

PROGRAM REVIEW NOTE

Pakistan Partnership for Improved Nutrition

The Concept Review Note (CRN) is required for all new Programmatic Trust Funds (TF).

PROGRAMMATIC TFs. Finance multiple grants, under a two-stage mechanism. In the first stage, one or more donors agree to a broad thematic framework designed to support a program of activities over multiple years and the donor(s) commit the funds. In the second stage, the grants are approved for specific activities. Grants may be approved by the Bank, the donor(s), or a special committee which may include representatives of the Bank, the donor(s) and other entities, (i.e. Recipient representatives). The approval criteria and conditions are agreed between the Bank and the donor(s) and normally specified in the Administration Agreement between the Bank and donor(s).

BASIC DATA

PRN Summary Description	:	The donors wish to expand their partnership with the World Bank to support the provincial and federal government efforts to scale-up nutrition in Pakistan. It is proposed to do this through an umbrella Trust Fund that will co-finance IDA in order to expand the scale of resources available to provinces to implement effective interventions, as well as directly finance analytical and advisory activities (AAA) which will facilitate and complement operational activities.
Team Leader	:	Luc Laviolette
Sponsoring Unit	:	SASHD
Sponsoring Manager	:	Julie McLaughlin
Sector Board	:	Health, Nutrition and Population
First FY of Funding	:	FY12
FY of Funding	:	FY12-FY17
Name of Recipient(s)	:	To be decided in the implementation phase
Sector (s)	:	HNP, but also possibly, agriculture, social protection, water and sanitation, education, urban development, rural development, social development, and/or private sector development.
Theme (s)	:	As above
Geographic scope	:	Pakistan, all provinces eligible
		Regional Activities 0 percent
		Country Activities: 100 percent
		Pakistan 100 percent
		Total (Regional + Country) 100 percent
Purpose of TF (list by purpose with the estimated breakdown)	:	<ul style="list-style-type: none"> · Project financing, incl. co-financing 85 percent · Project Preparation 3 percent · TA and analytical work – Bank Executed 7 percent · Other (including TF Management) 5 percent <p style="text-align: center;">(All percentages are only indicative)</p>

RATIONALE AND OBJECTIVES

Case for Bank involvement in new TF

1.1 Explain why the Bank should be involved in this TF.

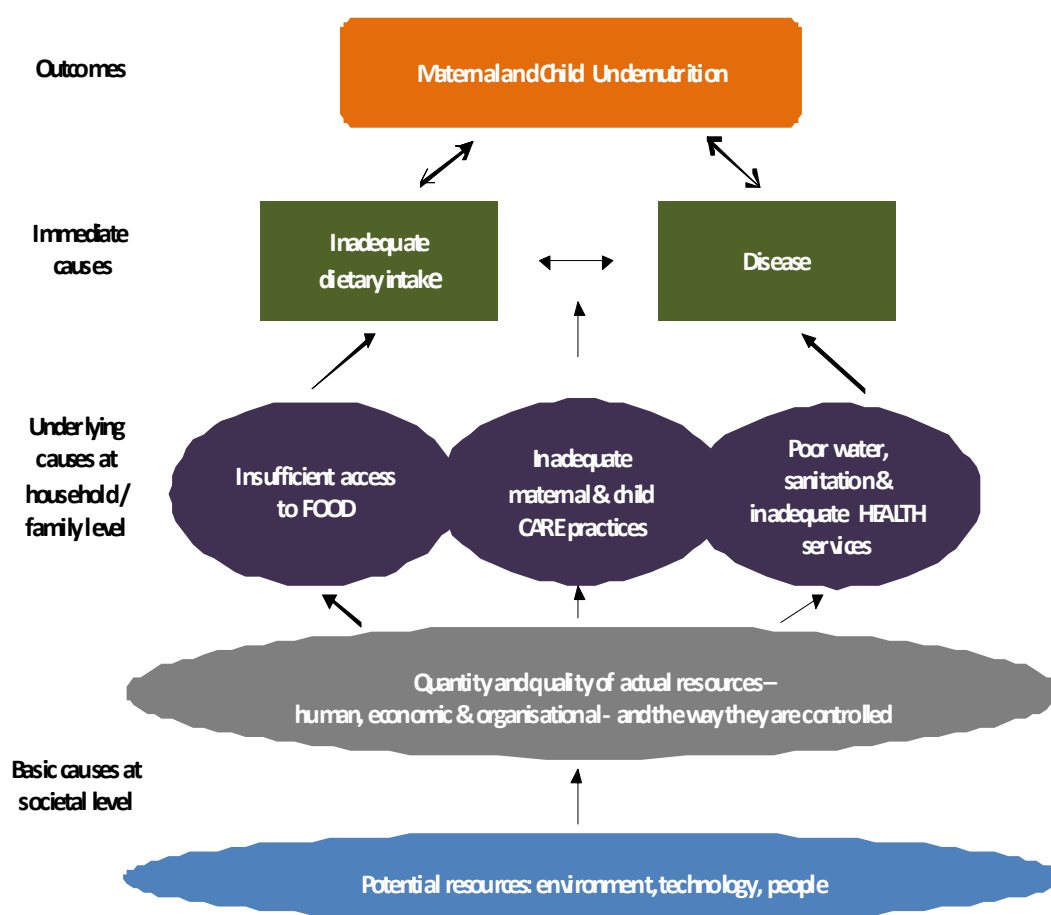
Improving nutrition contributes to productivity, economic development, and poverty reduction by improving physical work capacity, cognitive development, school performance, and health. Pakistan has very high rates of malnutrition. The economic costs of malnutrition are very high – an estimated 2-3 percent of GDP is lost every year in Pakistan due to vitamins and mineral deficiencies alone. Malnutrition is directly related to the achievement of MDGs 1, 2, 4 and 5. Goal 1 aims to eradicate extreme poverty and hunger and target 1C is to halve the proportion of people who suffer from hunger. As explained above, malnutrition impairs cognitive development and reduces productivity and thus increases poverty. Goal 2 is to achieve universal primary education; children who are malnourished in the first two years enroll later in school, do not perform as well and have a higher risk of dropping out. Goal 4 aims to reduce child mortality rates; malnutrition is an underlying factor in approximately a third of child mortality. Goal 5 is to improve maternal health, including reducing maternal mortality. Malnutrition and particularly maternal anemia are significant risk factors for maternal mortality.

Of children under five, 44 percent are stunted and 32 percent are underweight¹. Maternal malnutrition is also a significant problem: 15 percent of women of reproductive age have chronic energy deficiency and a third of women are either overweight (21 percent) or obese (9.5 percent), indicating a double burden of under- and over-nutrition. Women and children also suffer from some of the world's highest levels of vitamin and mineral deficiencies. Addressing malnutrition in Pakistan is thus at the core of the Bank's mission of poverty reduction. It is also an important priority for several development partners.

¹ ALL NUTRITION FIGURES FROM THE DRAFT NATIONAL NUTRITION SURVEY 2011.

Malnutrition results from different combinations of immediate, underlying and basic determinants, as illustrated in Figure 1.

Figure 1: Conceptual framework for analysing the causes of malnutrition



Ref: UNICEF

All key determinants of undernutrition are interacting to create the current situation in Pakistan. Pakistan faces an important food security challenge in terms of insufficient caloric intake (58% of households are food insecure) and dietary diversity is also a problem. The 2010 and 2011 floods destroyed large crop areas, further worsening the problem. Insufficient health services remain a determinant of undernutrition as the prevalence of illness in the population remains high; 1 in every 11 children born in Pakistan dies before reaching their fifth birthday. The health environment in Pakistan remains a significant cause of undernutrition, particularly in rural areas. While virtually everyone (93 per cent) has access to an improved source of drinking water, half of the population (48 per cent) lack access to improved sanitation (62 per cent in rural areas). Hygiene practices such as hand washing at appropriate times (e.g. before feeding children) are also a concern. Inadequate care for women and children is also a significant cause of undernutrition. Women often have limited

influence over how resources are spent and what foods are purchased. The response to the special needs of women is not adequate; despite the high levels of maternal underweight (15 per cent of women have low body mass index) there are only limited food supplementation programs for women and iron supplements with de-worming is infrequent. Inadequate infant and young child feeding practices represent an important area for intervention. Although two thirds of children (65 per cent) are exclusively breastfed during the first six months, complementary food is often introduced too late and is of inadequate quality.

Gender inequity is pervasive in Pakistan. The significance of this inequity in nutrition is particularly important in the health, education and agricultural spheres, and, manifests itself in inadequate access to services, inadequate control over resources, and inadequate economic opportunities. Women deprived of education and health services are less capable of assuring dietary adequacy in the household, are less likely to pursue beneficial care and feeding practices, and will be biologically and physiologically less likely to deliver healthy infants capable of surviving childhood and exhibiting healthy growth and development.

The 2011 Pakistan National Nutrition Survey revealed that there has been no improvement in the main nutrition indicators for several decades, which is directly related to nutrition not having been recognized as a development priority by the government and development partners, and to the absence of a strong civil society movement to advocate for nutrition. The response to malnutrition has been fragmented and to date there was only a low level of donor investment in nutrition. While the Government of Pakistan has had a national nutrition strategy in place for many years, it has not been operationalized into programs at scale. It is thus not surprising that the nutrition status of women and children has not improved much because the interventions that are known to work well to reduce malnutrition have only been implemented in smaller “islands” in Pakistan, whereby the UN or NGOs have implemented good quality interventions but at a scale that was too small to have an impact on the main nutrition indicators. Only a few interventions, such as salt iodization and vitamin A supplementation, have been implemented at scale and these are showing impact (e.g. NNS 2011 has shown significant improvement in the iodine status of women and children).

The main rationale for the creation of this trust fund is thus to concentrate resources and generate levels of financing that would enable provincial governments to plan and implement programs at a scale that would be sufficient to improve district and provincial chronic and acute nutrition indicators. It is recognized that to achieve the scaling-up objective of the trust fund, the planning will need to focus on scale from the start, including establishing appropriate monitoring and evaluation systems to track the conditions for moving to scale. Until now, the provinces have planned within a given project budget envelope and have never considered what it would take to ensure access to every citizen who requires nutrition services and products. The dialogue which the Bank and other partners have been leading with the provinces for the development of the nutrition PC-1s that would be financed by the trust fund have deliberately focused on scale, which has included decisions on the physical phasing of interventions (by interventions and by number of district), an assessment of the capacity requirements for the delivery, both within the governments and through contracts with partners, monitoring and evaluation systems for scale, etc. It is anticipated that the phasing would ensure a balance between the (often contradictory) objective of targeting the most vulnerable with the availability of capacity for delivery. One approach to target the most vulnerable which is under discussion with the provinces is to contract out services to non-state entities in areas where government capacity is too weak or non-existent. Often these are security compromised areas or areas of greatest need.

Currently, nutrition projects in the provinces are delivered mainly by NGOs who are contracted directly by the UN and/or donors. Activities focus primarily on flood response, mainly treatment of acute malnutrition (with financing from UNICEF and WFP), which is implemented with some complementary, but limited, behavior change communications related to infant and young child feeding (IYCF). The government provides some services through clinics (e.g. treatment of the more severe cases of acute malnutrition, provision of zinc and ORS to treat diarrhea) and at the community level through the Lady Health Workers. However, the last evaluation of the LHWs revealed that they under-performed on their nutrition functions. The District Health Offices are collaborating with the Micronutrient Initiative (MI) and UNICEF to improve the availability of iodized salt. Vitamin A supplements have been delivered to more than 90% of children 6-59 months every six months as part of the National Immunization Days (NIDs) for polio eradication. There had been a large wheat flour fortification program financed by the Global Alliance for Improved Nutrition (GAIN) and to a lesser extent MI, but this was halted when the federal Ministry of Health was abolished with the 18th Amendment to the Constitution. Some innovations (e.g. provision of micronutrient powders with complementary food to children 6-24 months) have been tested and have proven effective in reducing anemia. WHO has also been providing normative guidance as well as technical assistance in several areas including nutrition surveillance. DFID and the World Bank are also planning to include nutrition interventions in provincial programs in Punjab (as part of a health systems reform program) as well as Khyber Pakhtunkhwa (as part of a project that would finance the delivery of a basic package of health and nutrition services through government contracts with non-state providers). The trust fund would finance activities that will complement these as well as planned nutrition programs.

In 2011, Pakistan implemented the 18th Amendment to its Constitution which devolved responsibility and authority for most areas of nutrition to the provinces. This devolution offers the opportunity of tailoring approaches to meet the specific needs and capacities of each province. However, it also poses the challenge for the development partners of increasing considerably the number of transactions and that is a particular challenge for those partners who do not have provincial representation. There are also considerable capacity gaps in the provinces for the implementation of nutrition interventions. While there are nutrition functions that are typically at the federal level which are in the process of being defined (e.g. food regulatory matters, nutrition surveillance and surveys, MDG tracking, donor relations), it is anticipated that most of the activities financed by this trust fund would be through the provincial governments. The trust fund will assist the development partners who choose to use it, by providing the World Bank's systems for project preparation and approval, safeguards, risk management, supervision and for technical and implementation support. The trust fund will also provide a mechanism for the Bank and participating donors to dialogue and invest strategically in nutrition post devolution, by engaging nationally while maintaining provincial specificity.

While the provinces now have the lead responsibility for implementing nutrition programs and are thus anticipated to be the main partners for this trust fund, there remains a role for the federal government. The exact functions of the federal government and which federal institution(s) will take responsibility for these are still undefined but are expected to cover areas such as food safety and fortification laws, standards and guidelines, tracking of progress against international commitments (e.g. nutrition-related MDGs), etc. While it is anticipated that the trust fund would support primarily activities led by the provinces, the trust fund could

also support federal activities that will be required to enable provincial effectiveness in nutrition.

Some important pieces of analytical work have been initiated over the last few months, which aim to understand better the reasons why nutrition has not been prioritized to the extent in Pakistan that would have resulted in large scale programs being designed, financed and implemented. DFID has commissioned a political economy analysis to help understand the interests that could be limiting commitment to and the requisite actions for scaling-up nutrition. The Technical Resource Facility, jointly financed by AusAid and DFID, is also currently reviewing past nutrition programs in the four larger provinces that were meant to address malnutrition in Pakistan. The lessons from these two reviews will be important inputs into the design of activities to be financed by the Pakistan Partnership for Improved Nutrition trust fund.

The provinces, with support from partners such as UNICEF and WHO, have been adjusting the “Pakistan Integrated Nutrition Strategy – PINS” to meet their province-specific needs and capacities. The PINS was developed in 2011 by the UN as a framework for Pakistan to address chronic malnutrition by drawing on the strengths of the relevant sectors. The provinces have also recently established provincial multi-sectoral nutrition coordination committees. The World Bank (through the South Asia Food and Nutrition Security Initiative – SAFANSI²) and partners will be supporting these committees to develop policy guidance notes on the multi-sectoral aspects of malnutrition in their province. It is anticipated that these steps will enable the provinces to be well equipped (with strategy and capacity) to take the lead in coordinating a multi-sectoral response to malnutrition. That will be an important backdrop for the activities of the development partners in the provinces, including the activities financed by the trust fund. The provincial multi-sectoral policy guidance notes and ensuing strategies will be the framework that will guide any possible investments by the trust fund in nutrition-sensitive interventions (i.e. outside the health sector).

While the programmatic trust fund will be amenable to integrating the lessons that will emerge from these and other reviews, some important lessons from Pakistan’s and the global experience in scaling up nutrition have already been taken into consideration in the design of this trust fund:

- **Government in the “driver’s seat”:** Provincial governments will be in the lead for the design and the stewardship of implementation of the nutrition programs that would be financed by the trust fund. Part of the reason why some previous nutrition programs have not scaled up or been sustained in Pakistan is that these were too often donor-driven and implemented through contracts issued directly to UN or NGO partners by the donors. The trust fund will address this by partnering directly with governments and the projects financed will include in their design activities that strengthen the stewardship and overall leadership role of government.
- **Service delivery is not always best directly done by governments:** While the provincial governments will have a lead stewardship role, it may not always be necessary that they be directly delivering the nutrition interventions that will be financed by the trust fund. It is now increasingly recognized that results can be

² A WORLD BANK REGIONAL TRUST FUND FINANCED BY AUSAID AND DFID.

enhanced through government contracting out service delivery to non-state entities. This will be encouraged through the project(s) design.

- **Importance of independent reviews of results:** Given the focus that this trust fund will place on achievement of results, the project(s) supported by the trust fund will place a premium on incorporating into the design independent, third-party evaluations. This is building on experience from other countries (e.g. Afghanistan) where such independent assessments have proven useful to the government and other development partners in obtaining reliable data in a timely manner.
- **Plan Multi-sectorally, implement sectorally** – While it is critical to define an overall plan that outlines the role of the relevant sectors to achieve nutrition results, it is equally important to ensure that each sector has the autonomy to implement its part of the plan. While some inter-sectoral linkages are required, it has been shown that attempting to implement multi-sectorally often becomes too complex and that limits scalability. This trust fund will thus focus on supporting nutrition-sensitive approaches on a sector by sector basis, but ensure that each sectoral activity is well aligned with provincial multi-sectoral nutrition strategies.
- **The gender dimension must be adequately factored into the design and implementation of nutrition programs.** As noted above, gender inequity persists in Pakistan. Although the last two National Nutrition Surveys (2001 and 2011) have shown no significant differences in the nutritional status of young girls and boys, there is a strong association between mother's education and the nutritional status of her children. The activities financed by this trust fund will be appraised for their gender sensitivity. It is expected that most projects would focus on women given their role in the critical "first thousand days" period but the projects will also be appraised for their plans to improve the gender dynamics related to nutrition, through the involvement of others in the household (men, mothers in law) who have an impact on the mother's decision making power. Results indicators, to the extent possible, will also be disaggregated by gender.
- **Equity considerations must be built into the design** – Malnutrition in Pakistan is strongly correlated to poverty. For example, children from households in the lowest income quintile were twice as likely to be underweight than children from the highest income quintile. It is thus important to design nutrition interventions in such a way as to ensure that the poorest and other socially excluded groups are reached and can effectively utilize the services.
- **Importance of evidence** -- Given the range of opinions and perceptions of what causes malnutrition and what may work to address the challenge, it is critical to start with robust analysis of the determinants and of past experience including documented evidence of the effectiveness of interventions in contexts similar to Pakistan. There is currently much stronger evidence for nutrition interventions through the health sector and these have yet to be implemented at scale in Pakistan. It is thus anticipated that in the trust fund would prioritize scaling up these "nutrition-specific" interventions.

Following the floods in 2010 and 2011, when acute malnutrition indicators were highlighted and treatment of acute malnutrition along with infant and young child feeding counseling were part of the emergency response, nutrition has been gaining recognition as a development

priority at the national and provincial levels. In September 2011, a meeting of the Pakistan D-10 group of development partners and senior officials from the federal and provincial governments agreed that the provinces will develop strategies to address malnutrition and that these will form the basis for updating the national nutrition strategy. It was recognized that a coherent response to these plans (including financing) will need to be developed by the development partners. The World Bank was asked to take a coordinating role and has been chairing monthly meetings of a Pakistan Nutrition Development Partners group. As part of the overall recognition of the magnitude of the problem and the need for a scaled-up response, several of the development partners (including the World Bank, UNICEF, DFID) have increased their number of staff in Pakistan who work on nutrition.

At the global level in recent years there has been a coalescing of views on what it takes to address malnutrition in an effective and sustainable way which has culminated in the “Scaling Up Nutrition” movement to which over 100 organizations have signed up. The Pakistan Nutrition Development Partners group has prepared a “Scaling Up Nutrition in Pakistan” draft paper that outlines a way forward for Pakistan (including the necessary architecture) and will be another important input for the design of the projects to be financed by the trust fund.

Objectives and Activities

1.2 Describe briefly the primary development objectives of the TF and main activities to be supported

Development Objective: The development objective of the trust fund is to support Pakistan to expand coverage and access to nutrition services that are known to reduce malnutrition in women and young children.

The trust fund will focus primarily on co-financing World Bank-financed support to scale-up nutrition services. The availability of grant resources is intended to incentivize provinces to prioritize investments into nutrition. The trust fund will also finance project preparation, appraisal and supervision as well as TF management costs. A modest proportion of the funds will finance technical assistance and analytical work related to project design, implementation and evaluation. A particular focus will be given to interventions that are proven to reduce malnutrition³ and which focus on the “first 1000 days” from conception to the first 24 months of life, which is the period when most of the long-term, irreparable damage from malnutrition occurs. See attached evidence briefs for a summary of the types of health sector interventions that would be financed and the evidence base that underpins them. These actions are expected to take place within a range of sectors, with an initial focus on interventions implemented through the health sector. The activities will benefit particularly women, the poorest and most malnourished and will follow the “Scaling Up Nutrition” (SUN) Framework that has been endorsed by more than 100 international development partners and which is being implemented under the leadership of the United Nations Secretary General. The SUN Framework focuses on programs that support both “direct nutrition interventions” through the health sector, as well as “nutrition-sensitive interventions” through a range of sectors.

³ WHILE THE DEFINITION OF “MALNUTRITION” INCLUDES BOTH UNDER-NUTRITION AND OVER-NUTRITION, THE MAIN PROBLEM IN PAKISTAN IS UNDER-NUTRITION AND THIS WILL BE THE FOCUS OF THIS TRUST FUND.

The trust fund will focus primarily “direct nutrition interventions” outlined in the SUN framework, including:

- Promotion of early and exclusive breastfeeding
- Promotion of appropriate complementary feeding for infants starting at 6 months of age
- Improved hygiene practices including hand washing
- Provision of periodic vitamin A supplements
- Provision of therapeutic zinc supplements with ORS for diarrhea management
- Provision of multiple micronutrient powders to improve the quality of food for complementary feeding (6-24 month children)
- De-worming for children (to reduce loss of nutrients)
- Iron folic acid supplementation for women during pregnancy
- Iodization of salt
- Fortification of wheat flour with iron and folic acid
- Fortification of edible oil with vitamins A and D
- Treatment of severe acute malnutrition (SAM)

The trust fund will also support the incorporation of “nutrition-sensitive interventions” in relevant sectors. Following are some examples of the types of interventions that could be supported as “nutrition-sensitive” approaches outside the health sector. The specific interventions will be determined and indicators defined as part of project preparation.

Figure 2: Examples of Nutrition-sensitive Interventions

Sectors	Examples of possible interventions
Agriculture	<ul style="list-style-type: none"> • Activities to increase production of more nutritious foods, e.g. increasing dietary diversity, bio-fortified crops • Activities to reduce women’s energy expenditure and time spent away from children • Food processing and storage to reduce losses and to improve access during seasons of food insecurity • Food processing to improve the nutrient quality (e.g. micronutrient fortification)
Social protection	<ul style="list-style-type: none"> • Information package on nutrition behaviors to accompany the cash transfers that are provided by BISP and other social protection programs • Targeted food supplementation during pregnancy to food insecure households • Introducing a nutrition-related conditionality in BISP
Water and sanitation	<ul style="list-style-type: none"> • Improving access to improved sanitation facilities • A package of behavior change communication to improve hand washing behaviors
Private sector development	<ul style="list-style-type: none"> • Information package on nutrition behaviors to be delivered in micro-finance groups • Developing a robust regulatory monitoring system for food quality and for fortification of food with vitamins and minerals • Incentives for the private sector to develop low-cost food products for complementary feeding that are targeted to poor households • Contracting of the private sector for the delivery of basic nutrition services (e.g. behavior change communication)
Education	<ul style="list-style-type: none"> • Nutrition information in the school curriculum • Nutrition services targeted at adolescent girls (in schools and through peer-to-peer to reach non-school going girls) • Extra-curricular activities to enable children to become agents of change in their households and communities (e.g. testing salt for iodine content, promotion of hand washing)

Summary Description of Project Components/Activities

Component/Activity	Planned Output
ACT/COM 1: Project Co-Financing	Output 1: Provinces expand the scope and scale of effective nutrition interventions
ACT/COM 2: TA and analytical work	Output 2: Knowledge to support planning and implementation of the provincial and national strategies (training, workshops, learning events, etc.), as well as policy notes, economic and sector studies and other knowledge products on nutrition
ACT/COM 3: Project prep/appraisal/supervision	Output 3: Quality project design, appraisal and supervision
ACT/COM 4: Program management	Output 4: Effective management of the trust fund

This proposed trust fund will support activities mainly undertaken by the provinces of Pakistan. Federal level activities may also be supported as required to complement and support provincial actions. It is envisaged that the majority of the activities to be funded under the proposed trust fund will be project co-financing and thus will be recipient-executed (approximately 85 percent). The technical assistance and analytical work will be either Recipient executed or Bank executed. Project preparation, appraisal and supervision and program management will be Bank executed.

ACT/COM 1: Project Financing (approximately 85 percent)

This component will support Recipient executed activities, mainly in the provinces, that are well proven to reduce malnutrition during the critical window of the first thousand days of life from conception to the first 24 months of life.

ACT/COM 2: Technical assistance and analytical work (approximately 7 percent)

The tasks financed by this component will aim to increase the capacity of the client to deliver the activities in the projects financed by component 1, such as training programs, the design and production of tools (e.g. supervision tools), exposure visits, fora for inter-province learning, secondment of experts, etc.

This component will also support tasks that directly aim to ensure that lessons emerge from the projects financed under component 1 above. Tasks will include evaluations of process and impact, documentation (e.g. case studies), support for testing of innovations (e.g. innovative monitoring systems, innovative behavior change communication models), and activities to disseminate the analytical products in Pakistan in order to influence policy.

The tasks in this component will be either Recipient executed or Bank executed.

ACT/COM 3: Project prep/appraisal/supervision (approximately 3 percent)

This component will support activities for robust project design, effective appraisal and adequate supervision. Activities will include staff and management support to the Bank's established Project processing, as well as workshops, analytical work specific to project preparation (e.g. evidence reviews), field visits, hiring of independent monitors, hiring of consultants to increase client capacity to design good projects (e.g. costing experts). This component will be Bank executed.

ACT/COM 4: Program management (approximately 5 percent)

This component will support activities related to the management of the proposed trust fund, such as the time of staff to monitor and report upon trust fund use, holding meetings for the management and governance of the proposed trust fund, preparation of reports and other forms of monitoring and communication. This component will be Bank executed.

Alignment with Bank's strategic framework

1.3 Describe the TF's relevance to:

- Bank Sector/Country Strategies or equivalent
- Existing Bank programs and other TFs

South Asia has the largest concentration of malnourished people in the world. It is home to 1.5 billion people with over 1 billion living under \$2 a day. The region has seen high growth at 6 percent average annual rate for the last 20 years. Despite this it faces rates of malnutrition that are at the level of much poorer countries in regions such as sub-Saharan Africa. In response to the malnutrition challenge, the South Asia region of the Bank has developed a "Regional Assistance Strategy" (RAS) for nutrition which is in line with the SUN Framework outlined above.

The Bank's strategy for South Asia comprises three pillars: accelerating and sustaining growth, making development inclusive, and strengthening human development. Sustainable and accessible service delivery is crucial to inclusive growth and human development. The World Bank Country Partnership Strategy (CPS) for Pakistan sets out a strategy around four pillars: (i) improving economic governance, (ii) improving human development and social protection, (iii) improving infrastructure to support growth; and (iv) improving security and reducing the risk of conflict. The CPS recognizes that accelerating progress in human development remains the key underpinning factor for sustained economic gains and highlights nutrition as one of Pakistan's main development challenges. This proposed trust fund will directly support the third pillar of the Bank's South Asia strategy and the second pillar of the Pakistan CPS.

This proposed trust fund has a direct thematic link to and complements the South Asia Food and Nutrition Security Initiative (SAFANSI), which is a trust fund of a regional scope and among other countries finances work in Pakistan. SAFANSI's development objective is to increase the commitment of governments and development partners to more effective and integrated food and nutrition-related policies and investments. SAFANSI aims to achieve its development objective through three "pillars": analysis, advocacy and capacity building and does not support investment for the scaling-up of country nutrition programs. In close coordination with SAFANSI, the proposed trust fund will focus primarily on financing of

projects and other activities that are directly related to these projects. Specifically, the proposed trust fund will mainly finance projects that scale-up nutrition-specific and nutrition-sensitive interventions, and TA/analytical work specifically designed to improve the quality of the results achieved by the aforementioned projects.

The proposed trust fund is also related to the Multi-Donor Trust Fund (MDTF) in Pakistan which was created to strengthen the response in the crises-affected provinces of Khyber Pakhtunkhwa (KP), Balochistan and Federally Administered Tribal Areas (FATA) region. The objective of this MDTF is to support reconstruction and development aimed at recovering from the impact of the conflict and reducing the potential for renewed conflict. The MDTF is administered by the Bank, and has so far received \$140 million in pledges from ten donors: Australia, Denmark, Finland, EU, Germany, Italy, Turkey, UK, USA and Sweden.

The geographical scope of the MDTF is more limited than the proposed trust fund and it does not have a focus on nutrition to help generate the donor coordination and the incentive for action by the provincial governments that this proposed trust fund is expected to generate. The proposed trust fund aims to provide support to nutrition programs in all provinces of Pakistan. This will complement the MDTF in several ways. For example, when health systems are strengthened by the MDTF for the delivery of basic health services, this provides a platform for more effective nutrition services to be financed by the proposed trust fund. Similarly, if the MDTF finances projects to improve food production, this will reduce food insecurity and thus enable households to spend more time and other resources in taking part in the activities (e.g. behavior change) to be financed by the proposed trust fund.

Subsidiarity

1.4 Bank support for country-level activities is usually provided through regular Bank country operations. If this TF will have country-level activities explain how they will complement and reinforce regular Bank country operations without substituting for them.

The proposed trust fund is consistent with the country strategy and part of an agreed work program between the Bank and the government. The trust fund aims to enhance the Bank's work program in Pakistan by increasing its scope, bringing added value or enabling the Bank to engage in new areas of work without substituting the work program.

The proposed trust fund will complement analytical work and technical assistance that is being financed by SAFANSI and the Bank Budget (BB). This SAFANSI analytical work and technical assistance, which will build the capacity of the provinces and the federal government to prepare or update their nutrition strategies, will form a foundation for the program scaling-up investments to be made by the proposed trust fund.

As noted above, this proposed trust fund is also expected to co-finance an IDA operation that will provide financing to the provinces to scale-up nutrition programs in the health sector. The IDA operation is expected to have a component for each participating province and the initial AusAid contribution to this trust fund would finance the components for the provinces of Balochistan and Khyber Pakhtunkhwa respectively. The trust fund may also be used to soften the IDA terms (by co-financing provincial components) for other provinces and thus create an incentive to borrow IDA resources for nutrition programs. It is likely that this IDA

operation would not have gone forward at a national scale without the proposed co-financing because some provinces have become reluctant to borrow at the revised harder IDA terms.

GOVERNANCE

Structure

2.1 Describe the proposed governance structure, indicating:

- How development partners will form this TF and interact with each other
- The Bank's role in (i) oversight and (ii) management of the TF
- The roles of any bodies, such as a secretariat, governing board or advisory group, if any (attach a diagram if helpful)

The following matrix outlines the role and responsibilities of the institutions that will constitute the governance structure of the trust fund.

Figure 3: Matrix of Main Governance Arrangements

Functions	Structures responsible	Participants
Project Preparation, Appraisal and Supervision (including fiduciary and other risks as well as environmental and social safeguards)	Task Team assigned to the project by relevant Sector Manager	World Bank Task Team assigned to each project by the relevant Sector Manager
Peer Review of Project(s) and non-lending tasks	Established World Bank QA processes	Trust fund donors and World Bank
Day to day oversight of the use of trust fund resources	TF Team in World Bank	Trust Fund Task Team Leader (TTL) and other World Bank staff, working under the supervision of the Sector Manager Health, Nutrition and Population (HNP) for South Asia.
Preparation of annual report on implementation progress for review by trust fund donors	TF Team in World Bank	Trust Fund TTL and other World Bank staff, working under the supervision of the Sector Manager HNP for South Asia.
Reporting to the trust fund donors	Trust Fund TTL	Trust Fund TTL

Government: All tasks financed by the trust fund will follow the standard procedures for requests and clearances from/by the government (e.g. EAD requests for projects). The federal and provincial governments will be regularly informed of the progress of implementation of the trust fund through the Bank's regular processes (e.g. Aide Memoires, regular World Bank portfolio reviews).

Approval of tasks: The overall trust fund will be managed at the level of the Sector Manager, Health, Nutrition and Population, Human Development Department, South Asia Region, under the guidance of the Director for Human Development (SASHD), South Asia Region. Standard World Bank processes will be followed for review and approval of tasks to be financed by the trust fund.

Management of TF and of individual tasks: The day to day management of the trust fund will be conducted by the trust fund TTL appointed by the Bank who will be responsible for ensuring accountability, oversight and reporting to the trust fund donors. S/he will report to the Sector Manager of the Health, Nutrition and Population (SASHN) unit. Individual task teams will be appointed by the relevant Sector Manager to lead the process of project preparation, appraisal and approval and to manage each task financed by the trust fund. These teams will be responsible for reporting progress to the trust fund TTL and Bank Management on trust fund financed tasks.

Use of World Bank processes: Standard World Bank processes will be used to prepare, appraise and monitor the operational tasks to be financed by the trust fund. This will include carrying out detailed risk assessments, financial management and procurement capacity reviews, reviews of compliance with the World Bank environment and social safeguards and continual implementation support. Similarly, the standard processes for quality assurance of analytical work and technical assistance (e.g. peer reviews) will be used. Task teams will ensure that their individual activities have appropriate country-specific clearances and have followed regular processes of approval and review, including peer review, and dissemination within country. Activities will only be supported if they are part of the relevant unit's Work Program Agreement with the Pakistan Country Management Unit.

Program Implementation

2.2 Describe the plan for program implementation, including:

- How TF work program activities are to be selected, managed, delivered and monitored
- Who will have responsibility for approval, execution and supervision of TF activities
- How communications will be handled (i) internally for the Board, if appropriate, and (ii) externally by the Bank and/or partners to the press and public

The World Bank as the Administrator of the proposed trust fund will be responsible for appraisal of design, decisions on financial allocations, reviews of implementation, and monitoring and reporting on all performance aspects of fund-financed activities. The Administrator, will ensure that all funds are disbursed in accordance with the grant and administration agreements. The Administrator will have the ability to deny funding to any activity where in its view significant doubts arise as to whether the funds concerned will be effectively utilized for the agreed purpose. The key responsibilities of the Administrator will include:

- Handling the trust fund day-today operations, including coordination among development partners, maintaining records, arranging meetings, handling correspondence and meeting minutes, etc.
- Coordinating with the appropriate staff of the Administrator and/or consultants for project-specific activities such as analysis, appraisal, supervision, etc.
- Preparing reports and submitting them to the trust fund donors.
- Ensuring effective communication and external relations.

In the initial phase, the founding donor to this partnership, AusAID, will fund the Balochistan and Khyber Pakhtunkhwa (KPK) components of a multi-province nutrition project with an

estimated AUD \$39 million. This is expected to constitute co-financing to IDA for a project that is expected to be finalized in the Bank's FY13. This will require that a sub-project of this trust fund be approved as co-financing for two specific components (one for each province) of the larger project which is also expected to disburse IDA against the other components.

Other initiatives and activities in terms of sectors, may be added after discussion between the World Bank and the donors based on an agreed work program.

Reporting

2.3 Describe plans on reporting to Donors on implementation progress on TF activities:

The Bank will use its standard processes for review and reporting of progress on the tasks financed by the trust fund. These processes include Implementation Status and Results (ISR) reports and Implementation Completion Reports (ICRs) for operations, and Grant Reporting and Monitoring (GRM) reports for technical assistance and analytical work. The reports generated by these processes will be shared with trust fund donors. The federal and provincial governments will also be informed regularly of progress through the Bank's regular processes which include implementation support missions (with main decisions outlined in Aide Memoires) and portfolio reviews. In addition, a report on the performance of the trust fund will be submitted annually to the trust fund donors. Country representatives of the trust fund donors will also be briefed from time to time on progress of specific activities by the concerned project TTLs through the trust fund TTL.

Sustainability

2.4 Explain the resource mobilization strategy for this TF (new donors, additional contributions, etc), with the expected timetable.

AusAid has committed to being the founding donor for this partnership with AUD 39 million over four years. The first FY 12 tranche will be AUD 5 million. In subsequent years the tranches are expected to be AUD 10 million in FY13, AUD 12 million in FY 14 and AUD 12 million in FY 15. The proposed trust fund is also being discussed with some other bilateral donors with an interest in addressing malnutrition in Pakistan.

2.5 Explain the disengagement plan and timetable for Bank exit from this TF. How long will the Bank be engaged? How will sustainability be achieved through the transition?

The proposed trust fund is expected to be operational for five years from FY 12 to FY 17. The trust fund is meant to be catalytic and to be phased out (into regular and development government budgets) after five years. The likelihood of sustainability will be enhanced by funding only activities that fit in the provincial nutrition plans and work programs and by discussing upfront with the provincial and federal government sustainability plans (including available fiscal space) for the period following the trust fund's investment and insisting that the provinces co-finance with their own resources any project that receives financing from the proposed trust fund. It is also anticipated that the share of financing of provincial nutrition

programs from provincial government regular budgets would increase over time.

This trust fund will have a strong focus on sustainability at different levels. At the beneficiary level, the trust fund will finance activities that focus on improving nutritional status in the “first thousand days” window. Good nutrition during that period leads to adequate growth and brain development, assets which will generate returns to beneficiaries (better school performance, higher productivity and earnings in adult life) which they will carry for their lifetime. At the household and community level, the trust fund will place a strong emphasis on increasing awareness and generating behavior change, which will be sustained after the financing ends. The trust fund will also place a strong emphasis on building the systems capacity that is required to deliver effective nutrition programs and in fact the need to build the government capacity to steward nutrition programs is one of the main rationales for the creation of this trust fund. The trust fund will also place a premium on generating data on program effectiveness in order to build community demand for the services (by demonstrating that the programs are making a difference to their daily lives) and also to build political capital for investments in nutrition programs. If political leaders hear strong demand from constituents for nutrition programs and they have data to demonstrate effectiveness, these programs are more likely to be financed through government regular budgets in the future. Value for money and affordability will be important criteria to assess proposals, as will government co-financing of budgets from the start.

PARTNERS and FUNDING

3.1. Funding (Bank Budget only) *– USD (Note a custom fee is to be charged for management of the TF)

US DOLLARS (\$)	FY Current	FY Current+1	FY Current+2	FY Current+3	FY Current+4	FY Current +5	TOTAL
Bank Budget (partnership preparation)	0	0	0	0	0	0	0
Bank Budget (partnership activities)	0	0	0	0	0	0	0
Grand Total	0	0	0	0	0	0	0

Note:* It is the responsibility of Bank sponsoring unit to ensure that sufficient Bank Budget is available to provide for adequate oversight of Bank involvement in TFs.

Expected Sources of Funds (all sources of financing) – USD

US DOLLARS (\$000)	FY Current	FY Current+1	FY Current+2	FY Current+3	FY Current+4	FY Current +5	TOTAL
Bank Budget	0	0	0	0	0		0
External Funds (AusAID)	5,175	10,351	12,421	12,421	0		40,368
Grand Total							

Expected Uses of Funds – USD

US DOLLARS (\$)	FY Current	FY Current+1	FY Current+2	FY Current+3	FY Current+4	FY Current +5	TOTAL
Operational Expenses (ie: Technical Assistance, Advisory Services, Publications, and Workshops etc.)	0	4,691,070	9,901,258	11,963,540	9,532,772	2,149,623	38,238,263
Administrative Expenses (ie: Applicable Overhead and staff costs)	44,588	439,342	449,742	457,460	467,228	271,377	2,129,737
	0	0	0	0			0
Total Uses of Funds	44,588	5, 130,412	10,351,000	12,421,000	10,000,000	2,421,000	40,368,000
Bank Management Time		0	0	0			0

Please note except for Program Management all other figures are indicative. Program Management amount includes the 2 percent charged by the central units.

RESULTS FRAMEWORK

Note: if development of performance indicators is still a work in progress at the time of TF preparation, please complete to the extent possible. In such circumstance, a satisfactory Results Framework will need to be finalized prior to LEG clearance of a TF grant agreement (s). Please note that the relevant aspects of the Results Framework will be included in the TF grant agreement.

Program Goal

The **higher development goal** to which this trust fund will contribute is the reduction in malnutrition during the “first thousand days”, with a particular focus on women, girls and the poorest. That higher level goal will be tracked through the nutrition surveys, specifically through the following indicators: stunting in children under five years of age (disaggregated by sex and income quintile) and anemia in women of child bearing age (disaggregated by income quintile). While it will be beyond the direct control of the trust fund projects to have an impact on these two nutritional status indicators, all projects financed by the trust fund will be designed in a way so as to ensure that they are contributing to these higher level goals and every task supported by the trust fund will have a results framework.

The **development objective** of the proposed trust fund is to support Pakistan to expand coverage and access to nutrition services that are known to reduce malnutrition in women and young children.

The trust fund is expected to achieve the following **intermediate outcomes** in support of the development objective:

- Phased expansion and implementation of direct nutrition and nutrition-sensitive interventions
- Increased provincial capacity, systems and information/knowledge for effective planning and implementation of appropriate nutrition interventions
- Effective management of a coordinated window for enhanced nutrition financing for nutrition interventions in Pakistan

Figure 4: Results Framework

Program Development Objective	Outcome Indicators
To support Pakistan to expand coverage and access to nutrition services that are known to reduce malnutrition in women and young children	<ul style="list-style-type: none"> • Increased coverage of direct and nutrition sensitive interventions in Pakistan (see Figures 2 and 5)
Intermediate Outcomes	Intermediate Results Indicator
Phased expansion and implementation of direct nutrition and nutrition sensitive interventions	<ul style="list-style-type: none"> • Percentage of eligible children under 2 receiving nutrition support through the program, disaggregated by gender and income quintiles • Percentage of eligible women receiving nutrition support through the program, disaggregated by income quintiles • Number of districts implementing direct nutrition interventions • Number of sectors implementing nutrition interventions
Building provincial capacity, systems and generating information/knowledge for effective planning and implementation of appropriate nutrition interventions	<ul style="list-style-type: none"> • Increased capacity and budgets of provincial and district governments for nutrition • Fully functional and effective systems and structures in place at provincial and district level • Utilization by government and development partners of the knowledge created through the analytical products • Increased transparency and accountability in the functioning of nutrition programs
Effective management of a coordinated window for enhanced financing for nutrition interventions in Pakistan	<ul style="list-style-type: none"> • Trust fund financed tasks rated satisfactory based on their achievement of results • Timely disbursement to implementing agencies • Increased cumulative financing generated through TF for nutrition

PDO Indicator (s)

This will be a programmatic trust fund. The PDO level indicator is “Increased coverage of direct and nutrition sensitive interventions in Pakistan”.

Indicators will be selected for the individual activities that are financed under the trust fund and will be reviewed as part of the World Bank’s regular project appraisal process which involves multiple peer reviews. The trust fund donors will also have an opportunity to provide inputs into the results frameworks and monitoring and evaluation plans, as part of the project and analytical tasks review processes. A strong focus will be given to the quality of data to be tracked and provinces will be encouraged to contract third party firms to provide independent assessments of results, to complement the provincial nutrition information systems which will also be strengthened. Innovative approaches for monitoring in security compromised areas will be utilized, drawing on the experience of other Bank-financed operations in Pakistan and similar geographies (e.g. drawing on the experience of the FATA/KP/Balochistan MDTF and the Bank’s experience in Afghanistan. Evaluations will be designed to ascertain the contribution of the trust fund to improving indicators through, for example, the use of counter factuals.

The table below (Figure 5) outlines some of the indicators that would likely be used in the sub-project results monitoring frameworks. In selecting indicators for sub-projects, the trust fund TTL and task teams will ensure these are aligned with the IDA core sector indicators. To the extent possible, all indicators will be disaggregated by gender and by income quintiles.

Figure 5: Examples of Indicators to be Measured in Projects

Interventions	Performance indicators⁴
Promotion of early and exclusive breastfeeding	<ul style="list-style-type: none"> • Proportion⁵ of newborns breastfed within 1 hour of birth • Proportion of children 0-6 months exclusively breastfed
Promotion of appropriate complementary feeding for infants starting at 6 months of age	<ul style="list-style-type: none"> • Proportion of children 6-24 months consuming complementary food along with breast milk
Improved hygiene practices including hand washing	<ul style="list-style-type: none"> • Proportion of mothers aware of proper hand washing behavior
Provision of periodic vitamin A supplements	<ul style="list-style-type: none"> • Proportion of children 6-59 months having received a Vitamin A capsule in last six months
Provision of therapeutic zinc supplements with ORS for diarrhea management	<ul style="list-style-type: none"> • Proportion of children with diarrhea having received zinc and ORS
Provision of multiple micronutrient powders to improve the quality of food for complementary feeding (6-24 month children)	<ul style="list-style-type: none"> • Proportion of children 6-24 months having consumed the recommended regimen of micronutrient powders (60 sachets every 6 months)
De-worming for children (to reduce loss of nutrients)	<ul style="list-style-type: none"> • Proportion of children 24-59 months having received de-worming tablet in last 6 months
Iron folic acid supplementation for women during pregnancy	<ul style="list-style-type: none"> • Proportion of pregnant women having consumed 180 IFA tablets during pregnancy
Iodization of salt	<ul style="list-style-type: none"> • Proportion of households consuming adequately iodized salt
Fortification of wheat flour with iron and folic acid	<ul style="list-style-type: none"> • Proportion of households consuming fortified wheat flour (iron and folic acid)
Fortification of edible oil with vitamins A and D	<ul style="list-style-type: none"> • Proportion of households consuming fortified oil (Vitamin A and D)
Treatment of severe acute malnutrition (SAM)	<ul style="list-style-type: none"> • Proportion of children with SAM registered for treatment • Proportion of children with SAM who are successfully treated

Expected Benefits of the TF activities

As noted above, the trust fund is expected to enable the Bank to support Pakistan in scaling up significantly its programs to address malnutrition, leading to improved nutritional status of women and children, through: (a) phased expansion and implementation of direct nutrition and nutrition-sensitive interventions; (b) increased provincial capacity, systems and information/knowledge for effective planning and implementation of appropriate nutrition interventions; and (3) effective management of a coordinated window for enhanced nutrition financing for nutrition interventions in Pakistan.

The direct benefit of the trust fund financing will be an increase in access during the critical stages in the life cycle (pregnancy to the first 24 months of the child's life) to nutrition-related services and products, with a particular focus on the needs of the poorest women and girls.

⁴ ALL INDICATORS TO BE DISAGGREGATED BY SEX AND INCOME QUINTILE AS APPROPRIATE AND FEASIBLE.

⁵ ALL PROPORTIONS WILL ALSO BE AVAILABLE AS NUMBERS, TO DETERMINE REACH.

This will improve nutrition-related knowledge and practices, contributing to an over-arching goal of improvements in nutritional status as measured over time (i.e. it is beyond the scope of the trust fund to directly impact these indicators) as reductions in stunting in children under five and reductions of anemia in women of child bearing age.

ADDITIONAL INFORMATION

Recipient Information (this component will be activated during the implementation phase as per client needs)

4.1 Enter the information below for each grant Recipient. Note: implementing agency(is) will have to be identified prior to LEG clearance of the Grant Agreement(s)

Full Name of Grant Recipient:

Proposed Amount [FY(Current+1)]:

This information will be provided as part of project preparation, as per standard World Bank procedures.

Eligibility of Recipient for TF Funds

4.2 Provide brief information on each grant Recipient including reputation, financial probity (i.e., capacity to manage funds and undertake procurement) and record of achievement in the program area.

This information will be provided as part of project preparation, as per standard World Bank procedures.

4.3 Explain why the proposed activities cannot be supported through regular Bank budget funds or Bank lending.

As noted above, some of the provinces are reluctant to borrow IDA resources for nutrition projects. The projects thus cannot be supported through regular Bank budget funds or Bank lending. Wherever possible, the trust fund resources would be used to co-finance with IDA, thus softening the IDA terms and creating incentives for needy provinces to invest in nutrition.

ATTACHMENTS/COMMENTS (OPTIONAL)

Additional comments from sponsoring Team Leader:

Evidence Base for Nutrition Direct Nutrition Interventions Implemented by the Health Sector

- See attached evidence brief for the main direct nutrition interventions that are expected to be supported by this trust fund.

Risks and Mitigation

The implementation of this trust fund is subject to some risks. While the recognition of nutrition as a development issue in Pakistan is increasing, the activities financed by the trust fund will be carried out in a changing and uncertain political/security environment while donors and Government are seeking rapid results. The overall risks associated with the proposed trust fund are rated as “moderate”. Specific risks and mitigation measures include:

- **Weak commitment by senior officials for nutrition:** Although the floods in 2010 and 2011 and recent advocacy by the development partners have increased the level of awareness of the magnitude of Pakistan’s malnutrition challenge, nutrition is still not perceived as a core building block for inclusive growth and poverty reduction. If the projects to be financed by the trust fund are considered to be lower priority by senior officials, this could lead to delays in design and implementation. **Mitigation:** The World Bank and other partners will continue to advocate for the importance of addressing Pakistan’s malnutrition challenges. The South Asia Food and Nutrition Security Initiative (SAFANSI) will support a process of working with the provincial governments to develop provincial multi-sectoral nutrition policy guidance notes. Other complementary initiatives (e.g. political economy analysis) will be supported by other partners, all within a coordinated multi-partner advocacy strategy.
- **Governance:** Governance is a concern for growth and development in Pakistan. Institutions of accountability have not provided a strong framework for holding the executive or service delivery agents accountable for results. The 18th amendment bill which handed over control of key public sector services to the provinces is generally viewed positively but there is concern over implementation capacity in some provinces. **Mitigation:** The World Bank will undertake operational risk assessment in sectors, and improve governance risk profiling in sectors and projects as well as provide continued support for governance reforms through project lending.
- **Capacity for implementation and monitoring:** So far the provincial nutrition programs have been small scale and largely implemented by NGOs through contracts issued directly by the UN agencies. The proposed shift to having the provincial government play a central role in leading their nutrition programs will require increased capacity at all

levels in the provincial systems. **Mitigation:** Significant capacity for program design, implementation and monitoring exists in Pakistan, but it is largely outside the government sector. In the dialogue with the provinces, the World Bank will encourage the provinces to focus on their stewardship role and to contract non-state actors for implementation. The provinces will also be encouraged to contract technical agencies to assist in areas such as training, monitoring, etc. It is also envisaged that additional positions would be created (e.g. District level nutrition officers, provincial management units) within the government systems to ensure effective delivery of programs while not pulling away existing capacity from other important priorities.

- **Resistance to a shift in program implementation leads:** Some stakeholders (e.g. UN, NGOs) may perceive the approach of this trust fund -- whereby the provincial governments would be in the lead -- as a threat to their role and influence. This could cause resistance that would manifest itself in attempts to reduce support for the trust fund. **Mitigation:** The risk has already been somewhat mitigated by positioning the trust fund within an overall process led by the D-10 group under the leadership of the Ministry of Finance, Economic Affairs Division and thus creating ownership at high levels within the Government of Pakistan. Through the D-10 follow-up, the stakeholders have been engaged in a process to encourage them to define themselves as technical partners to the provincial programs whereby they could either provide in kind technical assistance and/or be contracted by the provincial governments or directly by the Bank (using trust fund resources) to provide technical assistance. They will thus have a stake in the success of the trust fund: the success/failure of the trust fund would thus also be “their” success/failure. The stakeholders realize that none of them can achieve on their own the scale and sustainability of nutrition programs that the trust fund is aiming to achieve.
- **Supervision risks due to security concerns:** While the trust fund will aim to commence operations sequentially as security conditions permit (e.g. starting the first phase of projects in more secure areas), there will still be higher than normal security risks in some projects, and normal Bank supervision may at times be impossible. **Mitigation:** Trust fund financed activities will include a strategy for working in higher-risk areas that will emphasize working through local partners and may include use of supervision consultants, monitoring agents, and security consultants to mitigate supervision and security risks. Task teams will also seek to make use of technology to facilitate supervision through local partners.
- **Reputational risks:** Risks to the Bank’s reputation could arise from unmet donor, government and public expectations about the pace and reach of trust fund activities. **Mitigation:** The trust fund has made provisions for sufficient resources to manage the dialogue with government and to manage the trust fund. The trust fund team will also engage in regular communication with the donors and government to ensure they are well informed of progress as well as of challenges as they arise.