

REVISION

[Algeria] interim country strategic plan, revision |01|

Gender and age marker code: |3|

Transmittal Slip Table - BUDGET OVERVIEW			
	Current	Change	Revised
Duration	July 2019 – June 2022	-	July 2019 – June 2022
Beneficiaries	133,672	-	133,672
Total cost (USD)	58 965 759	4 753 459	63 719 219
Transfer	48 620 879	4 024 217	52 645 096
Implementation	3 890 279	376 441	4 266 720
Direct Support Costs	2 855 753	62 684	2 918 437
Sub-total	55 366 910	4 463 342	59 830 252
Indirect Support Costs	3 598 849	290 117	3 888 966

1. RATIONALE

1. Under this budget revision, WFP will introduce the capacity strengthening modality under SO2, revise the caseload of beneficiaries and rations for nutrition activities and make other minor operational adjustments.
2. In early 2021, WFP launched its social and behaviour change communications (SBCC) strategy, which aims to promote good nutrition, health and hygiene among a broad audience, including through the dissemination of key messages through various media channels (social media, television, radio). The SBCC strategy would be primarily implemented through three different avenues: the Care Group Method for pregnant and lactating women and girls (PLWG) living in close proximity and with similar nutritional issues and needs; the Women4Women Clubs supporting obese and overweight women to adopt healthier lifestyles; and the School Health Clubs to engage primary and middle school students around nutritional issues. In partnership with Oxfam, PLWG will be targeted with trainings through the Care Group Method, whereby a core group of women would be trained and then share their knowledge with PLWG in their neighborhood.
3. Middle Upper Arm Circumference (MUAC) screenings carried out from November 2020 to October 2021 found an increase in the numbers of children under five and PLWG requiring malnutrition treatment and prevention.¹ The prevalence of anaemia among women and children under 5 is also alarmingly high in camps. A 2019 nutrition survey found the prevalence of anaemia to be 50.1% among children 6-59 months and 52.2% among women of reproductive age in the Sahrawi camps.² A follow-up nutrition survey is planned for 2022 and WFP will adapt its response as needed.

¹ The number of children under five and PLWG requiring treatment increased from 483 and 662 to 576 and 746, respectively.

² WFP, UNHCR, CISP (December 2019). 2019 Nutrition Survey: Sahrawi Refugee Camps, Tindouf, Algeria.

2. CHANGES

Strategic orientation

4. This budget revision does not present any change to the strategic orientation of the ICSP.

Strategic outcomes

Targeting approach and beneficiary analysis

5. The caseload under strategic outcome 2 (nutrition) has been increased to reflect the increased needs detected during the implementation of MUAC screening activities since late 2020 as well as address the high prevalence of anaemia in the camps. An additional 300 PLW and 200 children will receive MAM treatment, while WFP will target an additional 600 PLWG (total of 8,600) with conditional cash assistance and micronutrient tablets (MNT) to prevent malnutrition and anaemia. Similarly, 14,500 children under five will be targeted with prevention assistance (specifically to prevent anaemia) in 2022 based on an agreed upon set of criteria, which will be developed by WFP in agreement with local health authorities.

Transfer modalities

6. GFA rations have been revised slightly to reflect operational needs and beneficiary preferences, increasing cereals slightly and providing CSB (corn soya blend) instead of WSB (wheat soya blend). In addition, WFP receives annual contributions of dates (in-kind) and gofio (cash), which have been integrated into the GFA ration table in this BR. Dates (approximately 2.5kg per beneficiary) are distributed over a two-month period for Ramadan while gofio is distributed monthly as a part of the GFA distribution (1kg per beneficiary/month).
7. As a part of WFP's prevention activities, WFP will procure and distribute 2 new commodities to prevent anaemia and micronutrient deficiencies: micronutrient tablets (MNT) to PLWG and Nutributter to children. Though WFP provides a complementary assistance of 11 USD to PLWG to buy and consume fresh food for a whole month, given the high prevalence of anaemia persisting in the camps, additional assistance is needed. Accordingly, fresh food will be supplemented with MNT in accordance with an acceptability study conducted by local health authorities in May/June 2021 in the camps.³ MNTs will be provided to the PLWG when they go to the dispensaries to collect their CBT coupons. Assistance will be provided for the duration of the first 1,000 days of life, from pregnancy until the child reaches two years of age. Nutributter will be distributed to children at risk of anaemia or micronutrient deficiencies through health dispensaries.
8. Under SO2, WFP intends to utilize the capacity strengthening modality to facilitate WFP's new partnership with Oxfam to carry out part of WFP's SBCC strategy working with PLWG. Oxfam will support the Care Group Method, whereby a core group of PLWG would be trained and then come together (on a regular basis) with other women living in their neighborhoods to share their knowledge and discuss different topics related to nutrition, health, hygiene, or sanitation.

³ Health authorities conducted a study in May/June 2021 on the acceptability of the MNTs, which found that about 95% of the quantities distributed every month were taken by the beneficiaries.

Beneficiary analysis

TABLE 1: DIRECT BENEFICIARIES BY STRATEGIC OUTCOME, ACTIVITY & MODALITY							
Strategic Outcome	Activity	Period	Women (18+ years)	Men (18+ years)	Girls (0-18 years)	Boys (0-18 years)	Total
1	1 (GFA) <i>In kind</i>	Current	42 240	16 575	38 899	35 958	133 672
		Increase/decrease	-	-	-	-	-
		Revised	42 240	16 575	38 899	35 958	133 672
	2 (School Feeding) <i>In kind</i>	Current	-	-	21 995	19 505	41 500
		Increase/decrease	-	-	-	-	-
		Revised	-	-	21 995	19 505	41 500
	3 (Resilience) <i>N/A</i>	Current	-	-	-	-	-
		Increase/decrease	-	-	-	-	-
		Revised	-	-	-	-	-
2	4 (Nutrition)* <i>CBT and In kind</i>	Current	8 600	-	185	215	9 000
		Increase/decrease	900	-	6 517	8 183	15 600
		Revised total	9 500	-	6 702	8 398	24 600
TOTAL <i>(without overlap)</i>	Current	42 240	16 575	38 899	35 958	133 672	
	Increase/decrease	-	-	-	-	-	
	Revised	42 240	16 575	38 899	35 958	133 672	

*The increase in treatment amounts to 500 (300 PLWG and 200 children), while the increase in prevention activities amounts to 15,100 (600 PLWG and 14,500 children).

Transfers

TABLE 2: FOOD RATION (g/person/day) or CASH-BASED TRANSFER VALUE (USD/person/day) BY STRATEGIC OUTCOME AND ACTIVITY						
Strategic Outcome	Strategic Outcome 1		Strategic Outcome 2			
Activity	Activity 1 (GFA)	Activity 2 (School meals)	Activity 4 (Prevention)		Activity 4 (Treatment)	
Beneficiary type	Refugees	Schoolchildren	PLWG	Children aged 6 – 59 months	PLWG	Children aged 6 – 59 months
modality	In kind	In kind	CBT / In kind	In kind	In kind	In kind
Cereals	400					
Pulses	67					
Veg oil	31				20	
Sugar	25					
Super Cereals	33					
Super Cereals with sugar					200	
Dates	41.6					
Gofio	33					
Dried Skimmed Milk		80				
HEB		50				
Nutributter				20		
Micronutrient Supplements (MMS)			0.84*			
PlumpySup						100
USD/person/day			0.36			
Total kcal/day	2 216	468	233	108	500	989
% kcal from protein	12	8		10	16	10
Number of feeding days (ICSP Lifespan - 3 years)	1,096	612	1,096	1,096	1,096	1,096

*1 tablet/person/day

TABLE 3: TOTAL FOOD/CASH-BASED TRANSFER REQUIREMENTS AND VALUE						
Food type / cash-based transfer	Current Budget		Increase		Revised Budget	
	Total (mt)	Total (USD)	Total (mt)	Total (USD)	Total (mt)	Total (USD)
Cereals	51 277	12 474 859	3 024	1 802 060	54 301	14 276 920
Pulses	9 816	4 623 243	0	0	9 816	4 623 243
Oil and Fats	4 555	4 440 922	3	5 471	4 558	4 446 394
Mixed and blended foods	11 261	5 797 175	- 1 118	109 274	10 143	5 906 449
Other	5 694	6 348 521	271	745 190	5 966	7 093 711
TOTAL (food)	82 603	33 684 720	2 181	2 661 995	84 784	36 346 716
Cash-Based Transfers (USD)		3 156 480		58 968		3 215 448
TOTAL (food and CBT value – USD)	82 603	36 841 200	2 181	2 720 963	84 784	39 562 164

3. COST BREAKDOWN

COST BREAKDOWN OF THE REVISION ONLY (USD)			
	Strategic Result 1 / SDG Target 2.1	Strategic Result 2 / SDG Target 2.2	TOTAL
Strategic outcome	01	02	
Focus Area	Crisis Response	Crisis Response	
Transfer	2 663 048	1 361 169	4 024 217
Implementation	265 050	111 391	376 441
Direct support costs			62 684
Subtotal			4 463 342
Indirect support costs			290 117
TOTAL			4 753 459

OVERALL CSP COST BREAKDOWN, FOLLOWING THE REVISION (USD)			
	Strategic Result 1 / SDG Target 2.1	Strategic Result 2 / SDG Target 2.2	TOTAL
Strategic outcome	01	02	
Focus Area	Crisis Response	Crisis Response	
Transfer	47 068 376	5 576 719	52 645 096
Implementation	3 837 561	429 159	4 266 720
Direct support costs	2 614 783	303 654	2 918 437
Subtotal	53 520 720	6 309 533	59 830 252
Indirect support costs	3 478 847	410 120	3 888 966
TOTAL	56 999 566	6 719 652	63 719 219

Annex 1: Revised Line of Sight

ALGERIA (ICSP Jan 2019- June 2022)

SR 1 – Access to food (SDG Target 2.1)	SR 2 – End malnutrition (SDG Target 2.2)
CRISIS RESPONSE	
OUTCOME 1: Targeted food insecure Sahrawi refugees in camps near Tindouf meet their basic food and nutrition needs all year long	OUTCOME 2: Targeted Sahrawi refugees in camps near Tindouf have improved nutrition status by 2022
BUDGET SO 1: \$56.9m	BUDGET SO 2: \$6.7m
OUTPUTS: <ul style="list-style-type: none"> Sahrawi refugees (tier 1) receive food and benefit from nutrition sensitization to meet their basic food and nutrition requirements. (A, E) (A1) Children (tier 1) enrolled in refugee camps school receive mid-morning snacks to relieve short-term hunger and benefit from nutrition sensitization in order to meet their food and nutrition requirement. (A, E) (A2) 	OUTPUTS: <ul style="list-style-type: none"> Targeted refugees (tier 1) receive specialized nutritious foods (SNFs) as appropriate and sufficient for MAM treatment. (A, B) (A4) Targeted refugees (tier 1) receive specialized nutritious foods (SNFs) as appropriate and sufficient to prevent chronic malnutrition and anemia. (A, B) (A4) Health workers (tier 2) benefit from evidence-based policies and receive nutrition training to enhance their nutrition knowledge and skills in order to prevent and treat malnutrition. (C) (A4) Targeted beneficiaries (tier 2) benefit from nutrition sensitization to address the double burden of malnutrition. (E) (A4) Targeted PLWG (tier 1) benefit from cash-based transfers to improve their nutritional status and dietary diversity. (A) (A4) Targeted beneficiaries benefit from appropriate social, and behavior change communication to improve their dietary diversity. (E: Social and behavior change communication (SBCC) delivered)
ACTIVITY 1: Provide general food assistance to targeted food insecure refugees. (cat 1; mod: food)	ACTIVITY 4: Provision of MAM treatment and prevention to children aged 6-59 months and PLWG (cat 5; mod: food, CBT, CS)
ACTIVITY 2: Provide nutrition-sensitive school meals (cat 4; mod: food)	
ACTIVITY 3: Provide Sahrawi refugees in Tindouf with complementary livelihood opportunities, benefitting women and men equitably (cat 2; mod: capacity strengthening)	
	TOTAL BUDGET: \$ 63.7m