# BUDGET REVISION TO PROTRACTED RELIEF AND RECOVERY OPERATION ZAMBIA PRRO 10594.0

**Budget Revision: 01** 

#### "Response to Natural Disasters and Economic Shocks"

Cost (United States dollars)					
	Present budget	Increase	<b>Revised budget</b>		
Food cost	17,020,782	2,623,953	19,644,735		
External transport	1,467,479	0	1,467,479		
LTSH	10,654,081	0	10,654,081		
ODOC	1,938,500	267,535	2,206,035		
DSC	3,285,025	247,375	3,532,400		
ISC (7%)	2,405,611	219,720	2,625,331		
Total cost to WFP	US\$ 36,771,478	US\$ 3,358,583	US\$ 40,130,061		

#### NATURE OF REVISION

- 1. A budget revision to the protracted relief and recovery operation (PRRO) 10594.0 is proposed to (a) provide an additional US\$2.62 million for cash transfers (food vouchers) equivalent to 3,949 mt of food; and (b) provide additional associated costs, including US\$267,535 for other direct operational costs (ODOC), US\$247,375 for direct support costs (DSC) and US\$219,720 for indirect support costs (ISC). The title of the PRRO is to be changed from "Assistance to Flood Victims in Zambia" to "Response to Natural Disasters and Economic Shocks". This budget increase represents an overall increase in the total budget of 9 percent.
- 2. This budget revision will enable WFP country office to respond to and mitigate the impact of the global economic downturn, particularly the continued and increasing effects of high food prices on the most vulnerable households in Zambia. Through this budget increase, WFP will meet the immediate food needs of an additional 177,300 people, bringing the total number of beneficiaries under the PRRO to 419,900.

#### JUSTIFICATION FOR THE REVISION

### **Summary of existing project activities**

- 3. PRRO 10594.0 contributes to four WFP strategic objectives, specifically: Strategic Objective 2 ("prevent acute hunger and invest in disaster preparedness and mitigation measures"); Strategy Objective 3 ("restore and rebuild lives and livelihoods in post-conflict, post disaster or transition situation"); Strategy Objective 4 ("reduce chronic hunger and under nutrition"); and Strategic Objective 5 ("strengthen the capacities of countries to reduce hunger, including through handover strategies and local purchase").
- 4. PRRO 10594.0 was initially designed to assist 242,600 people affected by the 2007/2008 floods and previous dry spells in the western and southern provinces from September 2008 to May 2010. WFP has been helping the most affected households to overcome the worst effects of the disaster and support the reestablishment of their livelihoods. It is expected that the beneficiaries should not require food assistance beyond April 2010.

5. As food prices had already substantially increased, the PRRO also sought 'to contribute to the mitigation of the effects of soaring prices on populations that are already deemed structurally vulnerable'. In order to support the government's response to high food prices and the global economic downturn, WFP also indicated, within the PRRO, plans to consider and eventually pilot food voucher transfers in selected areas within the context of the Ministry of Community Development and Social Services' (MCDSS) Strategic Plan.

#### Conclusion and recommendation of the re-assessment

- 6. International cereal prices have declined since their peak in mid-2008, but remain higher than historical averages. In Zambia, the prices of staple food commodities have been rising rapidly since early 2008 and have continued to rise into early-2009, often as a direct result of high fuel prices, under-production and higher consumption of staple food crops. In particular, the price of white maize, which is the main staple food in Zambia, has increased by 164 percent between March 2007 and March 2009. According to Central Statistical Office (CSO) data, the cost of living in Zambia continues to steadily increase. The annual rate of food inflation rose sharply to 15.9 percent in April 2009 from 10.1 percent in April 2008.
- 7. The situation in Zambia is further exacerbated by the recent global financial crisis and economic slowdown, which have affected the country through several interlinked factors:<sup>3</sup>
  - a. A sharp contraction in the primary export commodity (copper) and a decline in tourism that was booming only a year ago, have resulted in a considerable loss of employment and income.
  - b. The Kwacha Zambia's currency lost a third of its value against the US dollar between March 2008 and March 2009. The main causes for its depreciation include political uncertainty, global financial crisis and the fall in international copper prices.
  - c. Foreign direct investment (FDI) fell from US\$1,324 million in 2007 to US\$939 million in 2008 and this trend is expected to continue in 2009.
- The combination of high food prices with the financial crisis caused a marked increase in the number of urban poor, who are already constrained by limited access to essential infrastructure and services, the devastating effects of HIV/AIDS, and a rapid demographic growth that further accentuates overcrowding. 5 Invariably, households earning the lowest incomes have been the hardest hit throughout the country and are now unable to meet their immediate food needs. According to the Jesuit Centre for Theological Reflection,<sup>6</sup> a highly-respected research institute in Zambia, an average family of two adults and four children needs a purchasing power of ZMK 686,350 (about US\$122) per month to meet its basic food and nutritional requirements. Given that 33 percent of the urban population earn less than ZMK500,000 a month (according to a comprehensive urban vulnerability assessment<sup>8</sup>), this shows that a substantial proportion of the population is facing severe food insecurity. Affected households are employing several coping mechanisms to mitigate the current economic slowdown. Some are venturing into farming but poor soils, lack of capital for inputs and the risk from wild animals are hampering their progress. Others are relying on extended family support, which is likely to be unsustainable. Many see no option but to reduce expenses by cutting the number of meals, consuming less nutritious but cheaper food commodities, spending less on healthcare and schooling, and selling household assets. Communities pointed out that negative coping strategies such as theft and prostitution are also on the rise.

<sup>&</sup>lt;sup>1</sup> WFP "High Food Prices in Eastern, Central and Southern Africa: Assessing Impact and Tracking Progress Towards Meeting the CFA Objectives" Sithabiso Gandure, December 2008.

<sup>&</sup>lt;sup>2</sup> Source: FAO Price tool based on Zambia Central Statistical Office. Price in Local currency (Kwacha) in real terms.

<sup>&</sup>lt;sup>3</sup> WFP Food Security Analysis Branch (OMXF). "Effects of the Financial Crisis on Vulnerable Households in Zambia". Draft report. May 2009.

<sup>&</sup>lt;sup>4</sup> CSO data and 2008 Inter-Agency Urban Vulnerability Assessment.

<sup>&</sup>lt;sup>5</sup> World Bank, "Livelihoods, Poverty and Vulnerability in Urban Zambia: Assessment of situations, coping mechanisms and constraints". June 2005.

<sup>&</sup>lt;sup>6</sup> Jesuit Centre for Theological Reflection, "Cost of food basket for urban dwellers". October 2008.

<sup>&</sup>lt;sup>7</sup> Zambian Kwacha (ZMK) 5645 = US\$1 (United Nations exchange rate, May 2009).

<sup>&</sup>lt;sup>8</sup> Inter-Agency Urban Vulnerability Assessment, Government of Zambia, Vulnerability Assessment Committee, WFP. October 2008. Lusaka, Zambia.

<sup>&</sup>lt;sup>9</sup> WFP Food Security Analysis Branch (OMXF). "Effects of the Financial Crisis on Vulnerable Households in Zambia". Draft report. May 2009.

- 9. Recent reports from the Ministry of Health (MoH) indicate an increased number of malnutrition cases admitted at hospitals. The nutrition emergency task force noted in late-2009 an unusually high level of severe acute malnutrition (SAM) admissions at the University Teaching Hospital (UTH)<sup>10</sup> between 17 and 20 children per day. This problem has been exacerbated by a shortage of drugs, food and personnel to attend to sick children in the hospital. The 26 clinics around Lusaka have recorded similar increases in admissions for less complicated cases (critical cases are usually referred to UTH). Acute malnutrition cases have been associated with poverty, diarrhoea, poor sanitation, and HIV/AIDS. A recent survey among malnourished children admitted to various hospitals in Zambia indicates an average increase of 70 percent in SAM between 2007 and 2008, reaching 2.3 percent. Global acute malnutrition (GAM) reached 7.7 percent, an increase of 2.1 percentage points from June 2007. The increases are most dramatic in the highly urbanized districts of Lusaka, Mansa, Kasama, Ndola, Mongu and Solwezi.
- 10. In 2008, the Government established an inter-ministerial task force which developed a high food price (HFP) action plan along two main strategies: a) measures aimed at stimulating economic and agricultural growth, and b) measures to reinforce social protection. Within this national framework and the United Nations response plan, the WFP country office has been focusing its emergency response strategy on an expansion of 'livelihood' and 'social protection' activities in urban and peri-urban areas, in addition to strengthening resilience of the vulnerable populations through infrastructure development and partnerships.

#### Purpose of extension and budget increase

- 11. As part of the joint United Nations response, WFP prepared a 'Sustainable Programme for Livelihoods and Solutions for Hunger' (SPLASH) strategy that embraces food vouchers as a mechanism to address hunger among increasingly vulnerable urban populations and support their coping capacity. The Government and the donor community have both commended WFP for this innovative approach. In January 2009, the Office of the Vice President requested WFP to initiate a pilot food voucher programme in eight urban and periurban areas with the highest number of malnourished children in order to meet the food needs of the vulnerable households affected by high food prices. Availability of food in these areas is not the limiting factor: the problem is that most vulnerable households lack the economic means to access food. The use of food vouchers gives greater flexibility to the beneficiaries in collecting food, injects resources into the local economy and supports local markets in the highly-affected areas without distorting urban food availability and local retailers. A cost-benefit analysis carried out by the WFP country office indicates a cost saving of over 30 percent through vouchers versus traditional food distributions, enabling WFP to reach more beneficiaries.
- 12. This budget revision will enable WFP to move forward with a food voucher pilot to meet the urgent food needs of an additional 177,300 people in urban and peri-urban areas affected by high food prices and the economic downturn in Zambia. Food assistance will be channelled through vouchers to be redeemed at existing local retail outlets. Emphasis will be put on building national capacity for social safety nets.
- 13. The SPLASH strategy has several components to be implemented in a phased manner in the cities of Lusaka, Ndola, Livingstone, Kafue and Mongu. Other districts will be added in consultation with the Government once needs are confirmed and additional resources become available. The sub-components of SPLASH are as follows:
  - a. Support to households with malnourished children: The recent trend in rising malnutrition is considered to be a combination of several factors, including the inability of households to buy sufficient basic food to meet nutritional needs and the reduced time devoted to child care due to disproportionate time spent on wage earning. A response to rising malnutrition is being coordinated by various stakeholders, including the Office of the Vice President through the Disaster Mitigation and Management Unit (DMMU), the MoH, WFP, United Nations Children's Fund (UNICEF) and other agencies. As part of a collaborative effort, WFP will target 15,000 malnourished children and their family members (totalling 88,800 people for 2009-10), providing them with a monthly voucher allocation to meet their basic food needs. The food vouchers will be distributed through families of malnourished children attending child health clinics for a period of 4 months and will be redeemed at participating local retail outlets.

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<sup>&</sup>lt;sup>10</sup> The University Teaching Hospital (UTH) is the central referral hospital in Lusaka.

- b. Food vouchers for attendance at HIV/AIDS and TB Treatment Centres: 3,000 patients attending HIV/AIDS and tuberculosis (TB) centres and their family members (a total of 18,000 beneficiaries) will receive WFP assistance. In addition to providing nutritional support during treatment, food assistance to patients attending HIV/AIDS and TB centres has proven to increase adherence to treatment and contribute to breaking the deepening cycle of poverty often found when one member of an already poor household falls ill. By providing food assistance during treatment, a destitute household can become productive usually within one year of receiving support and care. WFP support will be conditional on the person being food-insecure (as determined by household food security assessments) and participating in the treatment protocol. The food vouchers will be distributed through the health facility and will be redeemed at participating local retail outlets. WFP assistance will be provided for 12 months under HIV/AIDS interventions, and 8 months under TB interventions.
- c. Food vouchers for improved urban sanitation: The Lusaka city council has been overstretched to respond to repeated outbreaks of cholera, diarrhoea and malaria in peri-urban and low-lying areas, especially during the rainy season. The DMMU, the Lusaka city council, the Ministry of Works and Supplies and UNICEF have jointly planned to launch an urban sanitation project prior to the rainy-season as a disaster mitigation and preparedness strategy. This initiative will target peri-urban populations that have been adversely affected by reduced income opportunities, high food prices and poor sanitation conditions that prevail in the low-lying areas. As part of this collaborative effort, WFP will provide voucher-for-work to targeted, food-insecure people engaged in DMMU-supported risk-reduction activities such as drainage canal digging, garbage collection and disposal, as well as water delivery systems. The selection of the most vulnerable households in the targeted peri-urban communities will be undertaken in close consultation with local city councils and the MCDSS.
- d. **Food vouchers for livelihoods support:** Supporting income-generating activities (such as urban gardens) will provide opportunities to sustain and improve livelihoods of the urban population facing rising unemployment and food insecurity. Hence, in partnership with the Food and Agriculture Organization of the United Nations (FAO), the International Fund for Agricultural Development (IFAD) and the local government, WFP will give food vouchers to targeted periurban households in exchange for work provided to establish urban gardens. WFP vouchers will support the beneficiaries' food basket diversification, while increasing income from the sale of the produce. The vulnerable households will be selected using the social protection policy selection criteria developed by the MCDSS.

A total of 70,500 individuals will be assisted though food vouchers for improved urban sanitation and livelihoods support.

- e. Capacity-building in support of the Government's Social Protection: Within the United Nations Development Assistance Framework (UNDAF), WFP will build the capacity of DMMU in the Office of the Vice President to scale-up safety net interventions directed at vulnerable populations. This is high on the United Nations Joint Programme agenda for social protection. With regard to household/beneficiary-level targeting, capacity will be built on the use of the 'livelihood approach' in identifying low capacity households defined as those that are unable to cope with an identified hazard. To this effect, WFP will complement existing government mechanisms for vulnerability assessments and livelihood screening tools. Periodic backstopping visits will be carried out to ensure adherence to agreed and appropriate beneficiary targeting methods.
- 14. Zambia's national social protection strategy, which covers the period 2007-2012, was built on Zambia's Fifth National Development Plan (FNDP) which outlines the Government's vision for poverty reduction and growth. The FNDP sets out two key objectives for social protection: ensuring that the livelihoods of poor households are secure enough to meet basic needs; and protecting poor households from the worst impacts of risks and shocks. The plan makes it clear that social protection is not only about relief, but also about encouraging growth by enhancing household engagement in the productive economy. Over the period of this strategy, it is expected that 200,000 households will benefit from a national system of predictable transfers. An initial budget has already been included in the national budget. For implementation, the

MCDSS and cooperating partners have formed a Technical Working Group on Social Assistance (TWG-SA). This group is chaired by the Department of Social Welfare and coordinates all social assistance interventions in Zambia. The main focus of this group has been the piloting of social cash transfers and it has developed an implementation framework for scaling-up the social cash transfer scheme. The implementation framework outlines the institutional setup, the scaling-up principles, a timetable for national roll-out, the budgetary requirements and pooled funding mechanism, a lesson-learning agenda, and a strategy for capacity building and advocacy. It is anticipated that the lessons learned from the implementation of SPLASH will enable the Government to expand its programme over time to include and fund similar food-based safety net programmes.

15. The beneficiary breakdown is provided in tables 1 and 2:

Table 1: Beneficiary number by component and year (original and additional)

Component	Annual beneficiary number				Total beneficiaries			
	20	08	2009		2010		2008-2010	
	Original	Addition	Original	Addition	Original	Addition	Original	Addition
FFA/FFT <sup>a</sup>	233,600	0	233,600	56,400	116,800	14,100	233,600	70,500
Support to households of malnourished children <sup>b</sup>	0	0	0	71,040	0	17,760	0	88,800
Supplementary Feeding <sup>b</sup>	3,000	0	4,500	0	1,500	0	9,000	0
HIV/AIDS&TB <sup>c</sup>	0	0	0	18,000	0	0	0	18,000
Total	236,600	0	238,100	145,440	118,300	31,860	242,600	177,300

Table 2: Beneficiary number by component and gender

Component	Total beneficiaries 2008-2010			Gender breakdown		
	Original	Addition	Revised	Male	Female	
FFA/FFT <sup>a</sup>	233,600	70,500	304,100	149,013	155,087	
Support to households with malnourished children <sup>b</sup>	0	88,800	88,800	43,512	45,288	
Supplementary Feeding <sup>b</sup>	9,000	0	9,000	4,500	4,500	
HIV/AIDS&TB <sup>c</sup>	0	18,000	18,000	8,820	9,180	
Total	242,600	177,300	419,900	205,845	214,055	

<sup>&</sup>lt;sup>a</sup> FFA/FFT includes "food vouchers for improved urban sanitation" and "food vouchers for livelihood support".

<sup>&</sup>lt;sup>b</sup> "Support to households with malnourished children" is linked to "supplementary feeding" for children attending health clinics.

<sup>&</sup>lt;sup>c</sup> Beneficiaries comprise 3,000 HIV/AIDs and TB patients and 15,000 family members.

- 16. Government Commitment and Partnerships: SPLASH has been conceived in partnership with several government bodies at the national and district levels. Within the Government, the National DMMU under the Office of the Vice President, has already been engaged in high food price response activities and has specifically requested WFP to incorporate food voucher transfers within its programme as a means to mitigate the impact on the food-insecure population. The involvement of the MoH is also instrumental in documenting evidence (from nutritional care wards) of increased child malnutrition and mortality. Given its role in implementing the safety nets scheme (a new form of social protection strategy in Zambia), the Ministry of Community Development and Social Services is also actively involved.
- 17. The proposed activities will also be implemented in partnership with several non-governmental organizations (NGOs), including Programme for Urban Self Help (PUSH), Alliance for Sustainable Development (ASD), OXFAM (GB) and World Vision International (WVI). WVI has been engaged in similar collaborations with WFP in Malawi and Lesotho, and has extensive and positive experience in managing voucher programmes. OXFAM has previously implemented cash transfers in Zambia funded by the Department for International Development (DFID), and continues to be actively engaged in social protection programmes. The World Bank, FAO, IFAD and UNICEF are involved through the coordinated response of the United Nations Country Team and have provided their expertise and strengths in the social protection and agriculture sectors.
- 18. **Monitoring and Evaluation:** The establishment of a robust monitoring and evaluation system will be instrumental in ensuring the effectiveness, accountability and success of the food voucher programme. Efforts will be made to utilize national monitoring systems and strengthen them where required. Detailed monitoring formats have been prepared and will enable WFP to report on standard corporate indicators and project-specific indicators related to the desired outcomes (see Logical Framework in Annex II).
- 19. In addition, baseline and final evaluations for each component, focusing on both beneficiaries and retail outlets, will be undertaken in collaboration with OXFAM and WVI. The evaluations will assess the impact of the food vouchers on the beneficiary households and local markets, report on achievements and document the lessons learned.

#### FOOD REQUIREMENTS

- 20. The food vouchers will total US\$2.62 million and will allow beneficiaries to access an estimated 3,949 mt of food commodities through retail outlets. Food vouchers will be distributed on a monthly basis and redeemable at pre-determined local retail outlets. These vouchers have been conceived as a minimum safety-net package for households in this time of crisis.
- 21. Beneficiary households will receive a monthly voucher equivalent to US\$20, sufficient to meet approximately 30 percent of the monthly food needs of a six-person household. This voucher is intended to supplement other income sources for food consumption. Vouchers will be used to purchase 25 kg of maize meal, 2 kg of pulses and 750 ml of vegetable oil at participating retail stores. The cash value of the voucher was determined in close consultation with the Government, implementing partners and donors. It is based on the national social protection policy and programmes but is slightly higher than the national cash transfer values due to increased food prices.
- 22. The package will also include a bar of soap to encourage basic hygiene and sanitation. All SPLASH activities will include a component of nutrition health education, including elements of basic personal hygiene and sanitation (designed in partnership with UNICEF).

## RECOMMENDATION OF THE EXECUTIVE DIRECTOR

* *	,623,953 in food vouchers (cash-in-lieu of food commodities in a budget increase of US\$3,358,583 for PRRO 10594.0 is approval.
Approved by:	
Josette Sheeran Executive Director, United Nations World Food Programme	Date

BUDGET INCREASE COST BREAKDOWN					
	Quantity (mt)	Average Cost per Ton	Value (US dollars)		
WFP COSTS					
A. Direct operational costs					
Commodity <sup>11</sup>					
- Cash in lieu of food	3,949	664.46	2,623,953		
Total commodities	3,949		2,623,953		
External transport					
Landside transport					
Subtotal for ITSH					
Total LTSH					
Other direct operational costs					
Total direct operational costs					
B. Direct support costs (see Annex II for details)					
Total direct support costs			247,375		
C. Indirect support costs (7 percent of total direct costs)			219,720		
TOTAL WFP COSTS			3,358,583		

This is a notional food basket used for budgeting and approval purposes. The precise mix and actual quantities of commodities to be supplied to the project, as in all WFP-assisted projects, may vary over time depending on the availability of commodities to WFP and domestically within the recipient country.

## ANNEX IB

DIRECT SUPPORT REQUIREMENTS (US\$)			
Staff			
International professional staff	-		
National general service staff	115,375		
Temporary assistance	-		
Overtime	10,000		
Staff duty travel	35,000		
Staff training and development	6,000		
Subtotal	166,375		
Office expenses and other recurrent costs			
Rental of facility	-		
Utilities (general)	8,000		
Office supplies	13,000		
Communication and IT services	2,000		
Insurance	3,000		
Equipment repair and maintenance	10,000		
Vehicle maintenance and running cost	11,000		
Other office expenses	11,000		
United Nations Organizations Services	-		
Subtotal	58,000		
Equipment and other fixed costs			
Furniture tools and equipment	10,000		
Vehicles	13,000		
TC/IT equipment	-		
Subtotal	23,000		
TOTAL DIRECT SUPPORT COSTS	247,375		

## ANNEX II – LOGICAL FRAMEWORK SUMMARY FOR PRRO 10594 BR 1: "Response to Natural Disasters and Economic Shocks"

Results-Chain (Logic Model)	Performance Indicators	Risks, Assumptions			
WFP STRATEGIC OBJECTIVE 3: RESTORE AND REBUILD LIVES AND LIVELIHOODS IN POST-CONFLICT, POST-DISASTER OR TRANSITION SITUATIONS					
Outcome 1: Adequate food consumption over assistance period for targeted households.	<ul> <li>Household food consumption score greater than 35/42 for targeted households</li> <li>Household expenditure allocated to food (&lt;70 percent).</li> </ul>	<ul> <li>Viability of markets.</li> <li>Complementarities of other social safety net programmes by other partners (UNICEF, UNDP, Government).</li> <li>Appropriate M&amp;E systems and feedback mechanisms in place.</li> <li>Funding support from donors.</li> </ul>			
Output 1: Vouchers, food and non-food items distributed in sufficient quantity and quality to targeted households.	<ul> <li>Number of food vouchers issued.</li> <li>Mt of food distributed through food vouchers, by type, as percent of planned distribution.</li> <li>Number of women, men, girls and boys receiving food and non-food items, by category and as percent of planned figures.</li> <li>Quantity of non-food items distributed, by type, as percent of planned distribution.</li> <li>Number of households consuming increased number of meals, with diversity in diet per day.</li> <li>Number of meals children &lt;5 years eat in a day.</li> <li>Proportion of 0-6 month old babies that are exclusively breastfed. (&gt;80 percent).</li> <li>6-12 month olds receiving complementary foods (&gt;80 percent).</li> </ul>	<ul> <li>Viability of markets.</li> <li>Stable price of food basket.</li> <li>Availability of food basket in shops.</li> <li>Fraudulent free voucher system.</li> <li>Women avail themselves to the demonstrations.</li> </ul>			

# WFP STRATEGIC OBJECTIVE 3: RESTORE AND REBUILD LIVES AND LIVELIHOODS IN POST-CONFLICT, POST-DISASTER OR TRANSITION SITUATIONS

Goal:

> To support the re-establishment of the livelihoods and food and nutrition security of communities and families affected by shocks

Outcome 2: Targeted communities have increased access to assets in fragile, transition situations.	> Community asset score.	
Output 2.1: Build or restored sanitation by targeted communities.	<ul> <li>Number of drainage systems cleaned and repaired.</li> <li>Number of new drains created.</li> <li>Number of garbage collection and disposal centres created.</li> <li>Number of training courses about good water sanitation practices conducted.</li> </ul>	<ul> <li>Women have equal opportunity to participate.</li> <li>Community members are encouraged to fully participate.</li> <li>Local city council and UNICEF provide the requisite training and support.</li> <li>Heavy machinery and technical support made available by ministry of works and supplies.</li> <li>Ministry of Works and Supply and local administration provide the necessary support and guidance.</li> </ul>
Output 2.2: Cooking demonstrations and nutrition childcare messages disseminated to mothers (including those from targeted households) at the health centres.	<ul> <li>Number of cooking and nutrition care. dissemination meetings actual vs. planned.</li> <li>Number of households implementing selected taught.</li> <li>Number of households with improved feeding practices using local foods.</li> </ul>	<ul> <li>Women avail themselves to the demonstrations.</li> <li>Health centres provide an environment conducive to conduct the cooking demonstrations.</li> </ul>
Output 2.3: Households encouraged to undertake urban gardening.	<ul> <li>Number of households engaged in vegetable and fruit production.</li> <li>Number of households able to sell marketable surplus.</li> <li>Number of households with diversified diets.</li> </ul>	<ul> <li>Seeds and tools for gardening available.</li> <li>Households are willing to undertake urban/periurban gardening activities.</li> <li>Technical support available from FAO, MACO and other partners (such as the Government of Cuba).</li> </ul>

WFP STRATEGIC OBJECTIVE 4 : REDUCE CHRONIC	HUNGER AND UNDERNUTRITION				
Outcome 3.1: Increased survival of adults and children with HIV after 6 and 12 months of anti-retroviral therapy (ART).  Outcome 3.2: Improved success of TB treatment for targeted cases.	<ul> <li>Percent of adults and children with HIV known to be on treatment 6 and 12 months after initiation of ART.</li> <li>Percent of TB cases registered under DOTS programme in a given year, that have successfully completed treatment.</li> </ul>	<ul> <li>Operational health centres readily accessible to beneficiaries.</li> <li>Beneficiaries attend health centres regularly.</li> <li>Health centres provide a conducive environment to conduct the cooking demonstrations.</li> <li>Health facilities provide ARTs and do not have stock-outs.</li> <li>Patients on ART adhere to treatment regime.</li> <li>Health facilities provide TB and do not have stock outs</li> <li>Patients on TB adhere to treatment regime.</li> </ul>			
Output 3.1: Food and non-food items distributed in sufficient quantity and quality to targeted women, men, girls and boys under secure conditions.  Output 3.2: Information, Education and Communication (IEC) materials availed and disseminated.	<ul> <li>Number of food vouchers issued.</li> <li>Mt of food distributed through food vouchers, by type, as percent of planned distribution.</li> <li>Number of women, men, girls and boys receiving food and non-food items, by category and as percent of planned figures</li> <li>Quantity of non-food items distributed, by type, as percent of planned distribution.</li> <li>Number of IEC materials designed and printed.</li> </ul>	<ul> <li>Viability of markets.</li> <li>Stable price of food basket.</li> <li>Availability of food basket in shops.</li> <li>Fraudulent free voucher system.</li> <li>Women avail themselves to the demonstrations</li> </ul> Health centres and workers properly display IEC materials			
Number of IEC materials dispatched to the various health centres. WFP STRATEGIC OBJECTIVE FIVE: STRENGTHEN THE CAPACITIES OF COUNTRIES TO REDUCE HUNGER, INCLUDING THROUGH HAND-OVER STRATEGIES. Outcome 4.1: Increased and strengthened marketing and distribution systems. Food distributed through the voucher > Retail outlets are functional.					
Output 4.1: Food distributed through retail outlets.	<ul> <li>system as percent of WFP food distributed in-country.</li> <li>Tonnage of food distributed by type.</li> <li>Volume of sales before and after the introduction of voucher system.</li> </ul>	> Retail outlets are willing to participate. > Retail outlets have sufficient stocks. > Retail outlets are financially sound.			

Outcome 4.2: Progress made towards nationally owned hunger solutions.	<ul> <li>Inclusion of Food safety net through food vouchers in the national Social protection strategy.</li> <li>Hand-over agreement implemented according to strategy.</li> </ul>	Government has additional funds and commitment to expand safety net and social protection interventions for the incapacitated and low capacity households.
Output 4.2: Lessons learned documented.	<ul> <li>Appropriate lessons learned documented.</li> <li>Vulnerable households targeted through already existing government institutions and mechanisms.</li> <li>Identification of households that qualify to graduate off the programme undertaken increasingly through existing government structures and mechanisms.</li> </ul>	➤ Viable and flexible monitoring system in place.
Output 4.3: National Social protection strategy revised.	United Nations contributes to the revised strategy and includes food safety nets using food vouchers to complement cash voucher programmes.	Government willing to review and revise the Social Protection Strategy document.
Output 4.4: Capacity awareness developed through WFP-organized actions / training.	National plans of action that include budget allocation for the implementation of food voucher systems.	Government has additional funds and commitment to expand safety net and social protection interventions for the incapacitated and low capacity households.

### **ACRONYMS**

ART anti-retroviral therapy

ASD Alliance for Sustainable Development

CSO Central Statistics Office

DMMU Disaster Management and Mitigation Unit

DOTS directly observed treatment with short-course chemotherapy

FAO Food Agriculture Organization of the United Nations

FDI foreign direct investment

FNDP Fifth National Development Plan

GAM global acute malnutrition

HFP high food price

HIV/AIDS human immunodeficiency virus/acquired immune deficiency syndrome

IEC information, education and communication

Kcal kilocalorie

M&E Monitoring and Evaluation

MACO Ministry of Agriculture and Cooperatives

MCDSS Ministry of Community Development and Social Services

MUAC mid-upper arm circumference

NDMP National Disaster Management Policy NGO non-governmental organization

NVAC National Vulnerability Assessment Committee

PRRO protracted relief and recovery operation

PUSH Programme for Urban Self Help

SAM severe acute malnutrition

TWG-SA Technical Working Group on Social Assistance
UNDAF United Nations Development Assistance Framework

UNICEF United Nations Children's Fund VAC Vulnerability Assessment Committee

WFP World Food Programme