

## BUDGET INCREASE TO PROTRACTED RELIEF AND RECOVERY OPERATION:

### TANZANIA PRRO 200029 Budget Revision 02

#### Assistance to Refugees and Vulnerable Households among Host Populations in Northwestern Tanzania

	Cost (United States dollars)		Revised budget
	Current budget	Increase	
Food cost	12,751,953	7,465,719	20,217,672
External transport	2,931,123	1,359,627	4,290,750
LTSH	4,569,287	2,166,661	6,735,948
ODOC	379,447	83,138	462,585
DSC	4,421,795	750,196	5,171,991
ISC (7%)	1,753,752	827,774	2,581,526
<b>Total cost to WFP</b>	<b>26,807,357</b>	<b>12,653,115</b>	<b>39,460,472</b>

#### NATURE OF THE INCREASE

1. A budget revision to the Tanzania protracted relief and recovery operation (PRRO) Assistance to Refugees and Vulnerable Households among Host Populations in Northwestern Tanzania (200029) is proposed to assist an additional 41,000 beneficiaries from January to December 2011. The PRRO had planned to target 60,000 refugees for 2011, assuming a decline in the refugee population over the course of 2010. However, due to very low repatriation, the number of refugees has remained close to 100,000. For 2011, WFP is now planning to reach 100,000 refugees and 9,430 vulnerable people among the host population.
2. More specifically, this budget revision will:
  - provide an additional 13,002 mt of food valued at US\$7.5 million;
  - provide additional associated costs of US\$4.4 million consisting of external transport, landside transport, storage and handling (LTSH), other direct operational costs (ODOC) and direct support costs (DSC); and
  - provide additional indirect support costs (ISC) of US\$827,774.

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## JUSTIFICATION FOR BUDGET INCREASE

### Summary of Existing Project Activities

3. The overall goal of this PRRO, which runs from January 2010 to December 2011, is to improve food security and nutrition among refugees and other vulnerable groups in the host population, as well as to protect the livelihoods of food-insecure households within the host population. The specific objectives of this PRRO are to:
  - Stabilize the mortality rate and acute malnutrition among children under 5 in refugee communities (WFP Strategic Objective 1, “Save lives and protect livelihoods in emergencies”).
  - Improve food access among refugees through general food distributions (Strategic Objective 1).
  - Increase access to assets, especially for women, and strengthen coping capacities through training and asset creation activities among the vulnerable host populations (Strategic Objective 3, “Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations”).
  - Assist out-of-school children in the host communities to attend school (Strategic Objective 3).
  - Improve nutritional status among targeted pregnant and lactating women and other vulnerable groups (Strategic Objective 4, “Reduce chronic hunger and undernutrition”).
4. This operation provides food assistance to refugees through general food distributions (GFD). Nutrition interventions benefit both refugees and host populations surrounding the refugee camps. These include a supplementary feeding programme (SuFP) for moderately malnourished children under 5, pregnant and lactating women, tuberculosis (TB) patients, and women enrolled in a prevention of mother to child transmission (PMTCT) programme. WFP will also provide food to patients in hospitals in the camps (in-patient department - IPD). Limited support is provided to host communities through school feeding (FFE),<sup>1</sup> food for assets (FFA), food for training (FFT), assistance to food-insecure people living with HIV (PLHIV), and vulnerable group feeding (VGF) for destitute individuals.
5. During 2010, WFP provided general food rations to a peak of 99,200 refugees (36,800 from Burundi and 62,400 from the Democratic Republic of Congo).<sup>2</sup> WFP also assisted 8,800 refugees and 600 people among the host population through camp-based health facilities (supplementary feeding and in-patient feeding). About 5,600 food-insecure and vulnerable people among the host population were supported through safety net activities (FFE, FFA, FFT, HIV, VGF).

### Conclusion and Recommendations of the Re-Assessment

6. The 2009 beneficiary contact monitoring (BCM) found that 98 percent of the refugees depend almost entirely on food aid.<sup>3</sup> A community and household surveillance (CHS) exercise conducted in Nyarugusu camp in 2010 noted that food aid represents up to three quarters of the food consumed by

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<sup>1</sup> The Complementary Basic Education in Tanzania (COBET) schools follow a non-formal education curriculum and were originally supported by UNICEF through a pilot programme. The districts have taken over the schools, which now have similar aims as all other schools in the country – increased enrolment, improved attendance and completion rates and reduced drop outs.

<sup>2</sup> Figure include asylum seekers in reception centres not yet included in the UNHCR database.

<sup>3</sup> WFP./UNHCR, WVT and TRCS Report North-Western Tanzania Refugee Operation, Beneficiary Contact Monitoring (BCM) survey, 8-9 July 2009.

the refugees.<sup>4</sup> External support, in terms of money, clothing, food and agricultural inputs, was found to be insignificant. The CHS exercise concluded that food assistance should continue at the current level and recommended enabling greater access to other livelihood alternatives. The nutrition survey led by the United Children's Fund (UNICEF) in September 2008<sup>5</sup> showed improvements in the nutrition situation, with the prevalence of global acute malnutrition decreasing from 3.1 percent in 2006 to 1.9 percent in 2008 and no severe acute malnutrition. However, the prevalence of underweight remains at 19 percent and stunting at 36 percent. The prevalence of low birthweight is 7 percent. The nutrition survey also indicated a prevalence of anaemia among children under 5 of 21 percent and women of reproductive age of 7 percent. Another nutrition survey was carried out among the refugee population in September 2010 which further investigated the root causes of the high levels of stunting.<sup>6</sup>

7. In November 2010, a joint assessment mission (JAM) was undertaken by the Office of the United Nations High Commissioner for Refugees (UNHCR), UNICEF and WFP in refugee camps in Kasulu district. The purpose of the JAM was to reassess the food and nutritional needs of the refugees. Preliminary results have not revealed significant changes in refugee food requirements and are consistent with the information obtained through close monitoring over the past year. Once finalised, the JAM recommendations and those from the most recent nutrition survey will be reflected in this PRRO, with a budget revision if necessary.
8. The Mtabila camp (hosting Burundian refugees) was officially closed on 30 June 2009; however, as the Burundian refugees have been reluctant to repatriate and remained in the camp, the Government of Tanzania has allowed the United Nations agencies, including WFP, to provide a minimum humanitarian assistance (basic services, including food) in the Mtabila camp.<sup>7</sup> Based on repatriation trends in 2008 and 2009 and the Government's actions to consolidate and close camps, the PRRO planning figures anticipated a decline in the refugee population from 90,000 to 60,000 through 2010. However, the repatriation process has slowed down since January 2010, with only 528 Burundian refugees repatriated and no repatriation to the Democratic Republic of the Congo (DRC) as of October 2010. The number of refugees consistently remained higher than planned between January and September 2010, and averaged 98,900 refugees per month.
9. Refugees are reluctant to return to their country of origin because of land access issues and political uncertainty. Since the end of August, the political situation in Burundi has remained tense. Many political parties have withdrawn from the political process and some opposition leaders have left Burundi. The situation in eastern DRC continues to be volatile and few Congolese refugees are expected to return home in 2011.
10. A total of 38,000 refugees from Burundi and 60,000 refugees from DRC are currently in Tanzania.<sup>8</sup> Very low repatriation is envisaged in 2011 and will not significantly alter the overall number of refugees. While UNHCR is in discussion with the governments of Tanzania and Burundi to find durable solutions, the Government of Tanzania recognizes the importance of humanitarian support to the refugees and the importance of dignified voluntary return.

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<sup>4</sup> WFP. Draft NW Tanzania Refugee Camps, Community and Household Surveillance (CHS), May 2010.

<sup>5</sup> UNICEF, UNHCR, WFP and health agencies in North-Western Tanzania Nutrition Survey Report, 2008.

<sup>6</sup> Data is currently being analyzed and the final report is under preparation at the time of the budget revision submission.

<sup>7</sup> Lugufu camp was officially closed in September 2009

<sup>8</sup> UNHCR, 1 October 2010. This figure does not include asylum seekers in reception centres as they are not yet included in the UNHCR database.

## Purpose of Budget Increase

11. The PRRO initially planned to provide food assistance to 90,000 - 60,000 refugees and over 8,000 vulnerable people among the host population near to the camps for 2010-11. This budget revision will increase the food requirements and will enable WFP to continue to address the needs of the refugees (now estimated at 100,000) and the vulnerable host communities (over 9,000 people) from January to December 2011.

<b>Activity</b>	<b>Category of beneficiaries</b>	<b>Current 2010</b>	<b>Current 2011</b>	<b>Increase 2011</b>	<b>Revised 2011**</b>
GFD	Burundian refugees	44,100	8,500	29,000	37,500
	DRC refugees	45,900	51,500	11,000	62,500
SuFP	Refugees				
	PLW/PMTCT	3,730	1,180	2,550	3,730
	Children under 5	480	150	330	480
	PLHIV	640	202	438	640
	TB	262	82	180	262
	Host populations				
	PLW/PMTCT	420	140	280	420
	Children under 5	50	10	40	50
	PLHIV	70	20	50	70
	TB	30	10	20	30
IPD	Refugees	1,040	320	720	1,040
	Host populations	260	80	180	260
HBC*/HIV	Host populations	2,500	3,700	0	3,700
FFA/FFT	Host populations	2,000	2,000	0	2,000
FFE (COBET)	Host populations	2,200	2,200	0	2,200
VGf	Host populations	700	700	0	700
<b>Total</b>		<b>98,230</b>	<b>68,860</b>	<b>40,570</b>	<b>109,430</b>

\*HBC: home-based care

\*\* These are planning figures based on assumptions of return and arrivals and births in 2011.

12. The implementation strategy in 2011 will remain the same as outlined in the original PRRO 200029 document. Beneficiaries will continue to receive food assistance through the modalities outlined above and the ration levels will remain the same as in the project document. A food basket composed of cereals, corn-soya blend (CSB), pulses, vegetable oil and salt provides the refugees with their main food source, meeting the minimum dietary requirement of 2,100 kcal per person per day.

## FOOD REQUIREMENTS

13. The budget revision will result in an increase of the food requirements as a result of a larger number of refugees than initially foreseen for 2011. The additional and revised food requirements are presented below in table 2 and in Annex 1A.

Activity	Cereals	Pulses	Veg.Oil	CSB	Iodized salt	Total
GFD*	14,400	4320	720	1,440	180	21,060
SuFP	69	0	28	239	0	336
IPD	95	48	14	95	2	254
HBC/HIV	540	108	27	54	7	736
FFA/FFT	75	11	6	0	0	92
FFE (COBET)	0	0	9	51	0	60
VGf	102	20	5	10	1	138
<b>Total</b>	<b>15,281</b>	<b>4,507</b>	<b>809</b>	<b>1,889</b>	<b>190</b>	<b>22,676</b>

\* The GFD ration for the refugees for the month of December 2010 will include 133g per person per day of dates due to an in-kind contribution of 400 mt of dates which will contribute to the energy content of the ration for one month.

Activity	Current	Increase	Revised
GFD	25,009	12,597	37,606
SuFP	441	229	670
IPD	332	176	508
HBC/HIV	1,233		1,233
FFA/FFT	184		184
FFE (COBET)	120		120
VGf	278		278
<b>Total</b>	<b>27,597</b>	<b>13,002</b>	<b>40,599</b>

## APPROVAL

Approved by:

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 Josette Sheeran  
 Executive Director, WFP

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 Date

<b>BUDGET INCREASE COST BREAKDOWN</b>			
Food <sup>9</sup>	Quantity (mt)	Value (US\$)	Value (US\$)
Cereals	8,452.47	2,927,064	
Pulses	2,534.85	2,176,882	
Oil and fats	445.56	618,470	
Mixed and blended food	1,063.40	638,445	
Others (salt and dates)	506.08	1,104,858	
Total food	<b>13,002.36</b>	<b>7,465,719</b>	
Cash transfers			
Voucher transfers			
Subtotal food and transfers			7,465,719
External transport			1,359,627
Landside transport, storage and handling			2,166,661
Other direct operational costs			83,138
Direct support costs <sup>10</sup> (see Annex I-B details)			750,196
		Total direct project costs	<b>11,825,341</b>
		Indirect support costs (7%) <sup>11</sup>	<b>827,774</b>
		<b>TOTAL WFP COSTS</b>	<b>12,653,115</b>

<sup>9</sup> This is a notional food basket for budgeting and approval. The contents may vary.

<sup>10</sup> Indicative figure for information purposes. The direct support costs allotment is reviewed annually.

<sup>11</sup> The indirect support cost rate may be amended by the Board during the project.

<b>DIRECT SUPPORT REQUIREMENTS (US\$)</b>	
<b>Staff and staff-related costs</b>	
International professional staff	313,751
International general service staff	-
Local staff - national officers	41,153
Local staff - general service	205,493
Local staff - temporary assistance	-
Local staff - overtime	-
Hazard pay and hardship allowance	-
International consultants	-
Local consultants	-
United Nations Volunteers	-
Commercial consultancy services	-
Staff duty travel	-
<b>Subtotal</b>	<b>560,396</b>
<b>Recurring expenses</b>	
Rental of facility	-
Utilities general	-
Office supplies and other consumables	5,000
Communications services	30,000
Equipment repair and maintenance	-
Vehicle running cost and maintenance	114,000
Office set-up and repairs	-
UN organization services	-
<b>Subtotal</b>	<b>149,000</b>
<b>Equipment and capital costs</b>	
Vehicle leasing	40,800
Communications equipment	-
Local security costs	-
<b>Subtotal</b>	<b>40,800</b>
<b>TOTAL DIRECT SUPPORT COSTS</b>	<b>750,196</b>

## ANNEX II SUMMARY OF LOG FRAME – TANZANIA PRRO 200029 (2010-2011)

Results-Chain (Logic Model)	Performance Indicators	Risks and Assumptions
<b>STRATEGIC OBJECTIVE (SO) 1: Save Lives and Protect Livelihoods in Emergencies</b>		
<p><b>Outcome 1.1:</b> Stabilized acute malnutrition of children under 5 in targeted refugee populations (Strategic Objective 1, Results Area/Goal 1 - save lives in emergencies and reduce acute malnutrition caused by shocks to below emergency levels).</p> <p><b>Outcome 1.2:</b> Reduced mortality rates in children under 5 and in adults in targeted refugee population (Strategic Objective 1, Results Area 1 – Prevent hunger-related deaths in targeted crisis-affected and disaster areas).</p>	<p>1.1.1 Prevalence of acute malnutrition among children under 5s in refugee populations, by gender (weight-for-height as %) (target &lt;2%).</p> <p>1.1.2 Supplementary feeding recovery rate of refugee population and host populations attending camp-based health facilities (target: &gt;70%).</p> <p>1.1.3 Supplementary feeding defaulter rate of refugee population and host populations attending camp-based health facilities (target: &lt;15%).</p> <p>1.1.4 Supplementary feeding mortality rate of refugee population and host populations attending camp-based health facilities (target: &lt;3%).</p> <p>1.2.1 Age specific mortality rate of under 5s in refugee populations (target &lt;&lt;2/10,000/day).</p> <p>1.2.2 Crude mortality rate in refugee populations (target &lt;1/10,000/day).</p>	<p>Other underlying causes of malnutrition – aggravating factors such as parasitic infections - are addressed by relevant agencies, and health services, water, sanitation and social services are available.</p>



<p><b>Output 1.1</b> Food items distributed in sufficient quantity and quality for targeted beneficiaries of GFD (women, men, girls and boys) under secure conditions.</p>	<p>1.1.1: Number of refugees (by age group and gender) receiving food assistance and as % of planned beneficiaries of GFD (target: 100% or 90,000 refugees in 2010; 100,000 refugees in 2011).</p> <p>1.1.2 Quantity of fortified foods (CSB) as percentage of planned distribution (target: 6.87%).</p> <p>1.1.3 Amount of food distributed as % of planned GFDs, by commodity (target for 2010: 100% or 16,546 mt; target for 2011: 21,060 mt) and 400 mt dates.</p> <p>1.1.4: Actual number of beneficiaries under supplementary feeding programme fed by project category, age and gender (targets: 5,682 in 2010; and 5,682 in 2011; 53.5% women, 35% children under 5, 11.5% children over 5 and adults).</p> <p>1.1.5 Actual amount of food distributed as % of planned SuFP, by commodity type. (target: 336 mt in 2010; 336 mt in 2011).</p>	<p>Food Pipeline remains healthy during the project life.</p> <p>Percent of distribution affected by pipeline breaks.</p> <p>Number of security incidents related to food distributions.</p> <p>Supplementary feeding centres have adequate medical personnel, equipment, supplements and services.</p>
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**STRATEGIC OBJECTIVE (SO) 3: Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situation**

Results- Chain (Logic Model)	Performance indicator (s)	Risks and Assumptions
<p><b>Outcome 3.1:</b> Vulnerable/host population, especially women, have increased assets and strengthened coping capacities through training and asset creation activities (Strategic Objective 3, Results Area 2 -Support the re-establishment of livelihoods and food and nutrition security of communities and families affected by shocks).</p> <p><b>Outcome 3.2:</b> Improve education opportunities for vulnerable and out-of-school children in host communities through stabilized enrolment (Strategic Objective 3, Results Area 2 - Support the re-establishment of livelihoods and food and nutrition security of communities and families affected by shocks).</p>	<p>3.1.1 Attendance rate of youths: Number of training days on which youths (boys and girls) attend skills training in WFP-supported FFT as percentage of total number of training days (target equal or &gt;90% attendance rate).</p> <p>3.1.2 Proportion of trained youths who are employed after graduating from the training (target equal or &gt;80%).</p> <p>3.1.3 Proportion of participants of FFA activities benefiting from the assets created (target equal or &gt;80%).</p> <p>3.1.4. Number of community assets created by targeted communities (target: a 40 km road constructed with support of local authority and implementing partner; 5 improved warehouses constructed with support of local authority and implementing partner).</p> <p>3.2.1 Average annual rate of change in number of girls and boys enrolled in WFP-assisted COBET centres (target: 5% increase in gross enrolment).</p> <p>3.2.2 Number of school days that girls and boys attend classes, as percent of total school days (target: 195 school days).</p> <p>3.2.3. Gender ratio: ratio of girls to boys enrolled in COBET centres (target 1:1).</p> <p>3.2.4 Pass rate for girls and boys (target: ≥50%).</p>	<p>Stable environment for communities to participate in training and in assets creation activities and benefit from skills training and assets creation activities.</p> <p>Willingness of other humanitarian actors to intervene by providing complementary support.</p>

<p><b>Output 3.1:</b> Targeted host-communities' beneficiaries participate in food-supported skills training activities.</p>	<p>3.1.1: Number of people participating in skills training as percent of planned participants (100% or 250 youth in 2010; 250 youth in 2011).</p> <p>3.1.2: Types of knowledge and skills training provided through FFT.</p> <p>3.1.3: Quantity of food distributed as percent of planned distribution (target: 100% or 15 mt in 2010 and 15 mt in 2011).</p>	<p>Availability of cooperating partners with expertise to train communities</p>
<p><b>Output 3.2:</b> Targeted host-communities' beneficiaries participate in food-supported asset creation activities.</p>	<p>3.2.1: Number of people participating in assets creation activities as percent of planned participants (100% or 1,750 youth in 2010; 1,750 youth in 2011).</p> <p>3.2.2: Types of assets created through FFA.</p> <p>3.2.3: Quantity of food distributed as percent of planned distribution (target: 100% or 77 mt in 2010 and 77 mt in 2011).</p>	<p>Availability of cooperating partners with expertise to support communities.</p>
<p><b>Output 3.3:</b> Food items distributed in sufficient quantity and quality to schoolchildren in WFP-assisted COBET schools.</p>	<p>3.3.1: Number of COBET children receiving in-school meals as percent of planned distribution (target: 100% or 2,200 children in 2010 and 2011).</p> <p>3.3.2: Quantity of food prepared for in-school meals as percent of planned distribution (target: 100% or 60 mt in 2010 and 60 mt in 2011).</p>	<p>Quality basic services provided by partners and the Government. Effective targeting criteria established and followed. Food is a sufficient incentive to children from poor families to enrol and attend school</p>
<p><b>Output 3.4:</b> School meals coverage aligned with programme of work</p>	<p>3.4.1 Number of schools assisted by WFP (target: 30 schools)</p>	

<b>STRATEGIC OBJECTIVE (SO) 4: Reduce Chronic Hunger and Undernutrition</b>		
<b>Results- Chain (Logic Model):</b>	<b>Performance indicators</b>	<b>Risks and assumptions</b>
<p><b>Outcome 4.1:</b> Improved nutritional status of targeted refugee population and host populations attending camp-based health facilities (Strategic Objective 4, Results Area/ Goal 2) (Strategic Objective 4, Results Area/ Goal 2 - increase levels of education and basic nutrition and health through food and nutrition assistance and food and nutrition tools).</p> <p><b>Outcome 4.2: Improved success of TB treatment for targeted cases in refugee community</b> (population (Strategic Objective 4, Results Area/ Goal 2) (Strategic Objective 4, Results Area/ Goal 2 - increase levels of education and basic nutrition and health through food and nutrition assistance and food and nutrition tools).</p> <p><b>Outcome 4.3:</b> Increased survival of food</p>	<p>4.1.1 Prevalence of stunted children among targeted refugee children under 2, by gender assessed using height-for-age (target: 10% reduction per year: 32% prevalence in 2010; 29% prevalence in 2011).</p> <p>4.1.2 Prevalence of underweight among children under 5s in the refugee community (target: 10% reduction per year - 16.9% prevalence in 2010; 15.2% prevalence in 2011).</p> <p>4.1.3 Prevalence of low birth weight among newborns of targeted pregnant mothers in refugee and host populations attending camp-based health facilities (target &lt; 20% of newborns with weight &lt; 2.5kg).</p> <p>4.1.4 Prevalence of iron deficiency anaemia (IDA) among targeted pregnant and lactating mothers (target: &lt;30% measured with these thresholds: pregnant mothers &lt;110 g/l; Children under 5s &lt;110g/l; lactating mothers &lt;120 g/l).</p> <p>4.2.1 Percent of TB cases registered under the directly observed treatment with short-course chemotherapy (DOTS) programme and supported through a supplementary feeding programme in a given year, that have successfully completed treatment (target: &gt;70%).</p> <p>4.3.1 Percentage of assisted home-based care beneficiaries</p>	<p>Other aggravating causes of malnutrition - malaria, intestinal worms - are addressed by relevant agencies, and health services, water, sanitation and social services are available.</p>



<b>STRATEGIC OBJECTIVE (SO) 4: Reduce Chronic Hunger and Undernutrition</b>		
<b>Results- Chain (Logic Model):</b>	<b>Performance indicators</b>	<b>Risks and assumptions</b>
insecure adults and children infected by HIV and AIDS (Strategic Objective 4; Results Area/ Goal 3 – to meet the food and nutrition needs of people living with HIV (PLHIVs).	known to be on anti-retroviral treatment (ART) as a proportion of those supposed to be on ART, 6-12 months after initiation of ART.	
<p><b>Output 4.1:</b> Targeted children, pregnant and lactating women, PLHIV and TB cases receive fortified food supplements under food- supported MCH programmes.</p> <p><b>Output 4.2:</b> Hospital in-patients and their attendants provided with meals.</p> <p><b>Output 4.3:</b> Targeted people living with HIV in targeted host-communities' households benefit from micronutrient fortified rations.</p>	<p>4.1.1: Number of malnourished women and children, PLHIV and TB cases by gender and age, receiving SuFP rations (targets: 5,682 in 2010; 5,682 in 2011).</p> <p>4.1.2: At least 90% of women able to complete pre- and post-natal visits.</p> <p>4.1.3: Actual quantity of fortified food (CSB) as percentage of planned distribution (targets for 2010: 71.4% of 334 mt); target for 2011; 71.6% of 334 mt).</p> <p>4.2.1: Number of admitted patients and attendants, by age group and gender, provided with meals (targets: 1,300 people in 2010 and 1,300 people in 2011).</p> <p>4.2.2: Quantity of food distributed by commodity as a percentage of planned distribution (target: 100% or 254 mt in 2010 and 254 mt in 2011).</p> <p>4.1.4. Number of PLHIV not receiving treatment but supported with food assistance (target 710 in 2010; 710 in 2011).</p> <p>4.3.1: Number of people living with HIV, by gender, receiving rations (targets: 2,500 people in 2010 and 3,700 in 2011).</p> <p>4.4.2: Actual quantity of micronutrient-fortified food distributed as a percentage of planned distributions (target: 7.3% of 497 mt in 2010; 7.3% of 736 mt in 2011).</p>	<p>Supplementary feeding centres have adequate medical personnel, equipment, supplements and services</p> <p>Hospitals and health facilities have adequate medical personnel, equipment, drugs and services for treatment of patients.</p> <p>Food pipeline remains healthy during the project life.</p> <p>Willingness of food insecure people living with HIV to participate in the programme. Partners are capable of providing anti-retroviral drugs and medical services to eligible people living with HIV.</p>



## ANNEX III - LIST OF ACRONYMS USED IN THE DOCUMENT

BCM	BENEFICIARY CONTACT MONITORING
CHS	COMMUNITY AND HOUSEHOLD SURVEILLANCE
COBET	COMPLEMENTARY BASIC EDUCATION IN TANZANIA
CSB	CORN SOYA BLEND
DRC	DEMOCRATIC REPUBLIC OF THE CONGO
DSC	DIRECT SUPPORT COST
FFA	FOOD FOR ASSETS
FFE	FOOD FOR EDUCATION
FFT	FOOD FOR TRAINING
GFD	GENERAL FOOD DISTRIBUTION
HBC	HOME-BASED CARE
HIV	HUMAN IMMUNODEFICIENCY VIRUS
IPD	IN-PATIENT DEPARTMENT
ISC	INDIRECT SUPPORT COSTS
JAM	JOINT ASSESSMENT MISSION
LTSH	LANDSIDE TRANSPORT, STORAGE AND HANDLING
ODOC	OTHER DIRECT OPERATIONAL COSTS
PLHIV	PEOPLE LIVING WITH HIV
PMTCT	PREVENTION OF MOTHER-TO-CHILD TRANSMISSION OF HIV
PRRO	PROTRACTED RELIEF AND RECOVERY OPERATION
SuFP	SUPPLEMENTARY FEEDING PROGRAMME
TRCS	TANZANIA RED CROSS SOCIETY
UNHCR	OFFICE OF THE UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES
UNICEF	UNITED NATIONS CHILDREN'S FUND
VGF	VULNERABLE GROUP FEEDING
WFP	WORLD FOOD PROGRAMME
WVT	WORLD VISION TANZANIA