Pakistan CO Project EMOP 200177

B/R No.: 6

Date: 11 July 2012

BUDGET REVISION FOR THE APPROVAL OF REGIONAL DIRECTOR

			<u>Initials</u>		In Date	Out Date	<u>Reason</u> For Delay
ORIGINATOR							<u></u>
Country Office or Regional Bureau on behalf of Country Office							
CLEARANCE							
Project Budget & Programming Officer, RMBP							
Chief, RMBP							
Chief, ODLT (change in LTSH an External Transport)	d/or						
APPROVAL							
Regional Director							
PROJECT Start date: 01-Aug-2010 End date	-			-			2012
East cost		is Budget		Revisi		New Budget	4 412
Food cost External transport	US\$ US\$	502,274 41,560		US\$ US\$	0 0	US\$ 502,27 US\$ 41,56	60,838
LTSH	US\$ US\$	76,774		US\$	0		4,727
ODOC	US\$	47,189		US\$	0		39,191
DSC	US\$	49,225		US\$	0		25,181
ISC (7%)	US\$	50,191		US\$	0		01,704
Total WFP cost (US\$)	US\$	767,216		US\$	0	US\$ 767,21	
TYPE OF REVISION							
 Additional commodity Additional external transpo 						☐ Additional LTSH ☐ Other	
DISTRIBUTION:DED, ODDirector, ODXDeputy COO & Director, ODEChief, RMBPChief, ODLTChief, ODXRCountry DirectorProgramme Officer, RMBPOD RegistryProgramming Assistant, RMBPDirector, ERD and COOLiaison Officer, OD @					Chief, ODXP Regional Direct RB Programme RB Programme RB Chrono	Advisor	

NATURE OF BUDGET REVISION

1. This budget revision to Pakistan Emergency Operation (EMOP) 200177 seeks to:

- Extend the EMOP in time from 1 October 2012 to 31 December 2012 (an additional period of three months); and
- Align gross requirements for extended activities of 4,106 mt of food to these months, from contingency quantities budgeted.
- 2. No additional commodities are required, as the tonnage in the budget plan is currently sufficient to cover planned requirements during the period of extension. As such, no additional external transport, landside transport, storage and handling (LTSH), other direct operational costs (ODOC) and direct support costs (DSC) are required to support this extension.
- 3. This extension in time is required in order for WFP to continue the implementation of a lifesaving nutritional treatment programme in areas affected by both the 2010 and 2011 flood disasters. This programme is envisaged as a central component of proposed new Protracted Relief and Recovery Operation (PRRO) 200250 for Pakistan (planned to commence on 1 January 2013), and its success is contingent upon an *uninterrupted* delivery of assistance. The importance of addressing mounting undernutrition across Pakistan is underscored by the results of the draft 2011 National Nutrition Survey¹, which found that nationwide Global Acute Malnutrition (GAM) rates now exceed the World Health Organisation (WHO) "critical" threshold.

JUSTIFICATION FOR EXTENSION-IN-TIME

Summary of Existing Project Activities

- 4. WFP assistance under EMOP 200177 (Emergency Food Assistance to Families Affected by Monsoon Floods in Pakistan) aims to save lives and avert hunger amongst vulnerable flood-affected persons and is in line with WFP's Strategic Objective 1 (to "save lives and protect livelihoods in emergencies").
- 5. EMOP 200177 was launched in August 2010 to provide relief food assistance in response to the effects of unprecedented flooding across Pakistan, for an initial period of three months. Through five subsequent budget revisions, the EMOP was extended in time until 30 September 2012 and expanded to include the provision of early recovery assistance to victims of both the 2010 and 2011 flood disasters.
- 6. In late-2010, Pakistan experienced its worst natural disaster in living memory, as approximately one-fifth of the country's total landmass was submerged by floodwaters, affecting an estimated 20 million people and leaving more than 10 million in need of immediate food assistance. Following the conclusion of unconditional food distributions in early 2011 (which had reached more than 8.7 million individuals since the onset of the floods) WFP completed a transition to early recovery support in the worst-affected areas by April. By the end of 2011, conditional recovery assistance had reached close to 6 million beneficiaries through livelihood-support activities, food assistance to schoolchildren

¹ National Nutrition Survey, Aga Khan University, Pakistan Medical Research Council, Ministry of Health Nutrition Wing, and supported by UNICEF, January 2012

returning to school, and targeted nutritional support for moderately acutely malnourished (MAM) children and pregnant and lactating women (PLWs). The proportion of livelihoodsupport beneficiaries found to have adequate food consumption levels had increased significantly by the end of the year: to 76 percent, from a baseline of 65 percent in the immediate aftermath of the disaster. Results from the targeted supplementary feeding programme were equally encouraging, with recovery rates amongst both moderately acute malnourished children and PLWs exceeding the target threshold of 75 percent. Furthermore, monitoring findings confirmed an encouraging 95 percent retention rate in those primary schools at which assistance was provided.

- 7. Only one year on from the 2010 disaster, communities in Sindh and Balochistan were again subjected to massive monsoon-related flooding in 2011: affecting an estimated 5.8 million people, of whom more than 3 million were in need of immediate food assistance. WFP launched an emergency response following an official government request for international assistance in September. By December, more than 3.5 million affected individuals had benefited from the unconditional receipt of WFP life-saving food rations, surpassing planning figures as the full extent of the disaster exceeded initial expectations. This assistance again proved critical in helping to maintain adequate food consumption and protect the lives of people in distress. An independent study² at the end of 2011 concluded that overall the proportion of newly flood-affected families in Sindh with an adequate food consumption score had increased to 83 percent from an average 51 percent observed by the Multi-Sector Damage Needs Assessment³ (MSDNA).
- 8. WFP has continued the implementation of recovery activities in areas affected by both disasters during 2012, reaching 3.4 million beneficiaries by May.

Purpose of Extension

- 9. The extension proposed herein would allow WFP to continue the provision of life-saving targeted nutritional support to MAM children and PLWs through the existing Community Management of Acute Malnutrition (CMAM) programme, jointly implemented with the United Nations Children's Fund (UNICEF).
- 10. Increases in the prevalence of undernutrition in recent years underscore the urgency of a robust response to this mounting problem. The 2011 NNS for which data was collected after the 2010 disaster but prior to the 2011 floods found that GAM rates amongst children under five now exceed the WHO "critical" threshold of 15 percent, and are as high as 23 percent in some southern districts of Sindh. The situation may reasonably be expected to have worsened in the aftermath of the 2011 floods. The experience of the CMAM initiative thus far would support this assumption, with the number of beneficiaries enrolled in the programme continuing to increase and consistently exceeding planning figures.
- 11. These needs are persistent and warrant ongoing assistance. The duration of the proposed extension has been set at a total of three months, in order to ensure a continuation of the CMAM programme in flood-affected areas marked by poor nutritional indicators until the end of the year. Thereafter, the programme will be continued in the same locations through a proposed new PRRO (200250) for Pakistan scheduled to commence on 1 January 2013.

² Year-End Outcome Assessment, Sustainable Development Foundation, December 2011

³ Multi-Sector Damage Needs Assessment, Pakistan National Disaster Management Authority and United Nations Agencies, December 2011

- 12. Any suspension during the interim period between the current end-date of this EMOP and the start of the new PRRO would cause significant disruption to both programmatic and implementation protocols. Any interruption to treatment schedules risks inadequate recovery amongst beneficiaries at best, and potentially a reversal of nutritional gains made thus far at worst. At the same time, as the necessary implementation infrastructure is already well-established in target locations, dismantling and later re-establishing the same would have cost implications and may result in an inability re-engage the qualified human resources necessary to successfully execute the programme. It may be noted that, in accordance with observations made by an independent evaluation of this EMOP, WFP has since deployed additional nutritionist personnel at the provincial level, in order to strengthen the Programme's competencies in the field vis-à-vis UNICEF. Similarly, should the programme be perceived as unreliable by local communities, beneficiaries may be discouraged from regularly attending or even enrolling.
- 13. The CMAM programme is conducted through established centres in health facilities and within communities. Implementation takes place in close coordination with local Departments of Health, UNICEF which treats the Severely Acute Malnourished (SAM) and Non-Governmental Organisations (NGOs). Alongside the programme, efforts are made to protect and promote appropriate infant feeding practices by strengthening the skills and knowledge of health workers, and raising awareness among mothers and other care-givers.
- 14. Children with a mid-upper arm circumference (MUAC) measurement between 11.5cm and 12.4cm are admitted to the programme and treated with daily rations of ready-to-use supplementary food (RUSF) Supplementary PlumpyTM or the locally produced equivalent, 'Achamum'. PLWs with a MUAC measurement of less than 21cm receive monthly rations of fortified blended food (FBF) and fortified vegetable oil. Siblings of children affected by both MAM and SAM will receive High-Energy Biscuit (HEB) rations. This is intended to minimize the sharing of supplementary and therapeutic foods provided to children under treatment: which, as previously observed, can seriously hamper the recovery process.

TABLE 1: PLANNED CMAM BENEFICIARIES (OCTOBER-DECEMBER 2012)							
MAM Children (6-59 months)	PLWs	Siblings of SAM and MAM Children	Total				
99,115	100,342	152,756	352,213				

15. During the proposed period of extension, WFP plans to assist a total of 352,213 beneficiaries through the CMAM programme.

FOOD REQUIREMENTS

TABLE 2: COMMODITY REQUIREMENTS (OCTOBER-DECEMBER 2012)					
RUSF	FBF	HEB	Vegetable Oil	Total	
892	1,505	1,031	678	4,106	

16. No additional food is required to support this proposed extension, as the tonnage in the budget plan included gross requirements for any scale-up of the CMAM programme within its contingency allocation.