

TRANSITIONAL INTERIM COUNTRY STRATEGIC PLAN REVISION FOR APPROVAL BY THE COUNTRY DIRECTOR

Swaziland Transitional Interim Country Strategic Plan Revision Two

5) To:	Initials	In Date	Out Date	Reason for Delay
Country Director <i>Alberto Mendes</i>				
4) Through:	Initials	In Date	Out Date	Reason for Delay
Programme Advisor, RB <i>Brian Bogart</i>				
3) Through:	Initials	In Date	Out Date	Reason for Delay
Supply Chain Officer, RB <i>(Transfer modifications specific to supply chain)</i> <i>Christine Mendes</i>				
2) Through:	Initials	In Date	Out Date	Reason for Delay
Budget and Programming Officer, RB <i>Anna Mukiibi-Bunnya</i>				
1) From:	Initials	In Date	Out Date	Reason for Delay
Country Office				

I have reviewed the revised T-ICSP and confirm that it meets the required standard, including appropriate response to the internal review process. I recommend approval of this revision.

Changes

Strategic Outcome	Focus Area	Modality	Activity	Budget
<input type="checkbox"/> Addition	<input type="checkbox"/> Crisis Response	<input checked="" type="checkbox"/> Food	<input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Transfer Value
<input type="checkbox"/> Revision	<input checked="" type="checkbox"/> Resilience Building	<input checked="" type="checkbox"/> CBT	<input checked="" type="checkbox"/> Revision	<input checked="" type="checkbox"/> Transfer Cost
<input type="checkbox"/> Deletion	<input checked="" type="checkbox"/> Root causes	<input type="checkbox"/> CS	<input type="checkbox"/> Deletion	<input checked="" type="checkbox"/> Implementation Cost
		<input type="checkbox"/> SD		<input type="checkbox"/> Adjusted DSC

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Gender marker code: 2a

	Current	Change	Revised
Duration	01/01/2018 to 30/06/2019	No change	01/01/2018 to 30/06/2019
Beneficiaries	98 176	(11 544)	86 632
Total Cost (USD)	8 102 367	(215 151)	7 887 216
Transfer	6 390 410	(202 019)	6 188 391
Implementation	535 955	-	535 955
Adjusted direct support costs	681 491	-	681 491
Subtotal	7 607 856	(202 019)	7 405 837
Indirect support costs (6.5 percent)	494 511	(13 132)	481 379

1. RATIONALE

Strategic Outcome 1

Strategic Outcome 1 (children under five, ART, TB and PMTCT clients in Swaziland have improved nutritional status in line with national targets by 2022) seeks to ensure Swaziland's most persistently vulnerable and food insecure populations receive specialized nutritious foods they need, to meet basic food and nutrition requirements and enable them to effectively access the health treatment and service programmes their conditions demand. These vulnerable and food insecure populations particularly include individuals undergoing Antiretroviral Therapy (ART), Directly Observed Treatment short-course (TB-DOTS) and/or prevention of mother-to-child transmission (PMTCT) treatments.

Under the T-ICSP, activity one of Strategic Outcome 1 provides nutrition treatment services to malnourished clients on ART, TB, and/or PMTCT treatment and cash-based transfers to households of malnourished clients on ART, TB and/or PMTCT treatment. At the time of the transition from the project approach to the T-ICSP, WFP shifted the modality for the household ration from in-kind food to cash-based transfers following recommendations from a 2016 evaluation of Development Project 200353. During the 2016/2017 emergency response to the El Niño-induced drought, WFP implemented relief assistance to the most vulnerable households through targeted general food distributions for 250,000. Of these people, 140,000 were reached through cash-based transfers. The emergency response provided WFP with the opportunity to leverage the start-up investment for cash-based transfers and extend it to the household rations for households of malnourished clients on ART, TB and/or PMTCT treatment.

A total of 252 mt¹ were migrated from Development Project 200353 to the T-ICSP in 2017, however given the shift to cash-based transfers for the household ration, the commodities cannot be absorbed by the T-ICSP. This revision to the T-ICSP will introduce the in-kind food modality under activity one for the household ration to allow the use of the food commodities from Development Project 200353 under the T-ICSP. These commodities will provide a family ration for 11 544 people for three months (January to March 2018).

The planned cash requirements for January to March have been covered with the in-kind food commodities transferred from Development Project 2003563. Cash-based transfers to households have been removed for three months from April to June 2018, given changes in the funding environment. WFP anticipates that funding will be received in the short-term and cash-based transfers will resume as per the original T-ICSP plan from July 2018.

¹ Commodities transferred from Development Project 200353 to the T-ICSP: 204 mt of cereals, 34 mt of pulses and 14 mt of vegetable oil.

Strategic Outcome 2

Strategic Outcome 2 supports the national social protection system in Swaziland in targeting and assisting the most food insecure and nutritionally vulnerable populations throughout the year, including in response to shocks. Activity 4, under this Strategic Outcome which provides on-site meals to orphans and vulnerable children in pre-primary school age at neighbourhood care points will be modified to include costs associated with the use of a Cooperating Partner that were erroneously omitted.

2. CHANGES

Strategic orientation

There are no changes on the strategic orientation.

Strategic Outcomes

No changes to the Strategic Outcomes will be made through this revision.

Beneficiary analysis

The net beneficiary figures have been corrected under activity one to account for the different beneficiary cohorts. This has led to a decrease of 13 290 beneficiaries for activity one and the overall T-ICSP.

TABLE 1: FOOD & CASH TRANSFER BENEFICIARIES BY STRATEGIC OUTCOME & ACTIVITY

	Activity	Beneficiary group	Current			Increase / Decrease			Revised		
			Boys / Men	Girls / Women	Total	Boys / Men	Girls / Women	Total	Boys / Men	Girls / Women	Total
Strategic Outcome 1	Activity 1: Provide nutrition treatment for clients on ART, TB, PMTCT and provide cash transfers to households of malnourished clients on ART, TB and/or PMTCT treatment	<i>Household members of malnourished clients on ART, TB and PMTCT treatment:</i>									
		– Children under 5 years	2 604	2 937	5 541	(651)	(734)	(1 385)	1 953	2 203	4 156
		– Children 5-18 years	8 247	9 300	17 547	(2062)	(2 325)	(4 387)	6 185	6 975	13 160
		– Adults above 18 years	10 852	9 300	23 088	(2713)	(123)	(5 772)	8 139	9 177	17 316
		<i>Clients on ART, TB, PMTCT (adults – above 18 years)</i>	3 617	4 079	7 696	(820)	(926)	(1 746)	2 797	3 153	5 950
Strategic Outcome 2	Activity 4: Provide on-site meals to orphans and vulnerable children (OVC) of pre-primary	<i>Orphans and vulnerable children (OVC) of pre-primary school age at neighbourhood care points</i>									
		– Children under 5 years	21 216	20 384	41 600	0	0	0	21 216	20 384	41 600
		– Children 5-18 years	5 304	5 096	10 400	0	0	0	5 304	5 096	10 400
TOTAL			51 840	51 096	105 872	(6 246)	(4 108)	(13 290)	45 594	46 988	92 582

Transfers

This revision to the Swaziland T-ICSP will change the transfer modality of activity one from cash-based transfers to in-kind food for three months from January to March 2018.

TABLE 2: FOOD RATION (g/person/day) or CASH-BASED TRANSFER VALUE (USD/person/day) BY STRATEGIC OUTCOME AND ACTIVITY				
Strategic Outcome	Children under five, ART, TB and PMTCT clients in Swaziland have improved nutritional status in line with national targets by 2022		The national social protection system in Swaziland is able to target and assist the most food insecure and nutritionally vulnerable populations throughout the year, including in response to shocks	
Activity	Activity 1: provide nutrition treatment services to malnourished clients on ART, TB, and/or PMTCT treatment and provide cash transfers to households of malnourished clients on ART, TB and/or PMTCT treatment.		Activity 4: provide on-site meals to orphans and vulnerable children in pre-primary school age at neighbourhood care points.	
Beneficiary type	ART/TB/PMTCT clients	Households of clients with ART/TB/PMTCT	Orphans and vulnerable children (OVC)	
Modality	Food	CBT	Food	Food
Cereals			200	150
Pulses			28	40
Oil			12.5	7.5
Super Cereal	333			
Super Cereal Plus				75
Total kcal/day	1 270		938	1 051
% kcal from protein	16		10.2	13
Cash (USD/person/day)		0.24		
Number of feeding days per person per year	365	180	180	264

TABLE 3: TOTAL FOOD/CASH-BASED TRANSFER REQUIREMENTS & VALUE

Food type / cash-based transfer	Current Budget		Increase		Revised Budget	
	Total (mt)	Total (USD)	Total (mt)	Total (USD)	Total (mt)	Total (USD)
Cereals	2 059	853 950	204	35 700	2 263	889 650
Pulses	549	317 117	34	22 270	583	339 387
Oil and Fats	103	134 775	14	11 442	117	146 217
Mixed and Blended Foods	1 376	1 201 420	-	-	1 376	1 201 420
Other	-	-	-	-	-	-
TOTAL (food)	4 087	2 507 261	252	69 412	4 339	2 576 674
Cash-Based Transfers (USD)		1 554 166		(491 632)		1 062 534
TOTAL (food and CBT value – USD)	4 087	4 061 427	252	(422 220)	4 339	3 639 208

Supply chain

WFP migrated 251.954mt of food commodities from Development Project 200353 into the T-ICSP which were to be distributed under activity one to families of ART/TB/PMTCT clients. However, WFP had only planned for the distribution of cash-based transfers under this component of the T-ICSP and subsequently no supply chain rates were included in the budget of the T-ICSP to facilitate distribution under this activity.

This budget revision will allow for the migrated food commodities to be dispatched and distributed as per programme requirements. Currently, under activity one, there is an approved Supply Chain rate of USD 115.13/mt to cater for the ART/TB/PMTCT client ration (Super Cereal). The same rate will be applied to the household ration for the period of distribution from January to April 2018.

WFP will engage a cooperating partner to monitor the food distributed to orphans and vulnerable children in pre-primary school age attending neighbourhood care points as on-site meals, under activity 4. WFP will directly engage transporters for the movement of food commodities and the cooperating partner will only provide monitoring support to augment WFP's capacity to monitor the close to 1600 sites. Monitoring will aim to verify numbers of beneficiaries reached as well as tonnage distributed, it will also look into the caregiver's ability to properly store and cook the allocated food.

Other considerations

Food and nutrition support to malnourished clients on ART and TB treatment and pregnant and lactating women accessing PMTCT services remain key national priorities. The WFP Food by Prescription Development Project 200353 is referenced in key country strategies, such as the Extended National Multi-sectoral HIV and AIDS Framework 2014-2018 (eNSF) and the National Health Sector Strategic Plan (NHSSP II). The CO committed to supporting the Ministry of Health and ensuring a smooth handover of activities through the development of a handover strategy which the CO will jointly develop with the Ministry of Health in 2019. Therefore, abrupt halting of the household support will negatively impact of WFP's standing or partnership with government.

Changes have been made in the M&E plan for alignment into both the BR and Corporate Results Framework. Furthermore, the CO will not be able to effectively monitor and track progress under activity 4, if the CO does not engage a CP to carryout monitoring of this activity.

The primary risk is to WFP's reputation if we are unable to honour our commitments to partners in terms of engaging and paying for active FLAs as well as abrupt halting of activities without due explanation and engagement of government. As mitigation measures, WFP will engage the concerned CP to explain that the CO will delay payment of CP costs for the duration of the FLA as well as explain to the Ministry of Health delays that might be incurred in distribution of in-kind food while budget is under review.

The CO has been faced with dwindling resources particularly to cover activity 1, and therefore resource constraints remain one of the biggest risk to the successful implementation of the Food by Prescription programme. WFP has engaged the government of Swaziland for joint resource mobilization efforts as they have proved successful in the past. As a result of discussions on resourcing with Government, the Ministry is also exploring the inclusion of Food by Prescription on the government budget. Although the government had welcomed the use of CBT for the household ration, a strategy has been discussed to further sensitize beneficiaries and health facilities on the continued use of food in-kind to fully absorb the food commodities.

3. COST

Resourcing

WFP has engaged with the Ministry of Health and UNAIDS for joint resource mobilization for the Food by Prescription programme as part of the UNDAF joint programme. Funding prospects are with the global fund as well as the government of Swaziland.

COST BREAKDOWN OF THE REVISION (US\$)							
Strategic Outcomes		Transfer	Implementation	Adjusted DSC	Sub-total	ISC (6.5%)	TOTAL
Strategic Outcome 1				<i>(no figures in the grey cells)</i>			(393 512)
	Increase	(393 512)	0				
[SR2 / SDG target 2]							
Root Causes	Revised Total	1 662 746	311 071				1 973 817
Strategic Outcome 2		191 493	0				191 493
	Increase						
[SR2 / SDG target 2]							
Resilience Building	Revised Total	3 003 450	134 183				3 137 632
CSP		(202 019)	0	0	(202 019)	(13 131)	
Increase							(215 150)
CSP		6 188 391	535 955	681 491	7 405 837	481 379	
Revised Total							7 887 216

OVERALL CSP COST BREAKDOWN, FOLLOWING THE REVISION (USD)						
WFP Strategic Results / SDG Targets	SR 2	SR 5	-	-	-	TOTAL
WFP Strategic Outcomes	Strategic Outcome 1	Strategic Outcome 2	Strategic Outcome 3	Strategic Outcome 4	Strategic Outcome 5	
Focus Area	ROOT CAUSES	RESILIENCE BUILDING	-	-	-	
Transfer	2 192 570	3 995 821	-	-	-	6 188 391
Implementation	325 666	210 289	-	-	-	535 955
Adjusted DSC (%)	286 196	395 295	-	-	-	681 491
Sub-total	2 804 432	4 601 405	-	-	-	7 405 837
ISC	182 288	299 091	-	-	-	481 379
TOTAL	2 986 720	4 900 496	-	-	-	7 887 216