Swaziland DEV 200508 B/R No.: 02

BUDGET REVISION FOR THE APPROVAL OF REGIONAL DIRECTOR

	<u>Initials</u>	In Date	Out Date	Reason For Delay
<u>ORIGINATOR</u>				
Country Office or Regional Bureau on behalf of Country Office	e			
<u>CLEARANCE</u>				
Project Budget & Programming Officer, RM	IBP			
Chief, RMBP				
Chief, OSLT (change in LTSH and/or External Transport)				
<u>APPROVAL</u>				
Regional Director				
PROJECT Start date: 01 Jan 2013 End date: 31 D	Dec 2014 Extension	on period: 6 months	New end da	ate: 30 June 2015
:	Cost (United State	s dollars)		
Food and Related Costs Cash and Vouchers and Related Costs Capacity Development & Augmentation DSC ISC Total cost to WFP CHANGES TO:	Current Budget US\$ 3 145 619 US\$ - US\$ 15 000 US\$ 475 415 US\$ 254 522 US\$ 3 890 556	Increase US\$ 745 829 US\$ - US\$ 10 411 US\$ 116 890 US\$ 61 119 US\$ 934 248	US\$ 3 US\$ US\$ US\$ US\$	ed Budget 3 891 447 - 25 411 592 305 315 641 1 824 804
	ol Transfers Related Costs	☐ CD&A ☐ DSC ☑ Project duration ☐ Other	☐ OD0 n ☐ C&7	Rates SH (\$/MT) OC (\$/MT) V Related (%)
DISTRIBUTION: DED & COO Director, OME Director, PGG Chief, OSLT Chief, RMBP Country Director	Director, OSZ Chief, OSZP Chief, OSZA Chief, OSZI Programme Officer, R Programming Assistar		Regional Direct RB Programmor RB Programmor RB Chrono OM Registry Liaison Office	e Advisor e Assistant

NATURE OF THE REVISION

- 1. The purpose of budget revision (BR) 02 to Development Project 200508 is an extension in time of six months (up to 30 June 2015). Under this extension, the main project activity (assistance to community-based volunteer caregivers of orphans and vulnerable children (OVC) at Neighbourhood Care points (NCPs) will continue to be implemented. The implementation arrangements and ration design for the activity in support of volunteer caregivers at NCPs has been maintained in this extension as per current operation, however the number of beneficiaries has been increased based on more up to date operational figures. The provision of micro-nutrient powders (MNPs) for secondary school students is not included in the project plan for this extension. This activity has not been implemented since the start of the project, mainly due to the funding shortfalls the project has faced. The MNPs activity was planned to complement WFP's provision of secondary school meals under development project 200422, however during the course of 2014, the Government of Swaziland has taken over the provision of secondary school meals.
- 2. In addition to the extension in time, a new LTSH matrix was approved in September 2014, which provides for an increased LTSH rate for the remaining period of 2014. An LTSH matrix review for the BR extension period (2015) concluded an insignificant difference in rate, and therefore the new 2014 LTSH rate has been applied for the extension.

JUSTIFICATION FOR THE REVISION

Summary of existing project activities

- 3. Swaziland has the highest HIV prevalence rate in the world, at 26.5 percent among adults aged 15-49 and 38 percent among women of child-bearing age, and with an annual new infection rate of 2.7 percent. The country also has the world's highest death rates from HIV/AIDS and one of the lowest average life expectancies. Prevalence rates by age differ between men and women with peaks in 30 34 year olds for women (54 percent) and 35 39 year olds age groups for men (47 percent). Women in Swaziland have higher infection rates and are more at risk of HIV than men. The pandemic has deeply affected the family structure and has increased the number of households headed by the elderly, particularly women. One of the effects of the pandemic is the growing number of OVC. Some 45 percent of Swazi children are estimated to be OVC, with one in four children having lost one or both parents. Male and female children are equally likely to be orphaned or vulnerable.
- 4. DEV 200508 was designed to complement DEV 200422 "Support to Children and Students Affected by HIV and AIDS". DEV 200422 provides support to OVC under the age of eight attending NCPs, pupils attending secondary school, and young people attending informal schools. DEV 200508 was developed to augment aspects of DEV 200422, by providing food assistance to caregivers of OVC at NCPs and the micro-nutrient supplements for secondary school meals. Community based caregivers volunteer their time to cook nutritious meals and provide basic lessons and psychosocial care for children enrolled at NCPs. By providing a

¹ Operational figures are based on monitoring findings and consequent update of project sites assisted and number of beneficiaries.

² Swaziland HIV Incidence Measurement Survey (SHIMS), 2011

³ Government of Swaziland. 2011. Swaziland Multiple Indicator Cluster Survey 2010.

⁴ In particular for OVC, under DEV 200422, WFP provides two meals per day on weekdays at the NCPs (for an average of 22 days per month). Super Cereal (Corn Soya Blend Plus) is provided for breakfast and Maize meal, beans and fortified vegetable oil are provided for the lunch time meal.

compensation to the caregivers, in the form of a food for work/asset household ration, the efficient functioning of the NCPs and effectiveness of food assistance to OVC is enhanced. DEV 200508 also aimed to improve the nutritional status of secondary school age children, including adolescent girls, by introducing micronutrient powder to the food baskets of the secondary school meals programme, enhancing the nutritional value of school meals.

5. The project is in line with WFP Strategic Objective 3 and Strategic Objective 4 of the WFP Strategic Plan (2014-2017) and also contributes to the Zero Hunger Challenge goals. The project is also aligned with national policies such as the National Development Strategy, with the United Nations Development Assistance Framework pillars 2 and 3, and it will contribute towards the achievement of Millennium Development Goals 1 and 3.⁵

Purpose of change in project duration and budget increase

- 6. DEV 200508 is scheduled to end on 31 December 2014, yet food and nutrition support to OVC continues to be among the country's priorities. The importance of safety nets programmes targeting OVC, continue to feature in recent key country strategies, such as the Extended National Multisectoral HIV and AIDS Framework 2014-2018 (eNSF) and the Government Programme of Action (2013 2018). As DEV 200422 is extended to 2015 for the assistance of OVC at NCPs, assistance to community based volunteer caregivers will also be extended.
- 7. An Operation Evaluation of DEV 200508 and DEV 200422 was carried out in 2014. The evaluation concluded that both projects were relevant to the needs and that the use of NCPs to reach vulnerable children was appropriate, considering that NCPs are one of the few (if not the only) mechanisms available to reach poor, rural, and orphaned children in a consistent way and increase their access to food, basic education, psychosocial support, and guidance in a safe and caring environment. The evaluation concluded that the rationale of DEV 200508 as complementary to DEV 200422 was sound and consistent with policies, assessments, and observations highlighting the critical role that volunteer caregivers play in the functionality of NCPs and the need to keep their motivation to volunteer their time, considering that they are often vulnerable and poor themselves. The evaluation recommended WFP to continue to support the provision of food assistance to OVC and the NCPs caregivers.
- 8. Through this budget revision the project is extended for additional six months (up to 30 June 2015). The assistance to caregivers of OVC at NCPs will continue to be implemented under this extension. The provision of MNPs for secondary school students is not included in the extension, since the activity has not been implemented since the start of the project, mainly due to funding shortfalls. In addition the activity was complementary to WFP's provision of secondary school meals under development project 200422, an activity that the Government of Swaziland has taken over in the course of 2014.
- 9. Under the extension, the implementation arrangements and ration design for the assistance to caregivers have been maintained as per current operation. WFP will continue to provide caregivers with a household ration composed of Maize, Pulses and Vegetable Oil. Caregivers receive a household ration for an average of five (5) individuals in the household during weekdays when NCPs are open (for an average of 22 days per month). However, the number of beneficiaries has been adjusted based on actual operational figures. The planning figures were based on assisting three caregivers in each of the originally planned 1,300 NCPs where children are assisted through the complementary DEV 200422. Following a verification of project sites conducted at the beginning of the project and according to monitoring information, the number of actual NCPs being assisted is 1,565 NCPs. Therefore the number of

⁵ UNDAF pillar 2: Poverty and sustainable livelihoods; pillar 3: Human development and basic social services.

- caregivers participating in the activity and number of total beneficiaries (including household members) has been adjusted accordingly.
- 10. WFP continues to choose in-kind rather than cash or vouchers as most appropriate transfer modality for providing food for caregivers at NCPs. Monitoring of market prices as well as food production trends continue to indicate higher food prices in Swaziland compared to neighbouring South Africa and the country is still a net importer of food. The 2014 Operation Evaluation also concurred with the use of food as appropriate transfer modality.
- 11. In terms of capacity development, WFP will continue to work with the Government of Swaziland on identifying options for future strategy and sustainability of support to OVC and caregivers at NCPs.
- 12. The project logframe has been revised to take into consideration the changes in the planned activities for 2015. The project is in line with WFP Strategic Objective 3 and Outcome 3.1.⁶ Results and indicators that were linked to provision of MNPs for secondary school meals will no longer be applicable.
- 13. The increase of beneficiaries in Table 1 represents the planned beneficiaries for the extension period. The current figures represent the cumulative current project plan. The revised total is the cumulative for the project, including the extension.

TABLE 1: BENEFICIARIES BY ACTIVITY									
	Current (cumulative)		Increase		Revised				
Activity	Boys /Men	Girls/ Women	Total	Boys /Men	Girls/ Women	Total	Boys /Men	Girls/ Women	Total
NCP caregivers' incentives	18 330	20 670	39 000	11 033	12 442	23 475	29 363	33 112	62 475
MNPs for secondary school students	35 485	40 015	75 500	-	-	•	35 485	40 015	75 500
TOTAL	53 815	60 685	114 500	11 033	12 442	23 475	64 848	73 127	137 975

FOOD REQUIREMENTS

14. The BR involves an increase in food requirements. The additional requirements for the extension in time and the revised total for the project are indicated in Table 2. Swaziland produces less than its total cereal requirements and is a net importer of food commodities. It is therefore anticipated that food will be purchased regionally (82 percent) and internationally (18 percent).

⁶ SO3: Reduce risk and enable people, communities and countries to meet their own food and nutrition needs. Outcome 3.1: Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food-insecure communities and households.

Shortfall in maize production was around 30% for 2012/2013 season period and estimated at 15% for 2014/2015. (Swaziland Annual Vulnerability Assessment and Analysis Report. Swaziland VAC. 2014).

TABLE 3: FOOD REQUIREMENTS BY ACTIVITY						
Activity	Commodity ⁸	Food requirements (mt)				
Ž		Current	Increase	Revised total		
NCP caregivers' incentives		4 994	1 503	6 497		
MNPs for secondary school students		5	-	5		
TOTAL		4 999	1 503	6 502		

⁸ Please only present overall food requirement. Do not split by commodity.