

Crisis response revision of Guinea interim country strategic plan (2019–2022) and corresponding budget increase

	Current	Change	Revised
Duration	1 June 2019– 30 June 2022	No change	1 June 2019– 30 June 2022
Beneficiaries	390 023	315 000	704 023
<i>(USD)</i>			
Total cost	40 302 571	16 184 864	56 487 435
Transfer	27 518 702	14 762 725	42 281 428
Implementation	7 453 251	-156 359	7 296 893
Adjusted direct support costs	2 870 836	590 688	3 461 524
Subtotal	37 842 790	15 197 055	53 039 845
Indirect support costs (6.5 percent)	2 459 781	987 809	3 447 590

Gender and age marker code*: 3^{1]}

* <http://gender.manuals.wfp.org/en/gender-toolkit/gender-in-programming/gender-and-age-marker/>.

Rationale

1. On 11 March 2020 the World Health Organization declared the novel Coronavirus disease, COVID-19, a pandemic. Guinea recorded the first case of COVID-19 on 12 March 2020 and a national health emergency was declared on 26 March. At the time of writing (mid-June 2020) more than 4,400 cases, 24 deaths and 3,100 recoveries have been confirmed in the country. All public places have been closed, including schools, a night curfew was introduced on 31 March and all inland travel has been heavily restricted.
2. The impact of COVID-19 is still difficult to anticipate. Beyond the immediate effect on public health, the economic consequences are already apparent among the most vulnerable people, particularly the poorest households, casual labourers and petty traders. Loss of income and comparatively restricted market access are among the principal causes of food insecurity.
3. The Cadre harmonisé of March 2020 indicates that 113,641 persons are currently severely food-insecure, and it is projected that the number will rise to 267,170 between June and August 2020. As the projections do not take into account the socioeconomic impact of COVID-19, it is very likely that the number of severely food-insecure people will be much higher by the middle of the year. This, in a country where 55 percent of the population live below the poverty line and 70 percent hold jobs in the informal sector.²
4. Impacts of food and nutrition insecurity include negative coping strategies and a likely deterioration of nutrition status given reduced access to basic services and micronutrient deficiencies. A joint analysis by UNICEF and WFP³ anticipates that the number of malnourished children age 6 to 59 months, might increase from a projected 389,063 during the lean season to 506,633 because of the indirect effects of COVID-19. Other vulnerable groups

¹ The gender and age marker should be reviewed in case of a new strategic outcome or additional activity.

² Analyse globale de la vulnérabilité, de la sécurité alimentaire et de la nutrition (AGVSAN, 2018).

³ The compounded impact of COVID-19 and food insecurity on acute malnutrition, UNICEF and WFP.



include people already in chronic food insecurity, persons living with disabilities and PLHIV/TB. The emergency is expected to exceed the current capacity of the nascent national social safety nets, leading to higher long-term vulnerability for impoverished households.

5. The scope of the challenges facing Guinea requires an important scale up by the Government, as well as humanitarian and development actors. Therefore, the United Nations country team (UNCT) set up a COVID-19 Task Force to coordinate the United Nations response under six strategic pillars. The Guinea country office is taking the lead role in the logistics support.
6. A National Response Plan was published in early April 2020 with three objectives: contain and stop the epidemic, reduce the socioeconomic effects of the crisis on the most vulnerable populations and support the private sector throughout the crisis. The socioeconomic component of the plan includes a cash-based transfer programme with the objective to assist 1.6 million persons with a budget of USD 45 million.
7. The current caseloads are formulated to align with planning data from the National Response Plan. The country office will undertake assessments in June and estimates will be updated accordingly.
8. The proposed budget revision is required to allow WFP to urgently scale up its crisis response under strategic outcome 2. This emergency response will have a duration of 6 months, subject to adjustments in line with WFP's global L3 declaration or changes in national guidelines and will be channelled through strategic outcome. Under this budget revision WFP will prioritize life-saving assistance and support to the Government's social protection programmes. The duration of the ICSP remains unchanged from the period 1 June 2019 to 30 June 2022.

Changes

Strategic orientation

9. There is no change in strategic orientation.

Strategic outcomes

10. No new strategic outcomes will be introduced through this budget revision and the line of sight does not change. The following changes are envisaged:
 - Increased beneficiary caseload under strategic outcome 2 from 15,000 to 300,000 beneficiaries.

Targeting approach and beneficiary analysis

11. In response to the combined impact of COVID-19 and the lean season, WFP will target a total of 300,000 persons from June to December 2020 among the most affected populations whose food security has been jeopardized and for whom no other assistance is provided. This will include casual labourers and other marginalized groups.
12. The March 2020 Cadre harmonisé will be used for geographic targeting. Priority vulnerable areas will be determined in collaboration with the Government and other partners. Within these zones, implementing partners will target the beneficiaries to receive assistance, both for unconditional and conditional assistance. Targeting criteria will be defined in collaboration with institutional and implementing partners.

Transfer modalities

13. To meet beneficiaries' immediate basic food requirements WFP will use a combination of in-kind food rations and cash-based transfers, according to market conditions, applying appropriate measures to reduce risk of contamination. While complementary assessments are under way, WFP will seek to adapt delivery modalities in accordance with social distancing protocols, the full and active participation of women, as well as protection concerns



according to beneficiaries' sex and age. Where appropriate, WFP will assess the feasibility of channeling some of its assistance through existing national social protection programmes.

Partnerships

14. Where required and as appropriate, WFP will expand and adjust its partnerships with existing structures from civil society, and public institutions including the Ministries of Social Affairs, Health, Agriculture, Decentralization and the National Social Protection Agency, to effectively respond to the needs of the most vulnerable households, taking into account pre-crisis vulnerabilities and the impact of the pandemic. WFP's response supports the overall United Nations intervention with particularly close coordination with WHO, UNICEF and FAO.

Country office capacity

15. Sufficient capacity is present in the country office to implement Activity 2, under strategic outcome 2. Internal capacities will be reassessed periodically to ensure WFP maintains the capacity to continue effectively implementing current ICSP activities while scaling up under strategic outcome 2.

Supply chain challenges

16. To respond efficiently and effectively to the emergency, WFP is looking into international, regional and local sourcing. While updating logistics assessments for the impact of the pandemic and border closures, WFP will review its use of the port of Conakry as the main staging area, as well as the commercial sector and cooperating partners' landside transport capacity to reach field distribution points. The supply chain will maintain necessary flexibility in order to deliver in evolving circumstances.
17. After the COVID-19 outbreak, the Government of Guinea put in place a logistics commission composed of United Nations agencies, international non-governmental organizations and government officials under the leadership of the National Health Agency, (ANSS – Agence nationale de la sécurité sanitaire). The aim of the commission is to respond rapidly to the Government's logistics requirements. The Supply Chain Cluster is not yet officially activated in Guinea. However, UNCT established pillars under the common United Nations operational task force that cover supply chain. Under WFP leadership, the logistics pillar is functioning on a full-cost recovery principle.

Monitoring and evaluation

18. WFP will adapt its monitoring and reporting systems to limit the risk of exposure for personnel, partners and beneficiaries, employing remote monitoring solutions where appropriate. Furthermore, ensuring accountability to affected populations despite limited physical interaction, WFP will make use of remote complaints and feedback mechanisms (CFMs), including two-way call centres. The CFM launch is scheduled for June 2020.



Risk management

19. WFP will conduct periodic risk assessments and communicate regular progress towards implementing risk mitigation actions to its key stakeholders. At the outset, principal risks include ensuring an adapted intervention in a context of high risk of contagion, while ensuring an effective response to deteriorating socioeconomic conditions. Mitigation measures include the pre-positioning of contingency stocks (food and non-food), redesigned protocols for supply chain as well as beneficiary interactions, continuous monitoring and preparedness for a changing operational environment – including market functionality. WFP will ensure its interventions are designed with a protection and gender focus to avoid unintentional consequences which may jeopardize the safety and dignity of beneficiaries. WFP will follow United Nations security restrictions. Finally, WFP will take every precaution to prevent sexual exploitation and abuse, as well as fraud and corruption and other wrongdoing in accordance with established policies.

Beneficiary analysis

20. The Cadre harmonisé will be used for geographic targeting of administrative districts (prefectures) where communities are in need of food and nutrition assistance.
21. From June to September: under strategic outcome 2, 300,000 persons affected by the lean season will receive assistance in monthly general distributions either in the form of in-kind or CBTs.
22. From October to December, the total number of beneficiaries will decrease to: 100,000 of the most vulnerable, including pregnant and lactating women and girls, children age 6 to 59 months, people living with HIV/TB and people with disabilities, will continue receiving unconditional (cash or food) monthly assistance either in the form of in-kind or CBTs.
23. The following years will exclusively use CBTs.
24. The number of beneficiaries planned under other strategic outcomes remains unchanged.



TABLE 1: DIRECT BENEFICIARIES BY STRATEGIC OUTCOME, ACTIVITY AND MODALITY

Strategic outcome	Activity and modality	Period	Women (18+ years)	Men (18+ years)	Girls (0–18 years)	Boys (0–18 years)	Total
1	1 (food)	Current (no change)			92 927	88 758	181 685
	1 (CBTs)	Current (no change)			7 350	7 650	15 000
2	2 (food)	Current (no change)	4 590	4 410	3 060	2 940	15 000
		Increase/decrease	19 600	40 300	24 800	25 300	110 000
		Revised	24 190	44 710	27 860	28 240	125 000
	2 (CBTs)	Current	-	-	-	-	-
		Increase/decrease	49 400	43 700	53 200	43 700	190 000
		Revised	49 400	43 700	53 200	43 700	190 000
3	3 (food)	Current (no change)	43 156	37 204	34 227	34 227	148 814
	3 (CBTs)	Current (no change)	-	-	5 100	4 900	10 000
4	4 (CBTs/capacity strengthening)	Current (no change)	11 324	8 200			19 524
Total (without overlap)		Current	59 070	48 814	142 664	138 475	389 023
		Increase/decrease	73 590	88 410	81 060	71 940	315 000
		Revised	132 660	137 224	223 724	210 415	704 023

TABLE 2: FOOD RATION (g/person/day) or CASH-BASED TRANSFER VALUE (USD/person/day) BY STRATEGIC OUTCOME AND ACTIVITY

	Strategic outcome 1									Strategic outcome 3							
	Activity 1				Activity 2					Activity 3						Activity 4	
					<i>Crisis response/beneficiaries</i>												
Beneficiary type	School-aged children	Pre-school children	THR	Beneficiaries CBTs	GFD	BSF-Children	BSF-PLWG	MAM-under 5	MAM-PLWG	MAM-under 5	MAM-PLWG	ART/DOTS clients	Household	BSF-children	BSF-PLWG	Prevention stunting – under 5	Beneficiaries/CBTs
Modality	Food	Food	Food	CBTs	Food	Food	Food	Food	Food	Food	Food	Food	Food	Food	Food	Food	CBTs
Cereals	150				400								200				
Pulses	30				60								60				
Oil	10		75		25		25		25		25	25	25		25		
Salt	3				5								5				
Sugar																	
Super Cereal							200		200		200	200			200		
Super Cereal Plus		100						200		200							
Plumpy'Doz						50								50		50	
Plumpy'Sup																	
Micronutrient powder	0.4																
Total kcal/day	653	401	663		1 710		984	787	984	787	984	984	1 007	264	984	264	
% kcal from protein	7.1	18.1	0		6.9		12.6	16.7	12.6	16.7	12.6	12.6	12.9	8.6	12.6	8.6	
CBTs (USD/person/day)				0.2									0.26				0.44
Number of feeding days per year	180	180	180	180	90	90	90	60	180	60	180	180	180	180	180	432	180

ART/DOTS = anti-retroviral therapy/directly observed treatment; BSF = blanket supplementary feeding; GFD = general food distribution; MAM = moderate acute malnutrition; PLWG = pregnant and lactating women and girls; THR = take-home rations.



TABLE 3: TOTAL FOOD/CASH-BASED TRANSFER REQUIREMENTS AND VALUE						
	Current budget		Increase		Revised budget	
	Total (mt)	Total (USD)	Total (mt)	Total (mt)	Total (USD)	Total (mt)
Cereals	14 220	6 539 793	8 964	3 868 088	23 184	10 407 881
Pulses	2 795	2 121 230	1 345	666 538	4 139	2 787 768
Oil and fats	1 516	1 106 798	585	401 588	2 101	1 508 386
Mixed and blended foods	3 368	3 207 692	-229	-205 818	3 139	3 001 874
Other	272	135 162	-5	-1 154	267	134 008
Total (food)	22 171	13 110 675	10 659	4 729 242	32 830	17 839 917
Cash-based transfers		3 336 917		7 524 000		10 860 917
Total (food and CBT value)	22 171	16 447 592	10 659	12 253 242	32 830	28 700 834

Cost breakdown

25. This revision will take into account additional operational costs required to adapt WFP interventions to the COVID-19 context, in line with corporate, WHO and national guidance, including but not limited to four critical investment areas:
- i) Safeguarding programme delivery platforms – adjustments to delivery platforms, hygiene measures for distribution, increased field-level agreement (FLA) costs, repackaging of rations, COVID-19 sensitization materials, sensitizing Government and civil society partners, additional last-mile delivery and storage equipment, digital transformation of delivery platforms to reduce interaction.
 - ii) Safeguarding health of WFP's and partners' workforces – hygienic materials and facilities, awareness campaigns and training for non-governmental organization and government partners, development of new distribution protocols, enhance screening facilities, advocate and implement COVID-19 risk mitigation with service providers, investments to ensure CBT partners comply with safe practices, etc.
 - iii) Safeguarding the supply chain
 - a) Upstream – increased coordination (customs and other restrictions), increased operational capacity (pipeline, ports, procurement), hubs, etc.
 - b) Downstream – services and equipment for last-mile delivery (bikes, motorbikes, pick-ups), storage locations including equipment, infrastructure investments (offices, IT distribution sites, etc.), other (security, IT, fencing).
 - iv) Safeguarding the ability to track impact and stay informed – information management, analytics, vulnerability analysis and mapping (VAM) assessments.

TABLE 4: COST BREAKDOWN OF THE REVISION ONLY (USD)						
	Strategic Result 1/SDG Target 2.1	Strategic Result 1/SDG Target 2.1	Strategic Result 2/SDG Target 2.2	Strategic Result 4/SDG Target 2.4	Strategic Result 5/SDG Target 17.9	Total
	Strategic outcome 1	Strategic outcome 2	Strategic outcome 3	Strategic outcome 4	Strategic outcome 5	
Focus area	Resilience building	Crisis response	Root causes	Resilience building	Resilience building	
Transfer	-197 158	16 182 261	-147 448	707	-1 075 636	14 762 725
Implementation	-220 722	-49 951	191 499	63 554	-140 739	-156 359
Adjusted direct support costs						590 688
Subtotal						15 197 055
Indirect support costs (6.5 percent)						987 809
Total						16 184 864

TABLE 5: OVERALL ICSP COST BREAKDOWN, AFTER REVISION (USD)						
	Strategic Result 1/SDG Target 2.1	Strategic Result 1/SDG Target 2.1	Strategic Result 2/SDG Target 2.2	Strategic Result 4/SDG Target 2.4	Strategic Result 5/SDG Target 17.9	Total
	Strategic outcome 1	Strategic outcome 2	Strategic outcome 3	Strategic outcome 4	Strategic outcome 5	
Focus area	Resilience building	Crisis response	Root causes	Resilience building	Resilience building	
Transfer	14 565 450	16 721 036	6 684 677	3 674 361	635 903	42 281 428
Implementation	3 934 985	137 870	1 900 818	1 054 687	268 533	7 296 893
Adjusted direct support costs	1 286 036	1 161 815	614 988	332 088	66 597	3 461 524
Subtotal	19 786 471	18 020 722	9 200 483	5 061 136	971 033	53 039 845
Indirect support costs (6.5 percent)	1 286 120	1 171 347	598 031	328 974	63 117	3 447 590
Total	21 072 591	19 192 069	9 798 514	5 390 110	1 034 150	56 487 435