

Cuba DEV 105890 - B/R No.6
Support to the National Plan for the Prevention and Control of Anemia
in the Five Eastern Provinces of Cuba

BUDGET REVISION FOR THE APPROVAL OF REGIONAL DIRECTOR

	<u>Initials</u>	<u>In Date</u>	<u>Out Date</u>	<u>Reason For Delay</u>
<u>ORIGINATOR</u>				
Country Office or Regional Bureau on behalf of Country Office				
<u>CLEARANCE</u>				
Project Budget & Programming Officer, RMBP				
Chief, RMBP				
Chief, ODLT (change in LTSH and/or External Transport)				
<u>APPROVAL</u>				
☐ Regional Director				

PROJECT
Start date: 1 Jan 2008 **End date:** 31 Dec 2012 **Extension/Reduction period:** 12 months **New end date:** 31 Dec 2013

	Previous Budget		Revision		New Budget
Food cost	\$ 6,827,403	\$	1,011,488	\$	7,838,891
External transport	\$ 1,248,859	\$	6,176	\$	1,255,035
LTSH					
ODOC	\$ 1,234,006	\$	159,107	\$	1,393,113
DSC	\$ 561,127	\$	145,092	\$	706,219
ISC (7%)	\$ 690,998	\$	92,530	\$	783,528
Total WFP cost (US\$)	\$ 10,562,393	\$	1,414,393	\$	11,976,786

TYPE OF REVISION

☒ Additional commodity
 ☒ Additional DSC
 ☒ Additional ODOC
 ☐ Additional LTSH
☒ Additional external transport
 ☒ Extension in time
 ☐ Other

NATURE OF THE INCREASE

This budget revision seeks to increase the total project budget in the amount of US\$1,414,393 due to:

1. An extension in time for an additional twelve months, until 31 December 2013.
2. Addition of 1,802.44mt of food valued at US\$1,011,488 to cover the needs of the beneficiaries during the extended period. This includes the inclusion of 2.44mt of micronutrient powder (MNP) to the food basket.

DISTRIBUTION:

DED, OD
 Deputy COO & Director, ODE
 Chief, ODLT
 Country Director_Cuba
 OD Registry
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 RB Programme Advisor
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 RB Chrono

3. Increase ODOC in the amount of US\$159,107, including US\$127,155 (80 percent) for capacity augmentation. An increase in DSC of \$145,092 is needed to support costs staff and recurring costs related to the extension.
4. Increase in total associated costs of US\$402,905.

JUSTIFICATION FOR EXTENSION-IN-TIME AND BUDGET INCREASE

1. DEV 105890 was originally approved for a period of five years, from 1 January 2008 to 31 December 2012. However, the new UNDAF cycle for Cuba will not start until 1 January 2014. For that reason, all current UN programmes have to be extended for an additional year until 31 December 2013. The country office has determined that the project has not reached its objectives and, therefore, an extension is required to bridge the gap while a new project is designed and approved in the framework of the 2014-2018 cycle. A new, complementary, activity has been added for the one year extension consisting in the distribution of Micronutrient Powder (MNP) as a complement to the distribution of food.

Summary of existing project activities

2. The project focuses its activities in the five eastern provinces of Cuba (Guantánamo, Santiago de Cuba, Granma, Holguín and Las Tunas) in support of the National Plan for the Prevention and Control of Anaemia. This programme aims to reduce the prevalence of anaemia in children under 5 in order for the country to achieve its MDG target of 15 percent by 2015. WFP and the Government of Cuba have agreed on a two-track strategy: WFP provides iron-rich food while enhancing local production capacity to extend access to an affordable food basket; establish production of enriched blended flour; improve household consumption patterns; enhance food and nutritional surveillance; and build national capacity to improve logistic capacities and support the phase-out of WFP assistance.
3. The activities foreseen for the additional year remain for the most part those that were approved for the initial five years. Beyond food production and distribution, capacity augmentation plays a very important role. The strategy involves training and communication in nutrition, including development of an integrated plan by the Ministry of Public Health, Federation of Cuban Women (La Federacion de Mujeres Cubanas –FMC), UNICEF, the Pan-American Health Organization (PAHO) and WFP for a social communications campaign aimed at mothers, health workers and food distribution personnel. The campaign will include monitoring and evaluation (M&E) by the National Centre for Health Promotion and Education (CNPES) to assess progress.
4. The local production capacity of supercereal currently stands at 150 MT per month, enough to cover 100,000 beneficiaries, while the total caseload amounts to 155,000. Thus, the CO has foreseen the distribution of MNP among those children with higher anaemia prevalence. The effectiveness of the MNP was proven through a pilot project in a municipality where the anaemia prevalence rate dropped from 36 to 7.2 percent after six months of MNP distribution.

Purpose of extension and budget increase

5. This revision and extension in time will allow WFP to continue to assist 120,333 beneficiaries for an additional twelve months. The overall beneficiary number was adjusted to reflect the local production capacity.

TABLE 1. BENEFICIARIES BY ACTIVITY TYPE			
	Beneficiaries		
Activity	Present	Decrease	Revised

Supplementary Feeding	136,700	16,367	120,333
Total	136,700	16,367	120,333

FOOD REQUIREMENTS

6. The project requires an additional 1,800mt of Supercereal and 2.44mt of MNP in 2013.
7. Since local production limitations will not allow WFP to assist with food the total number of foreseen beneficiaries, it is proposed to use MNP to target those children with higher anaemia prevalence. MNP will be procured internationally. The internal transportation costs of the MNP will be covered by the government.

TABLE 2. FOOD REQUIREMENTS BY ACTIVITY TYPE			
	Food requirement (mt)		
Activity	Present	Increase	Revised
Supplementary Feeding	10,889	1,802	12,691
Supercereal	10,889	1,800	12,689
Micronutrient powder	0	2.44	2.44
Total	10,889	1,802	12,691

8. Under the supplementary feeding activity focused on the prevention and reduction of anaemia, WFP will provide:
 - 50g. of Supercereal to 100,000 children 6-35 months of age in the 54 municipalities of the eastern region for 365 days.
 - 60 MNP sachets twice a year to 20,333 children 12-24 months of age in municipalities with higher anaemia prevalence.
9. The overall objectives and implementation modalities have not changed.