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**Executive Board
Second Regular Session**

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DRAFT COUNTRY PROGRAMMES

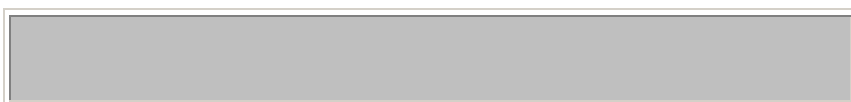
Agenda item 7

For consideration



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DRAFT COUNTRY PROGRAMME MALAWI 200287 (2012–2016)



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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

Despite reasonably good food security at the national level, 65 percent of households in Malawi do not meet their annual food requirements. Household food security is undermined by limited access to arable land, chronic poverty, recurrent weather shocks and low levels of education. National wasting levels are acceptable, but underweight indicators are poor, anaemia prevalence is severe and stunting is above the critical threshold. With the advent of HIV, tuberculosis infections have increased.

The objective of country programme 200287 is to support the development of sustained food and nutrition security programmes; it supports pre-school and primary-school children through on-site meals, provides nutrition interventions for children under 5, pregnant and lactating women and tuberculosis patients, and builds the resilience of chronically food-insecure households through food for assets.

Country programme 200287 incorporates lessons from a portfolio evaluation and from the previous school meals development project and protracted relief and recovery operation.

Home-grown school feeding and prevention of chronic malnutrition pilots will support the Government in designing sustainable interventions. WFP will gradually reduce its direct implementation of school meals and treatment of moderate acute malnutrition. Capacity-building will increase investments in disaster preparedness, prevention and mitigation.

The country programme contributes to the Malawi Growth and Development Strategy, outcomes 1, 2, and 3 of the United Nations Development Assistance Framework (2012–2016), Millennium Development Goals 1, 2, 4, 5, 6, and 7, and Strategic Objectives 2, 4 and 5.

DRAFT DECISION*

The Board takes note of draft country programme Malawi 200287 (2012–2016) (WFP/EB.2/2011/7/1), for which the food requirement is 122,948 mt at a cost of US\$58.6 million, for a total cost to WFP of US\$109.9 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. Annual economic growth averaging 8.6 percent since 2007¹ has reduced the proportion of Malawians living below the poverty line from 52 percent in 2005 to 39 percent in 2009.² The Government has shifted its focus from emergency response to social protection, economic development and disaster preparedness.
2. Of the population of 13.1 million,³ 85 percent live in rural areas; 15 percent of the population are ultra-poor and unable to meet basic needs. Poverty is highest in the southern region, where 23 percent of the population are ultra-poor.²
3. In the 2001/02 and 2005/06 growing seasons there was severe food insecurity that required large-scale food aid interventions. But in the past five growing seasons, Malawi has produced surplus maize, mainly as a result of the Government's input-support programme and unusually favourable weather. Maize prices are unstable, however, and fluctuate by 51 percent to 70 percent of national averages. Market instability increases the uncertainty of prices for households, farmers and traders.
4. Reasonable food security at the national level has been attained, but household food security remains precarious: access to food is undermined by chronic poverty, limited access to arable land, recurrent weather shocks and low levels of education.⁴
5. Smallholders have insufficient land and cannot meet subsistence needs. Population density is 139/km,² among the highest in southern Africa;³ 80 percent of the population are smallholders reliant on rain-fed agriculture with limited crop diversification.
6. The frequency and intensity of prolonged dry spells and floods are increasing, possibly as a result of climate change. Vulnerability to weather shocks undermines subsistence production and access to food, particularly in the south. Households in the northernmost livelihood zone have higher food consumption scores than those elsewhere.
7. Insufficient production makes many households net buyers of food during the lean season (December to March) and part of the peak agricultural labour period in October–December. In southern areas, 36 percent of households run out of food before October; the figure for central regions is 32 percent;³ 65 percent of households run out of food at some time during the year.² Household food consumption in rural Malawi is compromised by the large number of households headed by women or non-literate people, and by limited coping mechanisms.⁴
8. Malawi has nearly achieved universal access to primary education, but attendance and completion rates are low and repetition rates are high: only 60 percent of children enrolling in Standard 1 reach Standard 5, and only 39 percent reach Standard 8.
9. Of schoolchildren aged 8–10, 70 percent do not regularly eat breakfast before going to school; in 76 percent of cases this is because household food is inadequate.⁵ The lean season coincides with the second school term. Hungry and malnourished children are more likely to drop out or absent themselves; they tend to have poor concentration and to skip

¹ Government of Malawi. 2010. Annual Economic Report 2010. Budget Document no. 2. Lilongwe.

² National Statistic Office. 2009. Welfare Monitoring Survey Report. Zomba.

³ National Statistics Office. 2008. Population and Housing Census. Zomba.

⁴ WFP. 2010. Comprehensive Food Security and Vulnerability Analysis. Lilongwe.

⁵ Ministry of Education, Science and Technology. 2006. School Health and Baseline Survey. Lilongwe.

homework, perform poorly and experience difficulties in learning. This perpetuates the inter-generational cycle of malnutrition and vulnerability and will have significant consequences for human capital, productivity and economic development.

10. Malawi faces serious nutrition challenges. Acute malnutrition declined from 5 percent in 2004 to 4 percent in 2010,⁶ but children in central and southern regions are twice as likely to be wasted compared with children in the north. The prevalence of underweight children declined from 22 percent in 2004 to 13 percent in 2010,⁶ though this is considered “poor”.⁷ The national average for stunting is 47 percent,⁸ which is considered “critical”;⁷ prevalence is highest in the south at 48 percent. Of children aged 6–59 months, 64 percent are anaemic,⁹ which is considered “severe”.¹⁰ Tuberculosis (TB), AIDS, diarrhoea and acute respiratory infections contribute to malnutrition.⁴
11. Food use and dietary diversity are generally poor; 30 percent of infants are not exclusively breastfed in the first six months.⁸ The proportion of inadequately fed infants increases with age: 30 percent for infants aged 6–8 months and 56 percent for those aged 9–12 months.⁸
12. Adult prevalence of HIV is 11 percent; 1 million people are living with HIV, including 111,000 children.¹¹ Malawi’s orphan population is estimated at 1.2 million, of whom 436,000 were orphaned by AIDS.¹²
13. With the advent of HIV, TB cases increased from 5,000 in 1985 to 27,000 in 2006;¹² 70 percent of TB patients are co-infected with HIV. A study in Thyolo district found: i) 57 percent of TB patients were malnourished on admission; ii) mortality in the first four weeks of treatment was higher among those with moderate to severe malnutrition than those with normal to mild malnutrition; and iii) HIV-negative TB patients gained significantly more weight than HIV-positive patients.¹³
14. The second Malawi Growth and Development Strategy (2011–2016) is the medium-term strategy for reducing poverty. The second thematic area is social development, which identifies education and nutrition as sub-themes.
15. The National Education Sector Plan outlines the Government’s long-term vision of improving educational quality, equity, access and efficiency. Providing school health and nutrition services, including school meals, for all children in public primary schools is a guiding principle. The national early childhood development (ECD) policy promotes a comprehensive approach to development for children aged up to 8.

⁶ National Statistics Office. 2004 and 2010. Malawi Demographic and Health Survey. Zomba.

⁷ WHO. 2000. Global Database on Child Growth and Malnutrition. Geneva.

⁸ National Statistics Office. 2010. Malawi Demographic and Health Survey. Zomba.

⁹ Anaemia is a proxy for other micronutrient deficiencies.

¹⁰ WHO. 2001. Classification of Public Health Significance of Anaemia. Geneva.

¹¹ United Nations General Assembly Special Session. 2010. Malawi Country Progress Report. New York.

¹² Ministry of Health. 2007. *HIV and Syphilis Sero-Survey and National HIV Prevalence and AIDS Estimates*. Lilongwe.

¹³ Zachariah, R., Spielmann, M.P., Harries, A.D. and Salaniponi, F.M.L. 2006. Moderate to Severe Malnutrition in Patients with Tuberculosis is a Risk Factor associated with Early Death. *Trans. of the Royal Soc. of Trop. Med. and Hyg.* 96(3): 291–294.

16. The National Nutrition Policy and Strategic Plan emphasizes prevention as an efficient, effective and sustainable strategy for reducing malnutrition. The AIDS National Action Framework is the basis for WFP interventions for HIV and AIDS and TB.
17. The Agriculture Sector-Wide Approach is the primary agriculture development and food security strategy under the Ministry of Agriculture and Food Security.
18. The National Social Support Policy and National Adaptation Programmes of Action are the basis for WFP's interventions in disaster risk reduction (DRR) and social support programmes.

PAST COOPERATION AND LESSONS LEARNED

19. Country programme (CP) 200287 is informed by a 2009 evaluation of the country portfolio, appraisal missions in 2011 and consultations with the Government, donors, United Nations agencies, non-governmental organizations (NGOs) and other stakeholders. The CP will build on lessons learned from a school meals development project and a protracted relief and recovery operation (PRRO).
20. The evaluation concluded that WFP is working in line with government systems and recommended that it adapt from emergency modalities and include capacity development to facilitate hand-over, and that it engage more at the policy level, which will require enhanced technical and advocacy capacity.

School Meals

21. Between 1999 and 2008 average enrolment increased by 40 percent in supported primary schools; attendance was consistently higher at 97 percent than in non-supported schools; the national average is 92 percent. Supported schools registered an average increase in girls' enrolment of 38 percent; other schools registered an average drop of 10 percent. Pass rates for girls increased by 10 percent in supported schools compared with 5 percent in non-supported schools. Girls' enrolment increased by 13 percent more than boys'. The number of beneficiaries reached has exceeded targets.¹⁴
22. The increased demand created by the school meals programme must be matched with supply-side investments. Challenges facing the education sector include limited numbers of schools and qualified teachers, low teacher/pupil ratios, poor infrastructure and limited learning materials. WFP will work with United Nations agencies, the Government and partners to provide investments and implement school feeding.

Nutrition

23. Programmes addressing moderate acute malnutrition (MAM) have significantly reduced deaths and improved recovery rates, partly as a result of the integration of WFP assistance into government objectives. Malawi was the first country to launch Scaling Up Nutrition (SUN) and 1,000 Special Days in July 2011.¹⁵ Nutritional support for pregnant and lactating women and malnourished children under 5 will be integrated into the government programme for community management of acute malnutrition. The institutions in which nutrition programmes are embedded tend to be weak, however, which affects performance. WFP has cost-effective curative interventions that support community-level

¹⁴ School feeding baseline reports, 2003 and 2007. Report on assessment of performance of school feeding beneficiaries of country programme 10106, EMOP 10200 and emergency school feeding under PRRO 10310.

¹⁵ WFP is a member of the SUN Task Force and has been contributing technical support.

management of acute malnutrition, and it will promote the alignment of nutrition support for TB patients with the government anti-retroviral therapy nutrition care programme. WFP must also respond to the Government's shift to addressing malnutrition through preventive interventions and provide technical support to facilitate hand-over.

HIV

24. The Government will provide nutrition support for AIDS and TB patients. Malawi was the first country in southern Africa to: i) provide nutritional supplements for malnourished patients on anti-retroviral therapy; ii) allocate funding for nutrition support for HIV-infected people; and iii) provide food supplements with medicines. This approach, established with initial support from WFP, is now run by the Government and financed through the Global Fund to Fight AIDS, Tuberculosis and Malaria. The Government's exemplary leadership reflects its readiness for ownership of TB/nutrition support.

DRR and Food/Cash for Assets

25. Food-for-assets and cash-for-assets schemes have significantly improved food security and resilience to shocks;¹⁶ the ability of NGOs to provide additional resources has been a critical factor. Impact monitoring, however, needs to be enhanced. In view of climate variability, support for DRR for food security should be continued to build resilience at the household and community levels.

Purchase for Progress

26. The Food and Agriculture Organization of the United Nations (FAO) supports the Government in improving agricultural productivity; WFP complements this by linking farmers to markets through Purchase for Progress (P4P). At the national level P4P supports the development of trade through the Agricultural Commodity Exchange (ACE) for Africa and the emerging warehouse receipt system. At the local level WFP supports 17 farmers' organizations with capacity development and direct purchase contracts as incentives for group marketing and training.
27. Malawi has had plentiful maize harvests over the last five years, largely because of the Government's input subsidy programme and favourable weather. P4P has also stimulated market activities, especially through ACE: trade has increased by 62 percent in the past four years.¹⁷ Purchases from farmers' organizations have provided incentives for increasing production and restructuring the supply chain.
28. Since 2008 WFP has procured locally 110,000 mt of food for Malawi and the southern Africa region, of which 22,000 mt was purchased through P4P. There is a risk of increasing domestic prices if WFP buys substantial amounts of food for export to regional operations, but by integrating local markets into regional and international markets, export opportunities for WFP's regional operations should in the long term help to optimize the agricultural supply chain.
29. WFP's comparative advantages include emergency response, food security expertise, particularly support for the Government's Malawi Vulnerability Assessment Committee, and social protection and safety nets through nutrition, school meals and HIV and AIDS interventions.

¹⁶ Community and household surveillance reports for March 2008, October 2008 and March 2009. Lilongwe.

¹⁷ ACE Trade Report, July 2011. Lilongwe.

STRATEGIC FOCUS OF THE COUNTRY PROGRAMME

30. The CP will be implemented in support of the Government's shift to social development. Refugees will continue to be supported through a PRRO; WFP will respond through emergency operations if future shocks overwhelm national response capacities.
31. The CP will implement the new Malawi country strategy (2012–2016) and will contribute to sustainable economic development, social development, social support, disaster risk management and cross-cutting issues. It will contribute to outcomes 1, 2 and 3 of the United Nations Development Assistance Framework (UNDAF) for 2012–2016¹⁸ and Millennium Development Goals 1, 2, 4, 5, 6 and 7.¹⁹
32. The objectives are to enhance national capacity to improve primary education outcomes, reduce malnutrition among vulnerable groups, increase food security and build resilience to shocks at the household and community levels. The CP supports Strategic Objectives 2, 4 and 5²⁰ and is in line with the Enhanced Commitments to Women.
33. The three components are i) support to education; ii) nutrition support; and iii) DRR for food security. All components will be supported by P4P. The country office will stimulate local production and develop markets for locally produced blended food, particularly *likuni phala*.²¹

Objectives

34. The CP objectives are:
- Support to education (Strategic Objectives 4 and 5):
 - ◇ contribute to increasing the proportion of boys and girls accessing and completing pre-primary and primary education in WFP-assisted schools; and
 - ◇ enhance the capacity of the Government to design and implement a sustainable school meals programme.
 - Nutrition support (Strategic Objectives 4 and 5):
 - ◇ contribute to the reduction of chronic and acute malnutrition among children, women and TB patients.
 - DRR for food security (Strategic Objective 2):
 - ◇ contribute to increased and sustained food security and community resilience through investment in disaster preparedness, prevention and mitigation measures.
35. The CP will promote interactions among its components and with the programmes of United Nations agencies and NGOs in the UNDAF. Creation of assets under DRR and the food security component, for example, will benefit social protection target groups through school gardens, school and community woodlots and reforestation.

¹⁸ See Annex II.

¹⁹ 1: Eradicate extreme poverty and hunger; 2: Achieve universal primary education; 4: Reduce child mortality; 5: Improve maternal health; 6: Combat HIV/AIDS, malaria and other diseases; 7: Ensure environmental sustainability.

²⁰ Strategic Objective 2: Prevent acute hunger and invest in disaster preparedness and mitigation measures; 4: Reduce chronic hunger and undernutrition; 5: Strengthen the capacities of countries to reduce hunger, including through hand-over strategies and local purchase.

²¹ The local name for corn-soya blend (CSB).

36. For all components the country office will explore the use of cash and voucher transfers where they have a comparative advantage over direct food transfers. Feasibility studies with market assessment will guide transfer modalities.

TABLE 1: BENEFICIARIES BY COMPONENT				
Component	Category	Men/boys	Women/girls	Total
Component 1 – Support for education	Primary education	629 000	629 000	1 258 000
	Early child development	13 000	13 000	26 000
	Subtotal	642 000	642 000	1 284 000
Component 2 – Nutrition support	Treatment of MAM	144 000	283 000	427 000
	Prevention of chronic malnutrition	27 000	83 000	110 000
	Nutrition for TB patients	3 600	3 800	7 400
	Subtotal	174 600	369 800	544 400
Component 3 – DRR for food security ²²	Food/cash for assets	48 000	50 000	98 000
TOTAL		864 600	1 061 800	1 926 400

Component 1: Support to Education

37. WFP will target all primary schoolchildren in selected schools in 13 chronically food-insecure districts with the lowest enrolment, highest drop-out rates and widest gender disparity indicators; ECD support for children aged 3–5 will be provided in two of the most food-insecure districts, supported by school meals.
38. Onsite feeding for pupils will help to reduce short-term hunger and improve attention spans. Primary schoolgirls and orphaned boys will receive take-home rations in the second term to reduce drop-out rates and regularize attendance in higher grades. Girls and boys will be supported so they can benefit equally from educational opportunities.
39. Food support for ECD will help to regularize attendance at community-based childcare centres and will also be used at centres for childcare education.
40. Home-grown school feeding (HGSF) will be piloted in two districts with potential for local production.
41. WFP will work with the Ministry of Health, the Ministry of Education, Science, and Technology, the United Nations Children’s Fund (UNICEF) and other partners to provide complementary services such as deworming, infrastructure improvement, school gardens and learning materials.
42. With regard to capacity development and hand-over, the Ministry of Education, Science and Technology will take over 15 percent of WFP-supported schools over five years, with WFP technical support. WFP will help the ministry to set up systems for managing the national school meals programme, which will entail development of national school

²² Participating households are estimated to have five members, but only one of these will participate in asset creation under DRR.

feeding guidelines and policies and training of government staff and targeted communities in project management, food procurement and management, monitoring, evaluation and reporting. WFP will work with the Ministry of Agriculture and Food Security and the Ministry of Education, Science and Technology to develop a sustainable and scalable HGSM model. Milestones will be set with the Government for institutional capacity and system enhancement, advocacy for sustainable funding and community participation in preparation for national ownership.

Component 2: Nutrition Support

43. The Government target is to reduce chronic malnutrition from 47 percent to 30 percent in five years. WFP will implement blanket supplementary feeding for children under 2 and pregnant and lactating women in one southern district with high rates of stunting and anaemia using replicable model for prevention of chronic malnutrition. Treatment of MAM among children under 5 and pregnant and lactating women will be continued in all districts in the interim through targeted supplementary feeding. Support for undernourished TB patients will be provided in three southern districts and one central district with the highest prevalence of TB.
44. Support will be provided to enhance government capacity to design, manage and implement nutrition programmes. WFP will realign its nutrition support with government programmes, targeting high-risk districts to contribute to the prevention and treatment of undernutrition among vulnerable groups and prioritizing the 1,000 days from conception to age 2.²³
45. Treatment of MAM through supplementary feeding will contribute to the rehabilitation of children and pregnant and lactating women with a view to breaking the inter-generational cycle of malnutrition. Nutrition support for malnourished TB patients will be part of their treatment. At the request of the Government, treatment of MAM will be continued to sustain progress in reducing it.²⁴
46. The Ministry of Health will provide the infrastructure for clinical services and food storage. UNICEF will provide nutrition screening equipment and registration and reporting materials.
47. With regard to capacity development and hand-over: i) WFP will shift from treatment of MAM to prevention of chronic malnutrition; the former is already mainstreamed in national plans; ii) the Ministry of Health will take over treatment of MAM in 50 percent of districts, with technical support from WFP, starting with those with the greatest improvement in acute malnutrition indicators during the CP; WFP will train government staff in the management of nutritional interventions, food storage and monitoring and evaluation; and iii) advocacy in chronic malnutrition will be supported at all levels.

²³ Malawi was the first country to launch SUN and 1,000 Special Days in July 2011. WFP is a member of the SUN Task Force and has been contributing technical support.

²⁴ Entry and exit criteria for treatment of MAM in children and adults will be based on *Interim Guidelines for the Management of Acute Malnutrition through Community-based Therapeutic Care* and *Interim Guidelines for the Management of Acute Malnutrition in Adolescents and Adults*.

Component 3: DRR for Food Security

48. Food-for-assets activities as part of DRR will be implemented in five districts in the south, one in the north and one in the central region that are chronically food-insecure and disaster-prone. Target districts were selected on the basis of chronic food insecurity indicators and the frequency and magnitude of recent disasters.
49. People in areas where markets are not functioning effectively will participate in asset-creation activities in exchange for a household food ration for seven months of the year. The use of WFP targeting guidelines for asset creation will ensure that the most vulnerable and food-insecure households are reached.
50. Participatory rural appraisals will guide the identification of community assets; participants will be at least 50 percent women. Prospective activities include small-scale irrigation, fish farming, reforestation, land management and complementary schemes such as village-level savings and loans and weather insurance.
51. With regard to capacity development and hand-over: i) capacity-building will be provided for the Department of Disaster Management Affairs and the Ministry of Agriculture and Food Security; and ii) technical assistance will be provided directly or through partners to improve district-level disaster management plans and community-level early-warning and contingency planning; WFP will support the Ministry of Agriculture and Food Security in institutionalizing monitoring of informal cross-border trade.

TABLE 2: FOOD RATION/TRANSFER BY COMPONENT (g/person/day)						
	Component 1 – Support to education		Component 2 – Nutrition support			Component 3 – DRR for food security
	Wet feeding	Take-home rations	Treatment of MAM and prevention of chronic malnutrition ration for women	Prevention of chronic malnutrition ration for children	Treatment of severe acute malnutrition for TB patients	
Maize		333				455
CSB ⁺ ²⁵	100		300			
CSB ++				200		
Oil			30			16.8
Pulses						45
RUTF ^{**}					520	
<i>Total kcal/day</i>	400	1 166	1 466	820	2 700	1 892
% kcal from protein	18	11.4	14.7	16.2	10.0	11.5
% kcal from fat	13.5	10.3	29.5	22.8	61.0	16.9
Number of feeding days	188 days/year	30 days/month for 4 months	30 days/month	30 days/month for 4 years	30 days/month	30 days/month for 7 months per year

⁺ Corn-soya blend.

^{**} Ready-to-use therapeutic food.

52. Rations for the school meals component provide 22 percent of daily energy requirements in line with the planned national school meals programme to facilitate hand-over. WFP and the Government will discuss ways to improve the nutritional value of the ration, using locally produced food where possible; ECD rations are adequate by WFP standards in that they cover 30 percent to 45 percent of energy requirements for a half-day of school.
53. Rations for treatment of MAM among children under 5, pregnant and lactating women and TB patients and treatment of severe acute malnutrition for TB patients are in line with the National Guidelines on the Management of Acute Malnutrition.²⁶ WFP will advocate for local production and use of CSB++ for treatment of MAM.
54. Rations for DRR for food security are in line with WFP guidance.²⁷

²⁵ In the current national protocols, CSB+ and oil are given in these quantities for treatment of MAM.

²⁶ Districts that have high prevalence of wasting will qualify for treatment of MAM from the second year, with expectations of gradually decreasing the number of districts by the fifth year. Districts with high prevalence of stunting combined with high prevalence of anaemia among children will qualify for inclusion in the prevention of chronic malnutrition activity.

²⁷ WFP. 2007. *Food for Assets Handbook: a Guide to Approaches, Methods and Management of Food-for-Assets Activities in Southern Africa*. Rome.

TABLE 3: FOOD REQUIREMENTS BY COMPONENT (mt)				
	Component 1 – Support to education	Component 2 – Nutrition support	Component 3 – DRR for food security	Total
Maize, maize meal	13 311		18 562	31 873
CSB+	62 821	18 712		71 533
CSB ++		5 040		5 040
Oil		1 881	687	2 568
Pulses			1 833	1 833
RUTF		100		100
TOTAL	76 132	25 734	21 082	122 948
% of CP requirements	62	21	17	100

PROGRAMME MANAGEMENT, MONITORING AND EVALUATION

55. The Ministry of Education, Science and Technology will be responsible for coordinating educational activities; the Ministry of Agriculture and Food Security will be a partner in developing the HGSP model. The Ministry of Health will be responsible for nutrition activities. Support for community-based childcare centres will be coordinated by the Ministry of Gender, Children and Community Development through the national ECD network.
56. The nutrition activities will be implemented in partnership with UNICEF, FAO, the Joint United Nations Programme on HIV/AIDS and the World Health Organization (WHO). For DRR interventions, joint programming with FAO, the United Nations Development Programme (UNDP) and the International Fund for Agricultural Development will be essential to maximize impact.

Procurement

57. All CP components will be supported by P4P. The country office will leverage part of its purchasing power to improve smallholders' access to markets and will use innovative procurement modalities alongside traditional tendering; ACE will be a major food procurement agent. Capable and competitive farmers' organizations will graduate to the general food supplier roster at the end of P4P in mid-2013, but additional farmers' organizations will be integrated into WFP procurement, depending on capacities, registration and demand.
58. For components 1 and 3, opportunities for direct contracts for cereals will be given to farmers' organizations on WFP's food vendor roster. Pulses will be purchased in part through a soft-tendering modality targeting small-scale traders.
59. The strict quality controls for CSB, vegetable oil and RUTF are not applicable to farmers and traders, but some of the requirements for processed foods will be channelled through ACE on a pilot basis, targeting registered food processors.

Monitoring and Evaluation

60. For risk mitigation, learning and accountability, monitoring and evaluation will be carried out at all levels and tailored for each activity. WFP field monitors and partners will regularly visit distribution sites, households, communities, retailers and clinics. Surveys will identify factors contributing to outcomes.
61. For the support to education component, WFP will compare the attendance and enrolment of pupils receiving school meals with those not supported in the same districts.
62. For the nutrition support component, process and performance monitoring will converge with capacity development with a view to enhance nutritional surveillance and more effective information management at health institutions. Partnership with UNICEF will ensure the optimum approach.
63. For the DRR element of the food-security component, quantitative and qualitative indicators will be used for output and outcome monitoring: these will include assets created, the benefits for individuals and communities, the number of beneficiaries involved and DRR training sessions. Comparison studies, for example with a cash-and-food-for-livelihoods pilot, will examine the application of different transfer types.
64. A mid-term and a final evaluation will assess the relevance, efficiency, effectiveness and sustainability of the CP.

Capacity

65. The country office will require adequate technical capacity and operational knowledge in the component areas and capacity to engage in policy dialogue with the Government, donors and other partners.

Resource Mobilization

66. The country office has explained WFP's new strategy to resident donors and received positive feedback. Donors in Malawi are showing increased interest in WFP priority areas such as nutrition, DRR and agricultural market support, which may bring opportunities for partnerships and funding.
67. The Government aims to reduce chronic malnutrition from 47 percent to 30 percent in the next five years. WFP's nutrition programming is in line with government approaches and in view of renewed donor interest WFP is likely to receive support.
68. Partnerships are being discussed for the DRR element of the food security component, building on the partnership with UNDP under the Africa Adaptation Programme, in which climate change adaptation and DRR activities are implemented.

Contextual Risks

69. Drought or floods could disrupt the CP. An emergency operation (EMOP) would be launched if the Government requested it to ensure that development gains were protected.

Programme Risks

70. As WFP transfers responsibility for implementation to the Government, the capacity of institutions becomes critical. This CP integrates capacity development in all activities to ensure proper hand-over and subsequent sustainable implementation.

Institutional Risks

71. In view of the improvements in national food security combined with WFP's reputation as a food aid agency, the shift to food assistance may not be appreciated by all stakeholders. This risk is expected to diminish as WFP's re-positioning is explained and results are demonstrated. Despite years of stability and growth, chronic shortages of fuel and electricity remain a concern: to mitigate this risk, WFP is establishing United Nations fuel reservoirs and heavy-duty generators.

ANNEX I-A

BUDGET SUMMARY FOR MALAWI CP 200287 (2012–2016) (US\$)				
	Component 1: Support to education	Component 2: Nutrition support	Component 3: DRR for food security	Total
Food (<i>mt</i>) ¹	76 132	25 734	21 082	122 948
Food (US\$)	34 828 422	17 244 076	6 518 431	58 590 929
External transport				1 434 993
Landside transport storage and handling (<i>total</i>)				18 040 344
Landside transport storage and handling (<i>per mt</i>)				147
Other direct operational costs				6 677 255
Direct support costs ²				17 960 323
Total direct operational costs				102 703 843
Indirect support costs ³ (7.0 percent)				7 189 269
TOTAL WFP COSTS				109 893 112

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	
International professional staff	4 342 460
Local staff – national officers	1 622 294
Local staff – general service	1 013 542
Local staff – temporary assistance	3 816 773
Local staff – overtime	101 354
International consultants	226 200
United Nations volunteers	290 000
Commercial consultancy services	158 733
Staff duty travel	1 207 890
Subtotal	12 779 245
Recurring expenses	
Rental of facility	1 006 853
Utilities	142 127
Office supplies and other consumables	136 510
Communications services	534 563
Equipment repair and maintenance	43 957
Vehicle running cost and maintenance	733 833
Office set-up and repairs	402 937
United Nations organization services	804 652
Subtotal	3 805 431
Equipment and capital costs	
Vehicle leasing	816 000
Communications equipment	399 713
Local security costs	159 933
Subtotal	1 375 646
TOTAL DIRECT SUPPORT COSTS	17 960 323

ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
<p>UNDAF outcomes</p> <p>1: Government policies, local and national institutions support equitable and sustainable economic growth and food security by 2016</p> <p>2: Government policies, local and national institutions support increased equitable and quality basic social and protection services by 2016</p> <p>3: National response to HIV and AIDS scaled up to achieve universal access to HIV prevention, treatment, care and support by 2016</p>	<p>UNDAF outcome indicators</p> <ul style="list-style-type: none"> ➤ Proportion of population living below US\$1/person/day ➤ Proportion of poorest quintile share in national consumption ➤ % of population below minimum level of dietary energy consumption ➤ Net enrolment rate in primary schools ➤ % of girls who complete their primary education ➤ Stunting, underweight and wasting rates among children under 5 ➤ Proportion of population with sustainable access to improved water sources ➤ Proportion of population with access to improved sanitation ➤ Proportion of children and young women aged 13–24 victims of violence in the last 12 months ➤ HIV prevalence rate ➤ Annual rate of new HIV infection; proportion of population with advanced HIV infection with access to anti-retroviral (ARV) drugs ➤ % of HIV infected pregnant women who receive ARV drugs to reduce the risk of mother-to-child transmission 	<p>Risks</p> <p>Occurrence of major disasters requiring emergency response</p> <p>Global economic instability</p> <p>Decreased aid resources at global level</p> <p>Rising prices of fuel and food</p> <p>Assumptions</p> <p>Improved natural disaster management systems</p> <p>Resource mobilization will be possible to finance outcomes despite the global financial crisis</p> <p>United Nations is able to generate additional resources</p> <p>Available technical capacity in United Nations to support the Government and partners</p> <p>Good governance and political stability at the national and district levels</p>	



ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
CP component 1: Support for education			
Strategic Objective 4: Reduce chronic hunger and undernutrition			
<p>Outcome 1 Increased access to education and human capital development in assisted schools</p>	<ul style="list-style-type: none"> ➤ Average annual rate of change in number of boys and girls enrolled in WFP-assisted primary and pre-primary schools Target: girls 6%; boys 5%. Baseline: girls 4%; boys 3%. Verification: Education Management Information System (EMIS) report ➤ Attendance rate in assisted schools, by gender Target: girls 97%; boys 96%. Baseline: girls 94%; boys 92%. Verification: school feeding survey report ➤ Drop-out rate for boys and girls in assisted primary schools, by gender Target: girls 4.8%; boys 5.2%. Baseline: girls 14.3%; boys 11.2%. Verification: school feeding survey report; EMIS ➤ Completion rate in primary schools, by gender, orphan/not orphan Target: girls 50%; boys 50%. Baseline: N/A Verification: school feeding survey report; EMIS ➤ % of first grade primary schoolchildren in WFP-assisted schools, with official age for enrolment, by gender Target: girls 85%; boys 85%. Baseline: 78% boys and girls Verification: school feeding survey report 	<p>Ministry of Education, Science and Technology staff able to implement programme</p> <p>Ministry commitment</p> <p>Availability of ministry and WFP funds</p>	<p>Food: US\$34,828,422</p> <p>External transport: US\$889,696</p> <p>Landside transport, storage and handling: US\$11,185,013</p> <p>Direct support costs: US\$11,135,400</p> <p>Other direct operational costs: US\$1,802,057</p>



ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
<p>Output 1.1 Wet feeding rations provided for pupils in WFP-assisted schools</p>	<ul style="list-style-type: none"> ➤ No. of boys and girls receiving food in WFP-assisted primary and pre-primary schools Target: girls 641,933; boys 641,933 Verification: monitoring reports ➤ Tonnage of food distributed Target: 62,282 mt Verification: monitoring reports ➤ No. of months of take-home rations distributed per year Target: 4 months Verification: monitoring reports ➤ Number of WFP-assisted pre-schools and schools, by type Target: primary schools 713; pre-schools 169 Verification: monitoring reports 		
<p>Output 1.2 Take-home rations provided for targeted pupils in WFP-assisted schools</p>	<ul style="list-style-type: none"> ➤ No. of girls receiving take home rations Target: 140,423 Verification: monitoring reports ➤ No. of orphan boys receiving take-home rations Target: 46,808 Verification: monitoring reports ➤ Tonnage of food distributed Target: 13,311 mt Verification: monitoring reports 		
<p>Strategic Objective 5: Strengthen the capacities of countries to reduce hunger, including through hand-over strategies and local purchase</p>			
<p>Outcome 2 Progress made towards nationally-owned hunger solutions</p>	<ul style="list-style-type: none"> ➤ Hand-over strategy implemented [1 = not implemented; 2 = partially implemented; 3 = implemented] Target: 3 Baseline: N/A Verification: monitoring reports 	<p>Government funding for schools handed over Lack of commitment among partners and parent teacher associations to prioritize HGSF</p>	



ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
<p>Output 2.1 Capacity developed for government institutions</p>	<ul style="list-style-type: none"> ➤ Hand-over strategy developed [1 = not achieved; 2 = partially achieved; 3 = achieved] Target: 3 Verification: monitoring reports ➤ No. of WFP-assisted schools handed over to the Government school feeding programme Target: 100 Verification: monitoring reports ➤ No. of schools benefiting from HGSF programme Target: 35 Verification: monitoring reports 		
<p>Output 2.2 Training Ministry of Education, Science and Technology staff in monitoring and management of the school feeding programme</p>	<ul style="list-style-type: none"> ➤ No. of training sessions on project management Target: 5 Verification: monitoring reports ➤ No. of staff trained Target: 1,026 Verification: monitoring reports ➤ Reports submitted on time by district education managers, as % of planned Target: 100% Verification: monitoring reports ➤ Half-yearly and yearly reports submitted on time by the school feeding coordinator Target: 140 Verification: monitoring reports 		



ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
CP component 2: Nutrition support			
Strategic Objective 4: Reduce chronic hunger and undernutrition			
<p>Outcome 3 Improved nutritional status of women, girls, boys and men</p>	<ul style="list-style-type: none"> ➤ Prevalence of stunting (height-for-age less than -2Z score) among children under 2 in the targeted district Target: 30% Baseline: 49% Verification: nutrition survey, regular monitoring ➤ Prevalence of acute malnutrition (weight-for-height less than -2Z score) among children under 5 Target: <2% Baseline: 4% Verification: nutrition survey, regular monitoring ➤ Treatment of MAM death, defaulter, recovery and non-response rates for pregnant and lactating women and children under 5 Targets: recovery rate 90%; death rate <1%; defaulter rate <3%; non-response rate <1% Baseline: recovery rate 76%; death rate 2%; defaulter rate 11%; non-response rate 1% Verification: output reports ➤ TB treatment nutritional recovery rate Target: 80% Verification: output reports 	<p>Natural disasters could affect nutrition situation.</p> <p>Some complementary services for treatment of MAM and prevention of chronic malnutrition will be provided by the Ministry of Health, e.g. treatment of diseases, water and sanitation, immunization, micronutrient supplementation, health and nutrition education; others by UNICEF and other stakeholders, e.g. micronutrient supplementation, registers, reporting forms, information, education and communication materials.</p> <p>Capacity in partner institutions to contribute Government information systems able to process additional data</p>	<p>Food: US\$17,244,076</p> <p>External transport: US\$301,349</p> <p>Landside transport, storage and handling: US\$3,788,472</p> <p>Direct support costs: US\$3,771,668</p> <p>Other direct operational costs: US\$2,546,330</p>



ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
<p>Output 3.1 Treatment of MAM for moderately acutely malnourished children under 5 and pregnant and lactating women</p>	<ul style="list-style-type: none"> ➤ No. of women, girls and boys receiving food Target: 427,641 Verification: output reports ➤ Tonnage of food distributed, by type Target: 12,167 mt Verification: output reports 		
<p>Output 3.2 Nutrition support for prevention of chronic malnutrition for children under 2 and their mothers</p>	<ul style="list-style-type: none"> ➤ No. of children aged 6–23 months and mothers of children under 6 months receiving food Target: 109,934 Verification: output reports ➤ Tonnage of food distributed, by type Target: 13,356 mt Verification: output reports 		
<p>Outcome 4 Improved success of TB treatment for targeted cases</p>	<ul style="list-style-type: none"> ➤ TB treatment success rate Target: 90% Baseline: 83% Verification: output reports 	Financial constraints for outcome studies	
<p>Output 4.1 Care and treatment for TB patients</p>	<ul style="list-style-type: none"> ➤ No. of TB patients receiving only an individual nutritional food supplement Target: 7,385 Verification: output reports ➤ Tonnage of food distributed, by type Target: 210 mt Verification: output reports 		



ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
Strategic Objective 5: Strengthen the capacities of countries to reduce hunger, including through hand-over strategies and local purchase			
Outcome 5 Progress made towards nationally-owned hunger solutions	<ul style="list-style-type: none"> ➤ Hand-over strategy implemented [1 = not implemented; 2 = partially implemented; 3 = implemented] Target: 3 Baseline: N/A Verification: monitoring reports	Continued government commitment to establishing a comprehensive social safety net Government staff turnover	
Output 5.1 Capacity developed for government institutions	<ul style="list-style-type: none"> ➤ Hand-over strategy developed [1 = not achieved; 2 = partially achieved; 3 = achieved] Target: 3 Verification: monitoring reports <ul style="list-style-type: none"> ➤ No. of WFP-assisted treatment of MAM districts handed over Target: 17 Verification: monitoring reports <ul style="list-style-type: none"> ➤ No. of WFP-assisted treatment of MAM centres handed over Target: 150 Verification: monitoring reports		
Output 5.2 Training Ministry of Health staff in monitoring and management of treatment of MAM and prevention of chronic malnutrition programme	<ul style="list-style-type: none"> ➤ No. of training sessions on project management, as % of planned Target: 100% Verification: monitoring reports <ul style="list-style-type: none"> ➤ No. of staff trained Target: 1,000 Verification: monitoring reports <ul style="list-style-type: none"> ➤ Reports submitted on time by district maternal and child health coordinators, as % of planned Target: 100% Verification: monitoring reports		



ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Risks, assumptions	Resources required
CP component 3: Disaster risk reduction for food security			
Strategic Objective 2: Prevent acute hunger and invest in disaster preparedness and mitigation measures			
Outcome 6 Reduced hazard risk at community level in target communities	<ul style="list-style-type: none"> ➤ % of communities with increased community asset score Target: 50% Baseline: N/A Verification: comprehensive food security and vulnerability analysis ➤ % of targeted households with increased household asset score, by gender of head of household Target: 90% Baseline: 52% Verification: community and household surveillance system 	Funding availability for food and non-food items Availability of capacity of the Government and cooperating partners Equal participation of men and women in identification, implementation and management of asset creation Political will for institutionalization of DRR guidelines	Food: US\$6,518,431 External transport: US\$243,949 Landside transport, storage and handling: US\$3,066,858 Direct support costs: US\$3,053,255 Other direct operational costs: US\$2,328,868
Output 6.1 Community and household assets created	<ul style="list-style-type: none"> ➤ No. of assets created or restored, by type¹ Target: dams/dykes 3,000; small-scale irrigation structures 28; tree seedlings 5 million Baseline: dams/dykes 425; small-scale irrigation structures 28; tree seedlings 125,000 Verification: output monitoring reports ➤ No. of men and women participating in asset creation Target: 19,506 Verification: output monitoring reports 		

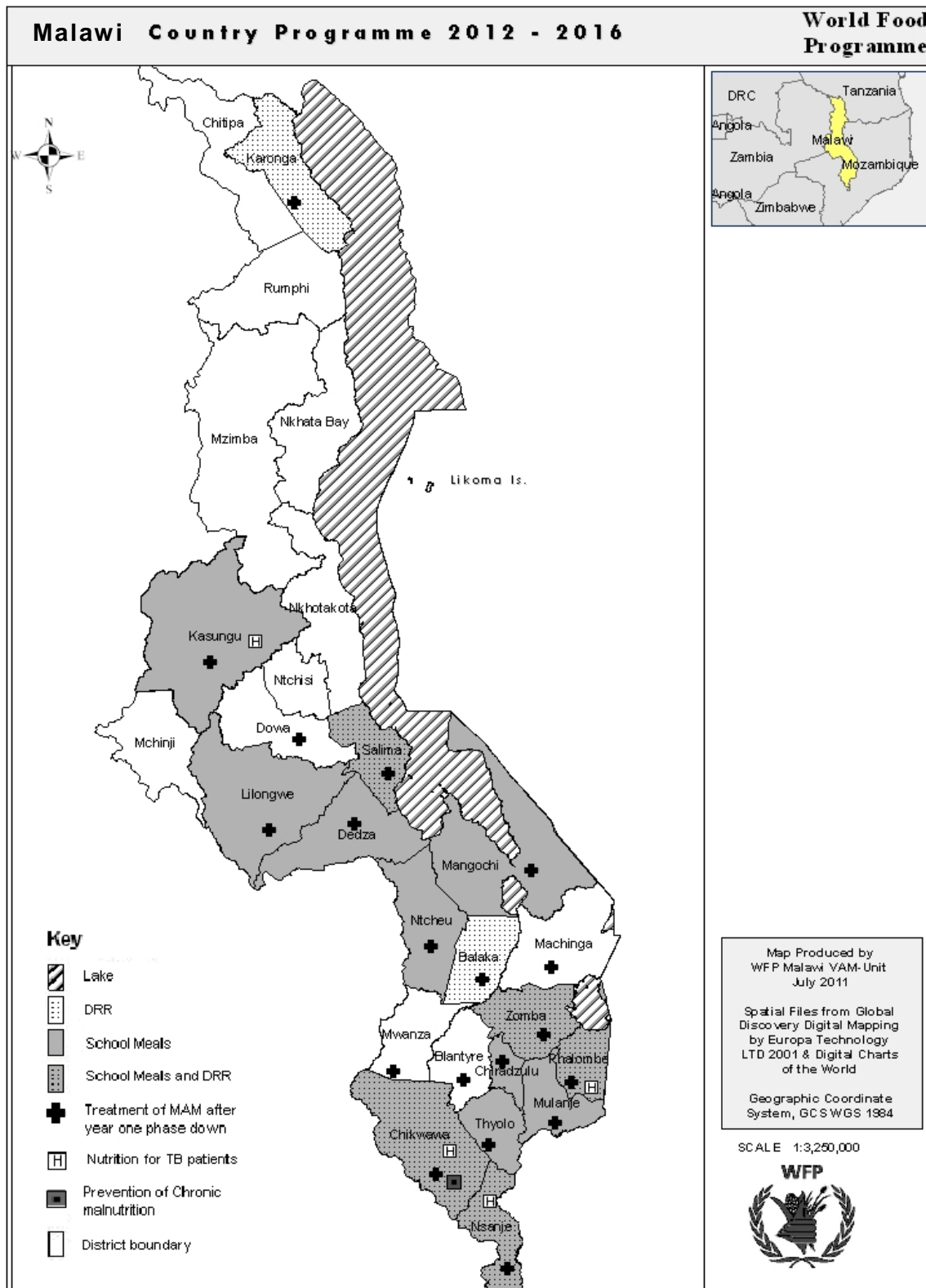


¹ Targets are based on the current level and type of activities under PRRO 105860 and the funding forecast for the CP. The actual number and types of assets created will be based on the participatory rural appraisals.

ANNEX II: LOGICAL FRAMEWORK			
Results	Performance indicators	Risks, assumptions	Resources required
Outcome 7 Adequate food consumption for households at risk of falling into acute hunger	<ul style="list-style-type: none"> ➤ % of households with acceptable food consumption score Target: 100% Baseline: N/A Verification: community and household surveillance system		
Output 7.1 Food and cash assistance provided to vulnerable households	<ul style="list-style-type: none"> ➤ No. of men, women, boys and girls receiving food, cash and non-food items Target: 97,530 Verification: output monitoring reports		
Strategic Objective 5: Strengthen the capacities of countries to reduce hunger, including through hand-over strategies and local purchase			
Outcome 8 Government capacity developed for disaster preparedness	<ul style="list-style-type: none"> ➤ Risk reduction and disaster preparedness and mitigation systems and guidelines in use Target: 5 national contingency plan updates; 4 humanitarian assistance monitoring tools; food and cash programming guidelines Baseline: 1 national contingency plan Verification: documentation <ul style="list-style-type: none"> ➤ Disaster preparedness index Target: 3 Baseline: N/A Verification: stakeholder workshop		
Output 8.1 Early-warning system and humanitarian assistance monitoring tools developed	<ul style="list-style-type: none"> ➤ No. of humanitarian assistance monitoring tools in use Target: 4 Verification: monitoring reports <ul style="list-style-type: none"> ➤ No. of national contingency plans revised Target: 5 Verification: documentation <ul style="list-style-type: none"> ➤ No. of food and cash programming guidelines Target: 1 Verification: documentation <ul style="list-style-type: none"> ➤ No. of stakeholder workshops Target: 5 Verification: documentation		



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

ACE	Agricultural Commodity Exchange for Africa
ARV	anti-retroviral
CP	country programme
CSB	corn-soya blend
DRR	disaster risk reduction
ECD	early childhood development
EMIS	Education Management Information System
FAO	Food and Agriculture Organization of the United Nations
HGSF	home-grown school feeding
MAM	moderate acute malnutrition
NGO	non-governmental organization
P4P	Purchase for Progress
PRRO	protracted relief and recovery operation
RUTF	ready-to-use therapeutic food
SUN	Scaling Up Nutrition
TB	tuberculosis
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
WHO	World Health Organization