribbean. 2008 and 2010. *Nicaragua: Climate Change Effects on Agriculture*. Santiago de Chile.

¹⁵ WFP. 2011. Emergency food security assessment.

PAST COOPERATION AND LESSONS LEARNED

10. WFP has been in Nicaragua since 1971. In the 1980s it focused on emergency response. In the 1990s it supported health and education programmes, helped people displaced by civil war and re-established productive areas in marginal zones; as the situation stabilized, WFP developed a partnership and capacity development role with the Government.
11. Country programme (CP) 105970 (2008–2012) responds to chronic food insecurity and undernutrition, mainly in Nueva Segovia, Madriz, Jinotega, Matagalpa and RAAN. A mother-and-child health programme supports improved nutrition for children aged 6–35 months and PLW. School feeding supports access to education in food-insecure communities. Food for assets (FFA) and food for training (FFT) aim to improve the livelihoods of subsistence farmers in food-insecure areas.
12. Regional protracted relief and recovery operations 104440 and 200043 address emergency preparedness and response and disaster-risk reduction to complement CP 105970. The Purchase for Progress pilot in Nicaragua supports improved quality and increased commercialization in maize production among smallholder farmers.
13. Social protection is established through legislation such as the Law on Food and Nutrition Security and Sovereignty, Decree 61-2011 Early Stimulation Policy, the Zero Hunger Programme, the Zero Usury Programme, the National Human Development Plan and the Programme towards the Eradication of Chronic Child Undernutrition (2007–2015). There is a focus on PLW, children aged 6–23 months, school-aged children and subsistence farmers. WFP's interventions are implemented in this legislative framework with a view to complementing government social protection programmes.
14. Under CP 105970, WFP's support for the Ministry of Health and the Executive Secretariat for Food and Nutrition Security and Sovereignty (SESSAN - *Secretaría Ejecutiva de Soberanía y Seguridad Alimentaria y Nutricional*) has:
 - enhanced national capacity to lead and coordinate nutrition initiatives under the National Programme towards the Eradication of Chronic Child Undernutrition (2007–2013) and supported formulation of the National Micronutrient Plan;
 - ensured that nutritional interventions for PLW and children aged 6–35 months are in national plans;
 - enhanced information systems with a view to adopting the growth standards of the World Health Organization (WHO) and the Pan American Health Organization (PAHO); and
 - advocated for the 1,000 days window of opportunity from conception to age 2, resulting in a 10 percent increase in the coverage of nutrition programmes for women and children between 2010 and 2011 in WFP's intervention areas.
15. The national school feeding programme (SFP) was established in 2005 with WFP support. It provides a daily hot meal for 1 million children in the most food-insecure municipalities. It is implemented by the Government through the Integrated Nutrition Education Programme Unit (PINE) and the Ministry of Education. Primary funding comes from the national budget, with financial support from the World Bank and private donors and in-kind support from WFP, but there is a 45 percent shortfall. The Government faces challenges in covering remote indigenous areas, where logistics costs are high. Community participation is an important success factor, leading to increased interest in education among parents. In 2012, 14 percent of the food required by WFP-assisted school feeding

was sourced from small-scale farmers, an approach the Government acknowledges as a basis for sustainability.

16. As part of South–South cooperation, WFP started work with the Brazilian Trust Fund in 2008. Results include enhanced capacities in PINE and the Ministry of Education to identify needs and a parliamentary bill to establish a legal framework for SFP. Private donor support enabled WFP and the United Nations Children’s Fund (UNICEF) to implement micro-projects in rural schools in Nueva Segovia and Matagalpa. School buildings and sanitary conditions have been improved under the Essential Package initiative.
17. WFP programmes are based on partnerships. At the national level, it is crucial to involve policy-makers in the design of programmes; at the local level, the relevance, effectiveness and sustainability of programmes can be ensured by partnering with municipal governments and other actors.
18. In 2011, WFP piloted a cash-transfer project in two municipalities in Matagalpa to enable women to increase their assets and incomes, diversify their diet and improve the nutritional status of their children, but the costs were higher than for in-kind assistance because the cooperating partner incurred high expenditures for monitoring and risk mitigation. WFP will continue to explore options for incorporating this transfer modality more cost-effectively.

STRATEGIC FOCUS OF THE COUNTRY PROGRAMME

19. The goal of CP 200434 is to support the Government in designing and implementing long-term approaches to break the inter-generational cycle of undernutrition and hunger. The aims, in line with the Government’s National Human Development Plan and Strategic Objectives 2, 4 and 5,¹⁶ are to:
 - support national work on preventing chronic malnutrition among children aged 6–23 months and PLW (Strategic Objective 4);
 - support access to education for pre-school and primary school-aged children (Strategic Objective 4);
 - enhance resilience to shocks among food-insecure rural households that depend on degraded natural resources, especially those headed by women (Strategic Objective 2);
 - improve HIV patients’ adherence to ART in food-insecure areas (Strategic Objective 4); and
 - enhance government capacities to design and implement programmes to predict and reduce hunger (Strategic Objective 5).
20. Country programme 200434 is in line with the 2013–2017 United Nations Development Assistance Framework (UNDAF), which aims to: i) reduce social inequalities, poverty, hunger and undernutrition; ii) fulfil human social rights in line with the Millennium

¹⁶ Strategic Objective 2 – Prevent acute hunger and invest in disaster preparedness and mitigation measures; Strategic Objective 4 – Reduce chronic hunger and undernutrition; Strategic Objective 5 – Strengthen the capacities of countries to reduce hunger through hand-over strategies and local purchase.

Declaration; and iii) promote environmental protection and risk management to achieve sustainable human development (Millennium Development Goals (MDGs) 1–7¹⁷).

21. The CP activities will complement regional and national programmes with:
- food-based interventions addressing chronic malnutrition, access to education and susceptibility to extreme weather among subsistence farmers and populations affected by HIV in 20 municipalities in Nueva Segovia, Madriz, Jinotega and RAAN that are classified extremely or highly vulnerable to food insecurity;¹⁸ and
 - a focus on enhancement of government capacity to reduce undernutrition and hunger through technical assistance to support improved design, implementation and evaluation of national hunger solutions.

Component 1: Provide Nutritional Support for Vulnerable Groups

22. Component 1 aims to enhance government nutrition programmes and improve the nutritional status of vulnerable groups in Nueva Segovia and Madriz municipalities with the highest prevalence of chronic malnutrition (stunting) and micronutrient deficiencies.
23. Fortified take-home rations will be provided for PLW and children aged 6–23 months for 180 days to prevent chronic malnutrition (stunting), contingent on attendance at health centres. This will be part of a health-and-nutrition package implemented by the Ministry of Health that will include water and sanitation interventions, nutrition education, promotion of exclusive breastfeeding and micronutrient supplementation.
24. Each year, 3,000 PLW will receive a ration of Supercereal and vegetable oil, and 5,200 children aged 6–23 months will receive Supercereal Plus.¹⁹ Under a WFP regional nutrition initiative, WFP and the Ministry of Health will support local production of complementary fortified foods for vulnerable groups to replace Supercereal imported for CP 200434 and for eventual use in the national programme.
25. WFP will enhance national and local capacities through technical assistance and training to enhance nutritional surveillance at all levels and develop capacities among health personnel to update mother-and-child policies and conduct nutritional education. WFP will help SESSAN to establish regional and local structures for the Food and Nutrition Security and Sovereignty Commissions. These initiatives will create the conditions for sustainable governmental programmes as part of WFP's hand-over strategy; they will be implemented in collaboration with the Ministry of Health, the Ministry of Agriculture and Forestry, UNICEF, PAHO and WHO.

Component 2: Support access to education

26. Component 2 will support pre-schools and primary schools in marginalized indigenous areas in RAAN and Jinotega, where educational indicators are well below national averages. WFP will target 150,000 schoolchildren each year in 12 municipalities with school meals that will include cereals, pulses, fortified blended foods, fortified vegetable

¹⁷ MDG 1 – Eradicate extreme poverty and hunger; MDG 2 – Achieve universal primary education; MDG 3 – Promote gender equality and empower women; MDG 4 – Reduce child mortality; MDG 5 – Improve maternal health; MDG 6 – Combat HIV/AIDS, malaria and other diseases; MDG 7 – Ensure environmental sustainability.

¹⁸ In view of logistics constraints and cost-efficiency considerations, CP 200434 will focus on areas with extremely vulnerable or very vulnerable municipalities.

¹⁹ Planning figures established in coordination with the Ministry of Health are based on the number of people registered in mother-and-child health programmes and the actual prevalence of chronic malnutrition in targeted areas.

oil and dried skim milk (DSM)²⁰ to improve enrolment, attendance, learning capacities, completion rates and nutritional education. WFP's assistance will cover 15 percent of pre-school and primary school pupils.

27. To enhance community organization and awareness of the importance of nutrition, education and hygiene, WFP, PINE and the Ministry of Education will continue to support the creation of school-feeding committees of parents, community leaders and teachers, with equal participation by women and men in decision-making positions. WFP will assist PINE and the Ministry of Education in enhancing the quality and sustainability of the national SFP by: i) adopting quality standards; ii) providing procurement and logistics expertise; iii) promoting links between smallholder farmers and farmers' organizations with the SFP with a view to procuring food locally; and iv) mobilizing resources. WFP and the Food and Agriculture Organization of the United Nations (FAO) will support the establishment of a legal framework for SFP.
28. As part of the Essential Package, WFP will coordinate with UNICEF, WHO, PAHO, FAO and government institutions to provide water, sanitation, nutrition education and school or community gardens to diversify school meals. WFP will also work with the Ministry of Agriculture and Forestry and the government staple food entity *Empresa Nicaragüense de Alimentos Básicos*, which support smallholder production and commercialization.

Component 3: Enhance Community and Household Resilience

29. Communities in eight municipalities in Nueva Segovia and Madriz will be supported through FFA and FFT in rebuilding assets and infrastructure to enhance resilience and access to food and to reduce risks. The approach will involve the communities in conservation of soil and water, rehabilitation of land and infrastructure, and training in disaster risk management and livelihood protection.
30. Component 3 will target 2,000 food-insecure families – 10,000 people – during the dry lean season. Beneficiaries will be selected on the basis of criteria developed with the Food Security and Nutrition Programme of the Ministry of Agriculture, local partners and committees of food-insecure households, landless families, families headed by women and subsistence farmers with less than 1 ha of land. The participation of women in FFA, FFT and leadership of community committees will be encouraged. Community organizations, local governments and non-governmental organizations will provide tools, seeds, fertilizers and technical assistance.
31. Participants will receive a family ration of cereals, beans and vegetable oil for 60 days that will provide 65 percent of the average daily wage. If funding is available, a market analysis will be carried out to study the options for other transfer modalities.
32. WFP will organize advocacy and discussions to support the Ministry of Agriculture and Forestry and other government institutions in disaster risk reduction and management and climate change adaptation approaches linked to agricultural programmes.

Component 4: Mitigate Impact of HIV

33. A pilot project supporting the national HIV Programme will be implemented in Chinandega and Managua to enhance patients' adherence to ART by providing family rations for food-insecure households through municipal health centres.

²⁰ DSM has been contributed by Switzerland over the last six years.

34. Each year 320 families – 1,600 people – will receive take-home rations of Supercereal, fortified vegetable oil, pulses and cereals for 180 days and will benefit from nutritional education. A capacity development component will train staff in the national HIV programme and will provide technical assistance with a view to integrating human rights and gender perspectives into health services for HIV-affected families.
35. WFP will partner the Ministry of Health, PAHO and WHO in following up rates of treatment adherence, drop-outs and food consumption scores. It will partner the National Aids Programme and the Association of People Living with HIV in integrating into the national programme a research approach that assesses the impact of dietary habits and nutritional gaps on ART adherence and nutritional status with a view to developing: i) nutritional education; ii) eligibility criteria for food support; and iii) an appropriate food basket. The approach was piloted by WFP and the Rand Health Corporation in Bolivia, the Dominican Republic and Honduras.

Capacity Development and Hand-Over

36. WFP will contribute to institutional enhancement in SESSAN by helping to establish a national food security and nutrition information and monitoring system. This will include nutrition indicators, production data for basic grains, price monitoring, household food access and vulnerability analysis and mapping, and will benefit the other CP components.
37. WFP will continue to promote South-South and triangular cooperation by facilitating information-sharing, supporting regional meetings and workshops, and establishing contacts with regional partners.
38. WFP's national capacity index (NCI)²¹ will enable it to develop interventions focusing on hunger reduction. An NCI baseline will be developed for each CP component in consultation with the Government with a view to setting a timeline for handing over the food-based programmes.

TABLE 1: BENEFICIARIES BY COMPONENT				
		Cumulative five-year total		
	Per year	Men/boys	Women/girls	Total
Component 1 - Nutrition				
PLW	3 000	13 000	15 000	15 000
Children aged 6–23 months	5 200		13 000	26 000
Component 2 – Education ²²	150 000	150 000	150 000	300 000
Component 3 – Resilience	10 000	24 925	25 075	50 000
Component 4 – HIV	1 600	4 000	4 000	8 000
TOTAL	169 800	191 925	207 075	399 000

²¹ The national capacity index measures progress against five quality standards: i) sound alignment with the national policy; ii) strong institutional frameworks; iii) stable funding and budgeting; iv) quality programme design; and v) strong community participation. The capacity development assessment tool is based on standards adapted by WFP from a World Bank capacity development framework.

²² The number of school feeding beneficiaries was adjusted to account for overlap between years.

TABLE 2: FOOD RATIONS BY COMPONENT (g/person/day)					
	Component 1		Component 2	Component 3	Component 4
	PLW	Children 6–23 months			
Cereals	-	-	40	440	160
Pulses	-	-	30	80	24
Supercereal	200	-	35	-	20
Supercereal Plus	-	200	-	-	-
Vegetable oil	25	-	15	20	10
DSM	-	-	10	-	-
Total	225	200	130	540	214
Total kcal/day	976	840	540	1 845	804
% kcal from protein	12.6	16.2	14.1	12.1	11.9
% kcal from fat	38	22.8	33.1	18	20.5
No. of feeding days per year	180	180	150	60	180

TABLE 3: FOOD REQUIREMENTS BY COMPONENT (mt)					
	Component 1	Component 2	Component 3	Component 4	Total
Cereals	-	4 500	1 320	230	6 050
Pulses	-	3 375	240	35	3 650
Supercereal	540	3 937	-	29	4 506
Supercereal Plus	936	-	-	-	936
Vegetable oil	68	1 688	60	13	1 829
DSM	-	1 125	-	-	1 125
Total	1 544	14 625	1 620	307	18 096
% of requirements ²³	8	81	9	2	100

PROGRAMME MANAGEMENT, MONITORING AND EVALUATION

39. Monitoring will be carried out by WFP, the Government and local partners using a results-based management approach. Data will be collected during field visits and surveys to measure process and output indicators in targeted municipalities. WFP and the Government will organize monitoring on the basis of CP baseline indicators disaggregated by age and gender. Government partners and WFP will monitor food-based interventions to ensure correct distribution to targeted groups. WFP will supervise operations through its sub-offices and will seek to improve the quality of data collection and reporting.

²³ Food allocated to each component as a percentage of total food.

40. WFP will follow its standard procurement procedures based on cost-effectiveness. Local purchases from smallholder farmers will be promoted when feasible. The Commodity Movement Processing and Analysis System will track food.
41. Imported or locally purchased food will be delivered to a WFP warehouse in Sebaco or to government warehouses. The Government will be responsible for landside transport, storage and handling costs.
42. Country programme 200434 will contribute to the Government's decentralization process by involving local governments in community organization, beneficiary targeting, food distribution and food and nutrition analysis.
43. WFP will evaluate progress towards nationally owned hunger solutions through follow-up meetings and technical committees. It will provide feedback, recommendations and lessons learned to enable stakeholders to implement corrective measures and follow up agreements as required. The budget for CP 200434 covers a baseline study, a mid-term review and a final evaluation.

Risk Management

⇒ Contextual risks

44. Measures will be taken to prepare for possible natural disasters and food price fluctuations and mitigate their impact on the basis of a contingency plan.

⇒ Programmatic risks

45. As WFP transfers responsibility for implementation to the Government, institutional capacities and timely complementary inputs will be critical: CP 200434 integrates capacity development into all activities to ensure that the hand-over is successful and that future implementation is sustainable.

⇒ Institutional risks

46. Limited funding from traditional donors as a result of changing development priorities would undermine the implementation of CP 200434. Limited availability of resources because of the financial crisis and possible budget cuts would affect the social-protection networks linked to food security and nutrition interventions. To maximize the predictability and flexibility of resources and ensure multi-year partnerships, WFP will seek additional donors and establish new public-sector and private-sector partnerships.

ANNEX I-A

BUDGET SUMMARY (US\$)					
	Component 1	Component 2	Component 3	Component 4	Total
Food (mt) ¹	1 544	14 625	1 620	307	18 096
Food cost	1 536 239	13 393 649	894 600	193 307	16 017 795
Total	1 536 239	13 393 649	894 600	193 307	16 017 795
External transport					1 803 532
Landside transport, storage and handling (total)					1 096 066
<i>Landside transport, storage and handling (per mt)</i>					<i>60.57</i>
Other direct operational costs					697 956
Total direct operational cost					19 615 349
Direct support costs ²					3 022 617
Indirect support costs (7.0 percent) ³					1 584 658
TOTAL WFP COSTS					24 222 624

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.

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

ANNEX I-B

DIRECT SUPPORT REQUIREMENTS (US\$)	
Staff and staff-related costs	
Local staff – national officers	155 253
Local staff – general service	189 771
Local staff – temporary assistance	491 028
Local staff – overtime	65 000
Local consultants	19 250
Staff duty travel	256 000
Subtotal	1 176 302
Recurring expenses	
Rental of facility	719 640
Utilities	264 250
Office supplies and other consumables	17 550
Communications services	32 000
Equipment repair and maintenance	19 000
Vehicle running cost and maintenance	85 625
Office set-up and repairs	27 750
United Nations organization services	75 000
Subtotal	1 240 815
Equipment and capital costs	
Vehicle leasing	153 000
Communications equipment	52 500
Local security costs	400 000
Subtotal	605 500
TOTAL	3 022 617



ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Assumptions
<p>UNDAF outcomes</p> <ul style="list-style-type: none"> ➤ Most vulnerable population access and consume healthy and nutritious food ➤ Boys, girls, adolescents and young people, mainly from rural and ethnic communities, have universal access to quality education with technical options that give them life skills and take into account the socio-cultural context ➤ Government institutions have the capacity to implement coordinated strategies and HIV prevention programmes for adolescents, young people, women and children who are vulnerable or at risk of vulnerability to HIV bearing in mind its social determinants ➤ Priority populations have equal access to health, focusing on the health of mothers, children and women ➤ Sustainable development strategies integrate risk management, mitigation and adaptation to climate change 	<p>UNDAF outcome indicators</p> <p>Outcome indicators have not yet been defined</p>	<p>United Nations agencies and the Government agree to support the UNDAF goals</p> <p>United Nations agencies obtain funding to implement the UNDAF action plan</p>
<p>Component 1: Provide nutritional support for vulnerable groups Goal: Support national efforts for preventing chronic malnutrition, micronutrient deficiencies and health deterioration among children aged 6–23 months and pregnant and lactating women</p>		
<p>Strategic Objective 4: Reduce chronic hunger and undernutrition</p>		
<p>Outcome 1 Improved nutritional status of targeted women, boys and girls</p>	<ul style="list-style-type: none"> ➤ Prevalence of stunting among targeted children aged 6–23 months (height/age as %) Target: decrease chronic malnutrition (stunting) by 2 points among target group. ➤ Prevalence of iron deficiency anaemia among targeted PLW and children aged 6–23 months Target: decrease iron deficiency by 2 points among targeted groups ➤ % of infants with low birthweight (< 2 500g) Target: Decrease low birthweight by 1 point 	<p>Government partners provide technical assistance and inputs such as nutrition and health training</p> <p>Health centres have adequate buildings and equipment and sufficient trained staff and resources</p>

ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Assumptions
<p>Output 1.1 Timely provision of food for targeted PLW and children aged 6–23 months</p>	<ul style="list-style-type: none"> ➤ 3 000 PLW receive assistance as planned ➤ 2 600 boys receive assistance as planned ➤ 2 600 girls receive assistance as planned ➤ 1 544 mt of food distributed as planned ➤ Actual mt of fortified food distributed ➤ No. of food distribution committees ➤ No. of WFP-assisted health centres ➤ % of women in leading positions in food distribution committees ➤ No. of targeted women receiving education in health, nutrition and hygiene 	
<p>Component 2: Support access to education Goal: Support access to education in preschools and primary schools, especially for schoolchildren living in the most vulnerable areas.</p>		
<p>Strategic Objective 4: Reduce chronic hunger and undernutrition</p>		
<p>Outcome 2 Increased access to education and human capital development among boys and girls in WFP-assisted schools</p>	<ul style="list-style-type: none"> ➤ Enrolment: average annual rate of change in number of girls and boys enrolled Target: annual increase of 3% ➤ Attendance rate: number of schooldays on which girls and boys attended classes, as % of total schooldays Target: annual increase of 3% ➤ Gender ratio: ratio of girls to boys enrolled Target: 1:1 	<p>Sufficient funds are available to purchase and distribute food</p> <p>Food is delivered to schools in a timely manner</p> <p>Schools remain open</p> <p>PINE and the Ministry of Education train teachers and other school staff</p> <p>School feeding committees are functioning</p>

ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Assumptions
<p>Output 2.1 Timely provision of food for targeted schoolchildren</p>	<ul style="list-style-type: none"> ➤ 75 000 girls receive meals in pre-school and primary schools, as planned ➤ 75 000 boys receive meals in pre-school and primary schools, as planned ➤ Actual tonnage of food distributed Target: 14,625 mt ➤ No. of WFP assisted schools ➤ Actual tonnage of fortified food distributed ➤ Number of school feeding committees ➤ % of women in leadership positions in school feeding committees 	
<p>Component 3: Enhance community and household resilience Goal: Support and enhance resiliency of communities to shocks through safety nets or asset creation, including adaptation to climate change</p>		
<p>Strategic Objective 2: Prevent acute hunger and invest in disaster preparedness and mitigation measures</p>		
<p>Outcome 3 Adequate food consumption over assistance period for targeted households</p>	<ul style="list-style-type: none"> ➤ Household food consumption score (FCS) Target: FCS stabilized above baseline for 80% of target households; baseline to be established ➤ Proportion of beneficiary household expenditure devoted to food Target: 5% annual decrease for households that spend more than 50% of their income on food 	Government and local partners have sufficient resources to implement the programme
<p>Output 3.1 Food and non-food items distributed in sufficient quantity to targeted women, men, girls and boys</p>	<ul style="list-style-type: none"> ➤ 1 000 women participate in FFA and FFT, receiving family rations and non-food items ➤ 1 000 men participate in FFA and FFT, receiving family rations and non-food items ➤ Actual tonnage of food distributed Target: 1 620 mt ➤ No. of food distribution committees ➤ % of women in leadership positions in food distribution committees 	

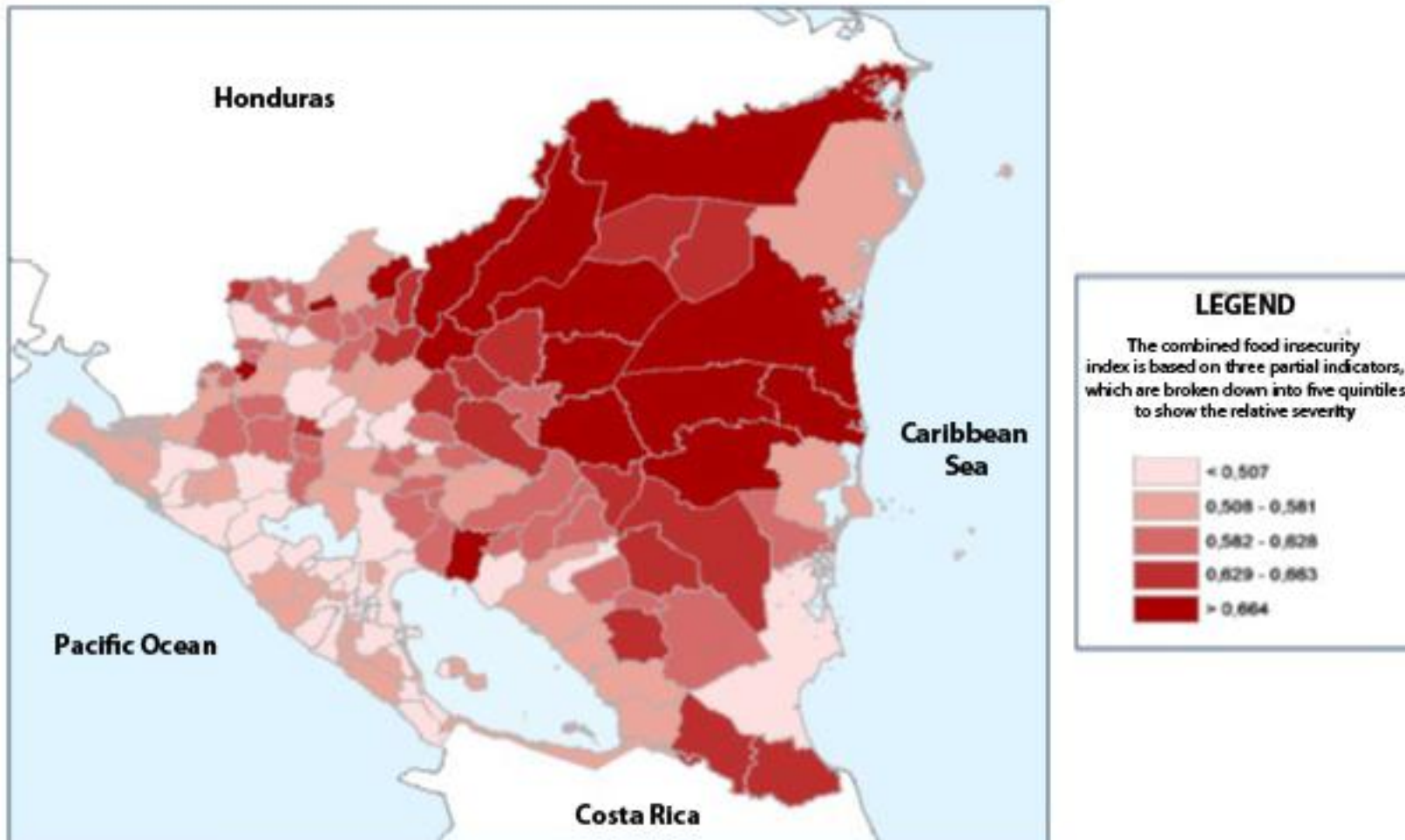


ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Assumptions
Outcome 4 Hazard risk reduced in target communities	➤ Community asset score. Target: productive assets increased in 20% of projects	Partners' inputs such as training and technical assistance The impact of natural disasters on food security among the affected population mitigated by enhanced resilience Improved adaptability to climate change among targeted population
Output 4.1 Assets built or restored by targeted communities and households	➤ No. of community assets created or restored, by type and unit of measure	
Component 4: Mitigate impact of HIV Goal: Support food-insecure households affected by HIV and support ART adherence among HIV clients in the municipalities with the highest HIV prevalence		
Strategic Objective 4: Reduce chronic hunger and undernutrition		
Outcome 5 Improved adherence to ART	➤ ART adherence rate Target: 3% annual increase	National HIV programme is implemented by the Ministry of Health and is adequately resourced
Output 5.1 Rations distributed in sufficient quantity to targeted HIV patients	➤ 320 HIV patients, disaggregated by gender and age, receive food rations ➤ No. of health centres assisting HIV patients ➤ Actual tonnage of food distributed Target: 307 mt	
Outcome 6 Reduced ART default rate	➤ ART default rate Target: 3% annual decrease	
Output 6.1 HIV patients receiving timely ART	➤ 320 men and women HIV patients receive ART regularly at health centres ➤ No. of checkups attended by HIV patients ➤ No. of training sessions attended by HIV patients, disaggregated by gender	
Outcome 7 Improved household FCS	➤ FCS Target: FCS stabilized above the baseline for 80% of targeted households; baseline to be established	

ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Assumptions
Output 7 HIV patients increasing their consumption of fortified food	➤ % of HIV patients with adequate food consumption	
Components 1–4: Strengthen national capacities to reduce hunger		
Goal: Strengthen the capacities of countries to design, manage and implement tools, policies and programmes to predict and reduce hunger		
Strategic Objective 5: Strengthen the capacities of countries to reduce hunger through hand-over strategies and local purchase		
Outcome 8 Progress made towards nationally owned hunger solutions through government programmes	<ul style="list-style-type: none"> ➤ NCI for nutrition support Target: baseline value to be determined ➤ NCI for school feeding Target: baseline value to be determined ➤ NCI for enhancing community and household resilience Target: baseline value to be determined ➤ NCI for mitigation of HIV Target: baseline value to be determined 	<p>Government has sufficient capacity to take on hunger-solution strategies.</p> <p>Availability of funds for training, technical assistance and follow-up for the government food-security and nutrition initiatives</p> <p>Sufficient resources for advocacy with national policy-makers</p>
Output 8.1 Government institutions implement hunger solutions through their national programmes	➤ No. of WFP-managed hunger solutions, systems and tools handed over to the Government	
Output 8.2 National staff trained to manage government hunger-solution programmes	<ul style="list-style-type: none"> ➤ No. of people trained in hunger-solution tools ➤ No. of technical assistance projects ➤ WFP expenditures for technical capacity development 	



Map of Nicaragua - Food and Nutrition Insecurity Index



ANNEX III

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 therapy
CP	country programme
DSM	dried skim milk
FAO	Food and Agriculture Organization of the United Nations
FCS	food consumption score
FFA	food for assets
FFT	food for training
INIDE	<i>Instituto Nacional de Información de Desarrollo</i> (National Development Information Institute)
MDG	Millennium Development Goal
NCI	national capacity index
PAHO	Pan American Health Organization
PINE	Integrated Nutrition Education Programme Unit
PLW	pregnant and lactating women
RAAN	<i>Región Autónoma del Atlántico</i> (North Atlantic Autonomous Region)
SESSAN	<i>Secretaría Ejecutiva de Soberanía y Seguridad Alimentaria y Nutricional</i> (Executive Secretariat for Food and Nutrition Security and Sovereignty)
SFP	school feeding programme
UNDAF	United Nations Development Assistance Framework
UNICEF	United Nations Children's Fund
WHO	World Health Organization