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**Executive Board  
Third Regular Session**

**Rome, 20–24 October 2003**

## **COUNTRY PROGRAMMES**

### **Agenda item 7**

*For approval on a  
"no-objection" basis*

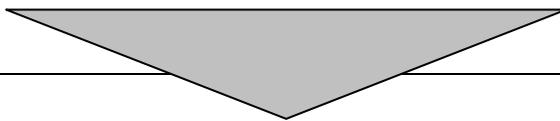
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## **COUNTRY PROGRAMME — PAKISTAN 10269.0 (2004–2008)**

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# Note to the Executive Board



**This document is submitted to the Executive Board for approval on a “no-objection” basis.**

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

Country programme 10269.0 Pakistan has been prepared in conformity with the guidelines from the Executive Board. In accordance with decision 1999/EB.A/2, this CP addresses three of the five programming priorities of the Enabling Development policy. This is a continuation of the ongoing country programme (2001–2003) approved by the Executive Board in May 2001 for a period of 30 months, implementation of which started in 2002. This country programme is prepared for the five-year period 2004–2008 to correspond with the United Nations Development Assistance Framework (UNDAF) and the Government's five-year Development Programme.

Pakistan is classified as a low-income, food-deficit country with a predominantly rural population and a gross national product per capita of US\$470. The population in 2002 was estimated at 141.5 million, with an annual growth rate of 2.6 percent. The majority of the population—84.7 percent—live with a marginal income of less than US\$2 per day. One third of the population live below the poverty line and are unable to purchase enough food to lead a healthy life. This consumption poverty has contributed to poor human development, disproportionately so among women and children, particularly in rural areas.

Social indicators such as literacy and health reflect similar situations. Illiteracy, which affects 50 percent of the population, is considered one of the major indicators of poverty in Pakistan, where heads of poor households are twice as likely to be illiterate as those of non-poor households. Like the rates of poverty cited above, illiteracy is more common in rural areas than in the cities and is especially prevalent among women: only 20 percent of rural women are literate, compared with 47.4 percent of men. Net primary-school enrolment among girls is 37 percent, compared with 47 percent for boys. Similar gender discrepancies are observed in health indicators, which have led to very high maternal and infant mortality rates. Pakistan ranks 138<sup>th</sup> out of 173 countries in the United Nations Development Programme 2002 Human Development Index and 120<sup>th</sup> in the Gender Index.

To respond to the above situation, the Government of Pakistan has outlined several poverty-reduction strategies, many of which have been adopted within the UNDAF. The CP will help to improve access to food in ways that enable women and girls to take advantage of development opportunities and will address gender disparity in education, health and access to productive assets. The expected outcomes of the country programme include: (i) retention of girls in schools; (ii) increased enrolment rates for girls; (iii) increased attendance by women at rural health facilities to obtain reproductive health care and immunization; and (iv) increased organizational and self-development capacities of the various women's groups, achieved through creation and preservation of assets.

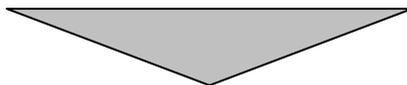
Vulnerability analysis and mapping has been used to identify and target the most food insecure areas to benefit from WFP assistance. All activities addressing each of the three specific objectives are designed to complement one another to ensure maximum benefits to 1.4 million beneficiaries in 34 of the country's most food insecure districts.

The country programme has been developed within the UNDAF and is based on the Common Country Assessment. It is consistent with WFP's Enabling Development policy priorities and takes into account the recommendations made by the Office of Evaluation/WFP evaluation mission of 2001. The Government of Pakistan is the principal partner in implementing all activities and will bear a substantial part of the country programme's financial cost.



For the proposed Pakistan country programme covering the period 2004–2008, the Executive Director requests that the Executive Board approve this programme, on a no-objection basis, subject to the availability of resources, for US\$68.7 million, representing all basic direct operational costs.

## **Draft Decision\***



The Board approves Country Programme—Pakistan (2004–2008) (WFP/EB.3/2003/7/3), for a total quantity of 107,000 metric tons of food and a value of US\$68.7 million representing all basic direct operational costs.

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\* 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. Pakistan is a low-income, food-deficit country (LIFDC) with a gross national product per capita of US\$470.<sup>1</sup> The global economic slowdown in the aftermath of 11 September 2001 has had serious implications for the stability of Pakistan's economy. High debt-service requirements and growing fiscal squeeze led to a smaller proportion of gross domestic product being spent on development and social sectors in the 1990s. This has had serious repercussions for economic growth and poverty reduction. The population in 2002 was estimated at 141.5 million, with an annual growth rate of 2.6 percent.<sup>2</sup> The majority, 84.7 percent, live with a marginal income of less than US\$2 per day.<sup>3</sup> Urban poverty fell during the 1990s, but the incidence and severity of rural and overall poverty remained almost unchanged between the beginning and the end of the decade. The rate of rural poverty is reported to be about 32 percent, compared with 19 percent in urban areas. This difference is of particular concern, because 71 percent of the population live in rural areas.<sup>4</sup>
2. Pakistan is a net food-importing country. Domestic production of wheat, the main diet staple, meets about 80 percent of requirements; between 2.0 and 2.5 million tons are imported annually. Although wheat production exceeded demand in 2000, the recent drought has taken its toll and 2001–2002 production has been significantly lower. Domestic production of edible oil meets only half the requirements, and the import value of edible oil and pulses is significantly high.
3. Food insecurity at the household level in Pakistan has been increasing since the early 1990s, largely as a result of declining real incomes. According to recent estimates, overall capacity to obtain food decreased from 33 percent in 1993–1994 to 24 percent in 1998–1999. According to Pakistan's Federal Bureau of Statistics Economic Survey 2001–2002, 30 million people, or 24 percent of the population, suffered because they could not obtain adequate food in 1999. This scenario has not changed in the last three years. It is estimated that every day one in three people in Pakistan fails to consume enough food to lead a healthy and productive life (Pakistan Human Condition Report 2002). Food has been consistently less available in rural than in urban areas. The disparity has been greater in rural areas: Balochistan Province ranks highest in food deficiency, followed by Sindh. Incidences of food non-availability nearly doubled in Balochistan during the 1990s as a result of economic slowdown and prolonged drought.
4. On average, food expenditure accounts for half or more of each household's income. This level of expenditure has diverted the resources of poorer households away from access to basic education, primary health care and better nutrition. There is evidence that higher rates of malnutrition and food insecurity exist among vulnerable groups in remote regions because of reduced access to food compared with urban and more developed areas. The burden of poverty is borne mostly by women and children, so Pakistan is low on UNDP's gender-related development index based on health, education and income variables.<sup>5</sup>

<sup>1</sup> Asian Development Bank, Poverty Database 2002.

<sup>2</sup> Fifth Population and Housing Census, Government of Pakistan, 1998.

<sup>3</sup> UNDP Human Development Report, 2002.

<sup>4</sup> World Bank, Pakistan Poverty Assessment 2002.

<sup>5</sup> UNDP Human Development Report 2002.



5. Illiteracy has been identified as one of the major indicators of poverty in Pakistan: twice as many household heads are illiterate among poorer households compared with non-poor households.<sup>6</sup> The adult literacy rate in Pakistan is only 49 percent, with a large gender disparity—61 percent for men and 36 percent for women.<sup>7</sup> Literacy rates are lower in rural areas: only 20 percent of women and 47.4 percent of men are literate.<sup>8</sup> It is estimated that some 6 million children aged between 5 and 9, primary-school-age, are unable to attend school. The net enrolment ratio in 1998–1999 was only 42 percent of primary-school-age children, but the figure is significantly lower for girls (37 percent) than for boys (47 percent).<sup>9</sup> The gross enrolment ratio is 60 percent for girls against 84 percent for boys. The large disparity between the net and gross enrolment ratios is a sign of significant repetition and drop-outs.
6. The infant mortality rate of 91 per 1,000 births is high as compared with the averages of 6 per 1,000 in industrialized countries and 66 per 1,000 in developing countries.<sup>10</sup> This implies that 700,000 young children die each year, with malnutrition a major factor in more than half the cases. Of the 2.5 million girls born in Pakistan each year, it is estimated that at least 600,000 are undernourished at birth and thus have an increased risk of poor mental development and reduced immunity to infection. One in every 40 women in Pakistan dies as a result of pregnancy or childbirth. Many women who survive experience serious health problems.
7. The latest nutrition survey (2001–2002) among children aged 6 to 59 months reflects the prevalence of chronic and acute malnutrition in Pakistan—36 percent and 15 percent, respectively; 5 percent suffer from severe wasting. Similar deterioration in nutritional status was noted by the International Food Policy Research Institute (IFPRI) in its 2001 study, conducted among the sample drawn by the Pakistan Institute of Development Economics a decade earlier. One third of pregnant mothers in Pakistan are estimated to be malnourished, resulting in 25 percent of live births being underweight. The number of malnourished children and nutritionally deficient women in Pakistan was estimated at 8 million during 1999–2000. Iron-deficiency anaemia is widely prevalent: 55 percent of children and 45 percent of non-pregnant women have subclinical deficiency.<sup>11</sup> Nutritional deficiencies are generally much worse in rural areas.
8. Recognizing that lasting reduction of poverty and regeneration of economic growth and social cohesion require participatory democratic governance, the Government has adopted a comprehensive decentralization plan. The plan aims to reform what is considered to be an over centralized government in order to improve decision-making, accountability and service delivery. Citizens' rights to development, participation and information are being reinforced. UNDAF supports the decentralization plan by helping to build the capacities of local government institutions and officials at the sub-district and district levels in managing municipal functions such as basic health care, primary education, water, sanitation and solid-waste disposal.

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<sup>6</sup> Poverty in Pakistan, 2002.

<sup>7</sup> Economic Survey, Government of Pakistan, 2000–2001.

<sup>8</sup> UNICEF, State of the World's Children 2003.

<sup>9</sup> CCA 2003.

<sup>10</sup> Asian Development Bank, Poverty Database.

<sup>11</sup> Pakistan National Nutrition Survey.



9. The Government's poverty-reduction strategies are further reinforced in the ten-year long-term Perspective Development Plan (PDP) 2001–2011, the three-year Poverty Reduction Programme (PRP) 2001–2004 and the interim Poverty Reduction Strategy Paper (iPRSP). These plans aim to strengthen pro-poor growth and productivity by:
  - (i) engendering growth through stabilization, an enabling-investment environment and strengthening infrastructure;
  - (ii) increasing economic opportunities for the poor;
  - (iii) improving social sector outcomes;
  - (iv) creating income-generating opportunities through asset creation and improving access to microfinance; and
  - (v) reducing vulnerability to shocks.Along the same lines, provincial poverty-reduction strategies are also being prepared.
10. The UNDAF supports these initiatives by concentrating its efforts on poverty-reduction activities in resource-poor areas, with special emphasis on women, the disadvantaged, young people and adolescents, and by creating social assets for the poor
11. In education, the Government has expressed strong commitment towards achieving the goals of both Millennium Development and Education for All, as reflected, in the Education Sector Reform for 2001–2004, the National Education Policy 1998–2010, the PDP and the National Plan of Action for Education for All 2000–2015. These plans focus on ensuring universal primary education and improving literacy rates. Pakistan faces enormous challenges in meeting its commitment to basic education for all, a commitment that requires reaching the underprivileged—predominantly girls and children from poor rural families, minority groups and tribal populations. To support the Government's initiatives in this sector, UNDAF has recognized six areas of cooperation, including universal, free and compulsory quality primary education for all children, especially girls, and literacy and a non-formal basic education programme for out-of-school children and young people, particularly girls and women.
12. Attainment of the highest standard of health is recognized as a fundamental right of every human being and has been underlined in the Government's National Health Policy based on Health for All, which has recognized several areas that need immediate attention. These include four priority areas supported by UNDAF: (i) reducing the prevalence of communicable diseases; (ii) bridging basic nutritional gaps; (iii) improving reproductive health, with a focus on safe motherhood; and (iv) strengthening institutions.
13. In recent years, women's lower social status and by extension their low access to decision-making positions and low participation in the economic sphere have been recognized as some of the core impediments to national development in Pakistan. Recognizing this fact, the Government has sought to address women's issues and has set up a permanent Commission on the Status of Women. Apart from the goal of increasing women's access to social service and economic participation, a key reform policy includes promoting greater participation of women at the local government level under the Government's decentralization plan and at the provincial and national levels through increased representation in parliament. These efforts are supported by UNDAF, which seeks to support institutional capacity-building for improved governance, particularly at the local level, and to strengthen community-level initiatives for empowerment and development of civil society.



## PAST COOPERATION AND LESSONS LEARNED

14. The WFP programme in Pakistan shifted from the project to the country programme (CP) approach in 1994, when existing projects were combined to form the first CP 1994-1998. A comprehensive evaluation in 1999 concluded that food aid in Pakistan was well integrated in the Government's development plans and reflected the priorities of the donor community. The first CP was extended from 1998 to June 2001 to facilitate preparation of the second CP 2001-2003, which was approved in May 2001 and became operational in 2002. It adopted a women-centred approach and used vulnerability analysis and mapping (VAM) to redirect activities to areas of food insecurity. Given the short duration of the current CP, the proposed new CP is effectively a continuation.
15. Apart from development assistance, WFP has been providing relief to Afghan refugees in Pakistan since 1996 under various phases of emergency operations (EMOPs). A new EMOP that commenced in January 2003 plans to assist up to 288,000 refugees and provide supplementary feeding to 23,000 vulnerable children and women. Until mid-2003, WFP was assisting about 265,000 people affected by the severe drought that has affected many parts of Pakistan.
16. The current CP and the proposed CP have been developed on the basis of many years of knowledge, experience and lessons learned. In an attempt to improve targeting, an extensive VAM exercise was carried out in 2000 throughout the country using secondary and primary data for better targeting. The outcome of the VAM was as follows:
- classification of Pakistan into nine food-economy zones;
  - identification of the 60 most food insecure districts, using a composite food-security indicator resulting from the combination of food economy zone classification and social and economic development indicators;
  - a further narrowing to 34 districts, taking into account availability of viable potential partners and various operational constraints such as difficulties in monitoring, cost effectiveness and access to women beneficiaries; and
  - selection of sub-districts with the highest levels of poverty, verified through field visits.
17. Girls' primary education was and remains one of WFP's key areas of intervention and has achieved impressive results. On average, girls' enrolment and attendance almost doubled in WFP-assisted schools; in some areas there was a six-fold increase between 1994 and 1998. The programme also led to improved teachers' attendance, enhancement of associated requirements such as teachers and classrooms, and establishment of new middle schools to cater for new primary-school graduates. As an example, the changes in one of the WFP-assisted areas in one of the districts are shown below.

### PROGRAMME IMPACT: EDUCATION IN DISTRICT DIR OF NORTHWEST FRONTIER PROVINCE

	1995	2000
Girls' primary schools	86	86
Enrolment	1 616	11 900 (636%)
Classrooms	176	237
Teachers	100	184



18. A study by the United Nations Educational, Scientific and Cultural Organization (UNESCO) has confirmed that food aid is a strong incentive for primary-school enrolment compared with incentives such as cash scholarships, books and uniforms. Its cost-effectiveness in terms of long-term impact is immeasurable, because girls who graduate from WFP-supported schools are expected to contribute significantly to the national economy.
19. The use of a single-commodity high-value/low-volume system, introduced in 1994 to improve the efficiency and cost-effectiveness of food aid in Pakistan, has continued to be the mode of support for the school feeding programme. The success of this approach can primarily be attributed to the income transfer resulting from the high-value food commodity—edible oil—that helped to defray the opportunity costs of sending girls to school and improved the attendance of teachers. This activity, which started in two districts in 1994, was expanded in 2000 to 3,300 schools in 34 districts as identified by the VAM exercise, and has become the core activity of WFP's development programme in Pakistan. The monetary value of the monthly take-home ration of 4 litres of vegetable oil represents nearly 10 percent of the average poor family's monthly income—approximately US\$3.5 out of US\$33—which helps to offset the cost of sending girls to school.
20. Promotion of safe motherhood, the second area of WFP support, was initiated in 1987 with the objective of improving the nutritional status of pregnant and lactating women. The activity was modified in 1994 to focus on women's health and safe motherhood; in 1995 the thematic mission confirmed that food aid had helped to increase attendance at clinics by 70 percent, with consequent increases in immunization rates among women and infants and in crucial prenatal checkups. Although difficult to measure, the impact on women and children is thought to be considerable in view of the fact that even one well-timed visit to a clinic during pregnancy can potentially save the life of a mother. The programme's coverage was reduced from 85 to 19 districts in 2000, following the VAM exercise aimed at targeting the most food insecure areas. A detailed study in 2000 reconfirmed that vegetable oil was the most appropriate incentive for this intervention.
21. The third area of WFP focus, food-for-work (FFW) programmes, traditionally focused on environmental rehabilitation and rural infrastructure development activities. WFP has assisted the Government of Pakistan in planting more than a billion trees. Over time, however, a community-based approach has been adopted whereby the people's needs determined the types of FFW activities to be undertaken. Although assessment of the resultant economic advantages needs detailed study, it is thought that the assets created have resulted in better conditions for women through improved access to schools and clinics, improved access to fuelwood and fodder, and the availability of safe drinking water. The impressive results achieved under this programme encouraged various bilateral donors such as the Netherlands, Australia, Germany and Italy and United Nations agencies to make direct cash contributions for the wage component and non-food items.
22. This activity was redesigned as Creating Assets for Rural Women (CARW) under the second CP, to work with and through women's committees. Assets created under CARW, including community property such as ponds, community forestry, schools and latrines, are expected to be self-sustainable within the community. Partnerships have been developed with two non-governmental organizations (NGOs) for the social mobilization of rural women. Under the new CP, participation will be sought in identifying and implementing activities with newly elected women councillors, particularly those who have benefited from training by the Ministry of Women's Development, Social Welfare and Special Education. It is recognized that there is a need for increased association with men's committees in these traditional rural areas in order to ensure success and community ownership of activities.



23. The use of food stamps has been a successful, cost-efficient alternative mechanism under CARW: it has saved the Government considerable expense in transport, storage and distribution of large quantities of imported wheat. Using the Pakistan-Bait-ul-Mal, a state-owned philanthropic organization, food stamps are distributed to WFP beneficiaries and can be redeemed for basic food items at selected grocers. On a trial basis, WFP has been managing the programme in Sindh province, which has been successful and cost effective; possibilities will be explored to expand this approach to other areas. The current value of the food stamp, Rs 40, or US\$0.70, is sufficient for the daily basic food needs of a family and is equivalent to about half the daily wage rate. Monitoring has shown that the beneficiaries use food stamps to buy items such as wheat flour, oil, pulses, sugar, tea and salt.
24. Like the current CP, the new programme will continue to target rural girls and women through the same activities, in line with UNDAF's three key strategies: (i) assisting in primary school enrolment, retention and completion rates, especially among girls; (ii) assisting in Expanded Programme of Immunization coverage, promotion of safe delivery and bridging basic nutritional gaps; and (iii) helping to create assets and economic opportunities for the poor.

## STRATEGIC FOCUS OF THE COUNTRY PROGRAMME

25. This CP will contribute towards the Millennium Development Goals of universal primary education, gender equality and empowerment of women and reduction of maternal and child mortality and morbidity, in line with Government priorities and plans. Building on the success of the past, WFP will continue to target rural girls and women through the same activities as under the current CP.
26. The CP has been planned in the context of UNDAF, a collective response to national challenges identified in the Common Country Assessment (CCA). Four priority areas of cooperation in the UNDAF have been identified: (i) participatory governance; (ii) poverty alleviation; (iii) health; and (iv) education, with special attention to crosscutting themes such as gender. In support of education, UNDAF areas of cooperation include: (i) quality primary education for all children, especially girls, that is universal, free and compulsory; (ii) literacy and non-formal basic education programmes for out-of-school children and young people, particularly girls and women; (iii) early childhood education, especially for the most vulnerable and disadvantaged; (iv) institutional capacity-building for improved educational management and administration; and (v) improved secondary and vocational training. Under CP Activity 1, WFP will support increased school enrolment, retention and completion rates for girls at the primary level. Regarding health, the UNDAF seeks to reduce the prevalence of communicable diseases by improving child immunization coverage, bridge basic nutritional gaps and improve reproductive health, with a focus on safe motherhood. In this context, CP Activity 2 will provide an incentive for poor rural women to seek health services and immunization for themselves and their children. With regard to CP Activity 3, poverty alleviation, the UNDAF will concentrate its poverty-reduction efforts in resource-poor areas of Pakistan by: (i) strengthening pro-poor growth and productivity; (ii) contributing to employment and income generation, with special emphasis on women, the disadvantaged and adolescents; and (iii) creating social assets for the poor. Within this framework, CARW will contribute to productivity and provide employment and income for rural women through the creation and preservation of assets.



27. WFP's assistance under the CP will support the UNDAF aim of enhancing women's power and decision-making role in families and communities. Women's organizations established to implement WFP-supported activities will be a significant forum for leadership development and a voice for women's needs and concerns. These goals are in line with WFP's Enhanced Commitments to Women and the Enabling Development policy priorities.
28. The connection between the 30 million people who do not have access to adequate food and the much larger number deprived of development opportunities provides a natural niche for WFP development assistance. For the poorest of the poor, food is the basic necessity to enable them to take advantage of development opportunities and build human and material assets needed for more sustainable livelihoods. Using food as an enabler, the CP aims to achieve the following outcomes:
- improved girls' primary-school enrolment, retention and completion rates in selected schools;
  - improved access to social services, especially healthcare services for women;
  - increased immunization rates to help to eliminate and control preventable diseases;
  - increased access for poor rural women by creating and preserving physical, economic and social assets;
  - improved functional literacy, including skills and life skills of women at risk and marginalized groups; and
  - empowerment of women for responsible decision-making.
29. The outputs of the CP are to reach out to the planned number of beneficiaries with food assistance and non-food support through the three activities.
30. The Government's iPRSP and limited resources underline the need to target interventions to the most vulnerable people and to provide assistance for temporary relief and for sustained development. WFP's activities will focus on the poorest areas as identified through VAM. The poorest segments of the population are the main users of rural schools and basic health units in these districts, which means that activities are self-targeted to the poorest people. No further selection is desirable, so that no burden is placed on government staff and conflict with the communities is avoided.
31. The three activities of the CP have been bound together in a complementary way to address a range of fundamental problems in the targeted communities.

### **Basic Activity 1: Assistance to Girls' Primary Education**

32. Assistance to Girls' Primary Education will be the major activity of the CP, implemented in rural food-insecure areas and targeting about 531,000 schoolgirls at 3,300 primary schools with enrolment rates below the national average. Edible oil will be used to attract the girls of poor families to these schools. Each month, the girls will receive one 4-litre can of oil for a minimum 20 days of attendance. Deworming tablets and clean water will be provided to each assisted school to improve the girls' health and school environment. Attraction of young girls to schools is expected to contribute toward women's mobility and participation in economic activity in these conservative communities. This activity will develop a close collaboration with the Government's recently started Tawana Pakistan Programme for girls' education.



### **Basic Activity 2: Promoting Safe Motherhood**

33. Promoting Safe Motherhood, the second activity, will continue to encourage 810,000 pregnant and lactating women to obtain life-saving healthcare services at selected government basic health units; they will receive a 4-litre can of oil at four prenatal and postnatal stages. During prenatal visits, tetanus vaccinations are provided, and messages on safe motherhood, reproductive health, childcare, family planning and feeding practices are communicated. Postnatal visits are expected to increase rates of vaccination of infants against polio and diphtheria-tetanus (DPT). The new CP will explore the feasibility of using blended food to supplement the diets of mothers and infants through the ongoing fortified blended food pilot programme. This pilot aims to improve the health and nutritional status of pregnant and lactating women and provide reproductive health and nutrition messages and health services.

### **Basic Activity 3: Creating Assets for Rural Women**

34. The third activity, CARW, will provide opportunities for 45,000 women and adolescent girls to create and preserve physical, economic and social assets in line with WFP's Enabling Development policy. CARW activities will be identified by women's organizations and will create opportunities for employment and income-generation through FFW and provide support for human-resource development through food for training (FFT). Women and girls are the prime beneficiaries of all proposed activities, but the benefits will extend to their families and communities. Food stamps valued at approximately Rs 40 per day, equivalent to US\$0.70, will continue to be provided to beneficiaries and redeemable at selected grocers. The value of the food stamps will be reviewed and adjusted according to inflation, wage rates and the cost of living.

## **IMPLEMENTATION STRATEGY**

35. Provincial departments will be the implementing partners for CP Activities 1 and 2; government departments and NGOs will implement CP Activity 3. The edible oil for CP Activities 1 and 2 will be delivered to Karachi port, after which the provincial implementing departments will collect it and transport it to the project areas. The Government of Pakistan will bear all associated costs of transport, storage and distribution. Under CP Activity 3, food stamps will continue to be provided to beneficiaries. The resource contributions of the Government for all three activities, estimated at US\$102 million, amount to more than half of the total cost of the CP; they will represent school and clinic building maintenance, school and health supplies, transport, human resources and the cost of materials for FFW activities.
36. Provincial government departments of education, health, forestry and local government are the traditional partners in the implementation of the programme. WFP will continue to enhance cooperation with traditional co-financiers and seek new partnerships. WFP will continue to participate in thematic working groups, including CCA/UNDAF, the Education Sector Donor Group, the National Micronutrient Committee, the Anaemia Task Force and the Inter-Agency Group for Gender and Development, and with UNESCO, the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) to promote community participation and enhanced use of the Education and Health Management Information System. Collaboration with UNDP will continue and be enhanced.



37. In order to ensure that WFP is not supporting substandard schools and health centres, WFP has worked with UNESCO and the WHO to develop minimum-requirement checklists for rural primary schools and health facilities.
38. WFP will determine its exit strategy for an activity or district on two levels: (i) by monitoring food-security indicators so that food aid will be phased out when there is no longer a problem of inadequate food consumption; and (ii) by monitoring outcomes and outputs as per agreed performance indicators. Advocacy will be an essential element of any exit strategy. WFP will work with the Government, partners and communities to raise awareness of health and nutrition issues among rural communities. Changing attitudes toward basic health will help to ensure that communities maintain interventions after the withdrawal of WFP assistance. Steps such as encouraging parents to see results, share experiences with each other, participate in school activities and interact with teachers will be undertaken in relation to girls' education and consolidated through establishment of parent-teacher committees or village health committees in WFP-assisted areas.

## **PROGRAMME MANAGEMENT, MONITORING AND EVALUATION**

39. As the current CP was only a few months old when this document was prepared, the country strategy outline (CSO) and the preliminary appraisals are still a valid basis for the development of the new CP. During the review and approval processes, consultative meetings were convened with federal ministries, provincial departments, United Nations agencies and NGOs, which resulted in prioritization of activities and areas for implementation that are also incorporated in this CP.
40. In line with the WFP/EB.A/2002/5-C policy directive, a results-based monitoring and evaluation (M&E) system will be developed to enable WFP Pakistan to fulfill its mandate and commitments concerning management, performance measurements, accountability, learning and advocacy. WFP Pakistan will draw upon technical support from Headquarters, the regional bureau, specialized United Nations Development Group (UNDG) partners, UNESCO, UNICEF, the Food and Agriculture Organization of the United Nations (FAO), UNDP and WHO to evaluate CP activities.
41. Developing a logical framework with the implementing partners and stakeholders will strengthen M&E strategy for all activities. An annual M&E plan for data collection and reporting will be developed for each activity, with appropriate formats. Capacity-building for WFP and counterpart staff in M&E strategy will be carried out regularly. Baseline information will be collected and compared during different stages of programme implementation. Monitoring findings will be used as a tool for corrective measures required to achieve the intended outcomes for each activity.
42. In an effort to move towards results-based monitoring, WFP will track the achievement of CP objectives, intended benefits and outcomes. Realistic and time-bound indicators have been developed at different levels of each activity in the logical framework to report on activity progress. Counterparts and communities will be expected to report on identified indicators.
43. Linkages will be strengthened with the provincial government Health Management Information System and Educational Management Information System to report on provincial targets.



44. Monitoring will be carried out through a mechanism that considers results through assessment of output and outcome indicators: (i) monitors based in Islamabad and field units will record standard information on checklists; a summary of the main findings and proposed action will be sent to Islamabad for follow-up; (ii) beneficiary contact monitoring will be undertaken by women personnel to compare actual results with expectations; and (iii) periodic studies will be undertaken to assess output and outcome indicators.
45. Vulnerability analysis will be used to monitor food security in targeted areas. Throughout the CP period, food-security indicators will be used to decide when to enter a new area and when to exit from areas under implementation. Activity-specific indicators such as enrolment rates for the education activity will be used as exit strategies, for example, when enrolment rates for girls in primary schools in an area exceed 85 percent, support to the activity will end in that area.
46. Efforts will be made to enhance NGO collaboration and participation in identifying, implementing, monitoring and supervising CP activities. NGOs will play a particularly important role in CARW activities by providing technical support and training to ensure successful implementation. Partnerships will be developed with regional NGOs for advocacy and local monitoring of the health and education activities in support of results-based monitoring and management.
47. Annual reviews will be held by the Activity Review Committee, led by the provincial planning and development departments and with the participation of implementing partners, United Nations partners and other specialized agencies and institutions.
48. The mid-term evaluation of CP activities will be undertaken in 2005 in collaboration with other partners and the WFP regional bureau to assess the effectiveness of the CP in meeting the intended outcomes, including WFP's Commitments to Women. For this purpose, baseline information on a minimum set of gender-sensitive indicators will be collected to assess achievements against commitments, as envisaged in WFP's Gender Policy 2003–2007.
49. Donor representatives will be encouraged to participate in the annual reviews and special visits will be arranged to show them the various activities of the CP.



## ANNEX I

## BENEFICIARY COVERAGE BY ACTIVITY AND FOOD ALLOCATION

CP activity	Quantity of commodities (tons)	Distribution by activity (%)*	Number of beneficiaries male/female/total (CP period)	% of female beneficiaries (CP period)
<b>Activity 1:</b> Assistance to Girls' Primary Education	65 000	60	530 900	100
<b>Activity 2:</b> Promoting Safe Motherhood	12 000	12	810 000	100
<b>Activity 3:</b> Creating Assets for Rural Women	30 000	28	45 000	70
<b>Total CP</b>	<b>107 000</b>		<b>1 385 900</b>	

\* Commodities allocated to each activity as percentage of total commodities.



## RESULTS AND RESOURCES MATRIX SUMMARY OF PAKISTAN COUNTRY PROGRAMME, 2004–2008

Results hierarchy	Performance indicators	Risks and assumptions	Resources required
<p><b>Goal at national level</b></p> <p>Universal primary education for boys and girls by 2010 (PDP).</p> <p>Increased economic opportunities for the poor (PRP, IPRSP).</p> <p>Economic empowerment of women (PDP).</p> <p>Improved child immunization to 100 percent by 2010 (PDP).</p> <p>Reduce food poverty to 15 percent by 2011 (IPRSP).</p>	<p><b>National-level impact indicators</b></p> <p>Rate of primary-school-age children enrolling and completing primary education.</p> <p>Percentage of women holding seats in parliament and local government institutions.</p> <p>Percentage of women gainfully employed.</p> <p>Percentage of children immunized.</p> <p>Percentage of people food-poor.</p>		
<p><b>UNDAF outcome(s)</b></p> <p>Improved access of the poor to public social services.</p> <p>Revitalization of routine Expanded Programme for Immunization.</p> <p>Improved maternal and neo-natal outcomes of pregnancy and delivery.</p> <p>Improved primary-school enrolment, retention and completion rates, especially among girls.</p>	<p><b>UNDAF outcome indicators</b></p> <p>Net enrolment rate for girls.</p> <p>Reduction in maternal, infant and under-5 mortality.</p> <p>Number of training programmes for service providers and communities for delivery and utilization of public services.</p> <p>Percentage of children under 12 months fully immunized.</p> <p>Percentage of pregnant mothers fully immunized.</p> <p>Maternal mortality rate.</p> <p>Percentage of trained personnel attending pregnancy.</p> <p>Gross enrolment rate by gender.</p> <p>Net enrolment rate by gender.</p>		



RESULTS AND RESOURCES MATRIX SUMMARY OF PAKISTAN COUNTRY PROGRAMME, 2004–2008			
Results hierarchy	Performance indicators	Risks and assumptions	Resources required
<p>Improved functional literacy, including income-generating skills and life skills programme, of women at risk and marginalized groups.</p> <p>Percentage of women employed in formal and informal sectors increased.</p>	<p>Drop-out rates by gender.</p> <p>Percentage of pupils completing primary school by gender.</p> <p>Adult literacy rates by gender.</p> <p>Number of government-sponsored literacy programmes.</p> <p>Gender-disaggregated data on employment.</p>		
<p><b>WFP CP outcomes</b></p> <p><b>Activity 1: Assistance to Girls' Primary Education</b></p> <p>Improved primary-school enrolment, retention and completion rates at selected girls' schools in targeted areas.</p> <p><b>Activity 2: Promoting Safe Motherhood</b></p> <p>Improved access to public services, especially healthcare services to women.</p> <p>Increased immunization rates to help towards elimination and control of vaccine-preventable diseases.</p> <p><b>Activity 3: Creating Assets for Rural Women</b></p> <p>Increased access for poor rural women in creating and preserving physical, economic and social assets.</p> <p>Improved skills of poor rural women.</p> <p>Improved access and participation of poor rural women in power structures and decision-making.</p>	<p>Gross enrolment rates in primary education, by gender.</p> <p>Proportion of girls starting grade 1 who reach grade 5.</p> <p>Drop-out rate at each level of assisted school and comparison with control group.</p> <p>Sex ratio in assisted school and comparison with control group.</p> <p>Student-teacher ratio for each assisted school and comparison with control group.</p> <p>Percentage of pregnant women obtaining health care.</p> <p>Vaccination rates of children immunized with BCG and DPT vaccine.</p> <p>Vaccination rates of pregnant women vaccinated with tetanus toxoid vaccine.</p> <p>Percentage of births attended by skilled health personnel.</p> <p>Number and percentage of households/women receiving food stamps and having retained assets.</p> <p>Extent to which assets created are utilized and maintained.</p> <p>Percentage of contribution made by food stamps to total family food consumption.</p> <p>Number and percentage of women and adolescent girls utilizing skills acquired.</p> <p>Percentage decrease in time spent on water collection.</p> <p>Percentage increase in fuelwood availability.</p> <p>Number and percentage of women members and leaders in local government and non-government bodies.</p>	<p><b>What may be needed to obtain the intended UNDAF outcome</b></p> <p>Effective monitoring of spending in all three activities.</p> <p>Monitoring of intermediate and outcome indicators.</p> <p>Building of technical capacity for the adequate implementation of monitoring system.</p> <p>Adequate finances.</p> <p>Improved governance and institutional capacity.</p> <p><b>Potential risks</b></p> <p>Political instability.</p> <p>Backsliding in government policies.</p> <p>Exogenous shocks.</p>	<p>Total resources allocated for CP activities in value terms: US\$68,691,250</p> <p>Expected government contribution: US\$102,000,000</p> <p>Activity 1: US\$52,146,250</p> <p>Activity 2: US\$9,627,000</p> <p>Activity3: US\$6,918,000</p> <p>Total expected government contribution: US\$102,000,000</p>



## RESULTS AND RESOURCES MATRIX SUMMARY OF PAKISTAN COUNTRY PROGRAMME, 2004–2008

Results hierarchy	Performance indicators	Risks and assumptions	Resources required
<p><b>Key output, WFP</b></p> <p><b>Activity 1: Assistance to Girls' Primary Education</b></p> <p>531,000 girls received food rations and deworming treatment.</p> <p><b>Activity 2: Promoting Safe Motherhood</b></p> <p>810,000 women received food rations and health services for themselves and their children.</p> <p><b>Activity 3: Creating Assets for Rural Women</b></p> <p>45,000 women and adolescent girls participating in FFW/FFT received food rations.</p> <p>Community assets created and rehabilitated.</p> <p>Participation of women in community development activities through women's organizations.</p> <p>Skills training provided.</p>	<p><b>Output indicators</b></p> <p>Number of girl receiving rations.</p> <p>Number of girls receiving deworming treatment.</p> <p>Number of women receiving WFP ration.</p> <p>Number of women and children receiving health services (immunization and health education).</p> <p>Number of FFW assets beneficiaries, disaggregated by gender.</p> <p>Number and type community assets.</p> <p>Number of activities identified by women's organizations.</p> <p>Number of training sessions conducted.</p> <p>Number of women and number of adolescent girls completing skills training.</p>		<p><b>Country Office Monitoring Plan</b></p> <ul style="list-style-type: none"> <li>- Monitoring by field unit staff.</li> <li>- Country office to consolidate field unit reports and take corrective actions with Government of Pakistan.</li> <li>- Beneficiary contact monitoring by country office staff.</li> <li>- Six-monthly reviews at federal and provincial levels.</li> <li>- Special studies designed by M&amp;E unit.</li> </ul>



## ANNEX III

<b>BUDGET SUMMARY FOR PAKISTAN COUNTRY PROGRAMME (2004–2008)</b>
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<b>Basic Activities</b>
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	Activity 1	Activity 2	Activity 3	Total
Food commodities (mt)	65 000	12 000	30 000	<b>107 000</b>
Food commodities (value)	46 150 000	8 520 000	4 650 000	<b>59 320 000</b>
External transport	4 485 000	828 000	2 070 000	<b>7 383 000</b>
Other direct operational costs (ODOC)	1 511 250	279 000	198 000	<b>1 988 250</b>
<b>Total direct operational costs (DOC)</b>	<b>52 146 250</b>	<b>9 627 000</b>	<b>6 918 000</b>	<b>68 691 250</b>
Direct support costs (DSC) <sup>1</sup>				<b>4 121 475</b>
Indirect support costs (ISC) <sup>2</sup>				<b>5 096 891</b>
<b>Total WFP costs</b>				<b>77 909 616</b>
<b>Government contributions<sup>3</sup></b>				<b>102 000 000</b>

<sup>1</sup> The DSC amount is an indicative figure presented to the Executive Board for information purposes. The annual DSC allotment for a Country Programme is reviewed and set annually following an assessment of DSC requirements and resource availability.

<sup>2</sup> The ISC rate may be amended by the Executive Board during the period covered by the CP.

<sup>3</sup> The government's contribution includes counterpart cash, administrative expenses — salary and operational expenses of all staff related to the CP — and food transport, storage and distribution expenses.



## ANNEX IV

## COUNTRY PROGRAMME—PAKISTAN 10269.0 (2004–2008)



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

BCG	Bacillus of Calmette and Guerin (vaccine)
CARW	Creating Assets for Rural Women
CCA	common country assessment
CP	Country Programme
CSO	Country Strategy Outline
DOC	direct operational costs
DPT	polio and diphtheria-tetanus vaccine
DSC	direct support costs
EMOP	emergency operation
FAO	Food and Agriculture Organization of the United Nations
FFT	food for training
FFW	food for work
IFPRI	International Food Policy Research Institute
iPRSP	Interim Poverty Reduction Strategy Paper
ISC	indirect support costs
LTSH	landside transport, storage and handling
M&E	monitoring and evaluation
NGO	non-governmental organization
ODOC	other direct operational costs
OEDE	Office of Evaluation
PDP	Perspective Development Plan
PRP	Poverty-Reduction Programme
UNDAF	United Nations Development Assistance Framework
UNDG	United Nations Development Group
UNDP	United Nations Development Programme
UNESCO	United Nations Educational Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
VAM	vulnerability analysis and mapping
WHO	World Health Organization

