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PROTRACTED RELIEF AND RECOVERY OPERATIONS – ZIMBABWE 200453

Responding to Humanitarian Needs and Strengthening Resilience to Food Insecurity

Number of beneficiaries	1,230,000 (yearly maximum)
Duration of project	24 months (May 2013–April 2015)
WFP food tonnage	144,021 mt
Cost (United States dollars)	
WFP food cost	71,282,052
WFP cash/voucher cost	31,540,000
Total cost to WFP	206,091,593

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NOTE TO THE EXECUTIVE BOARD

This document is submitted to the Executive Board for approval.

The Secretariat invites members of the Board who may have questions of a technical nature with regard to this document to contact the WFP staff focal points indicated below, preferably well in advance of the Board's meeting.

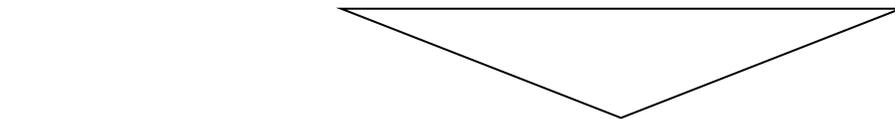
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EXECUTIVE SUMMARY



Since 2009, between 1.05 million and 1.67 million people – 12 percent to 19 percent of the rural population – have required food assistance during lean seasons. Zimbabwe has a “serious” global hunger index of 17.3, and 72 percent of the population live below the national poverty line. A third of Zimbabwe’s children are chronically malnourished, with no significant improvement since 1999. The prevalence of HIV and AIDS is among the highest in the world at 13.7 percent of the population.

The political, social and economic situation is fragile, but there are signs of increasing stability. The introduction of a multi-currency system and the liberalization of markets in 2009 has improved the economy, but the average household finds it difficult to obtain adequate income and food.

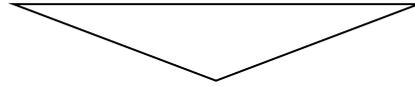
Protracted relief and recovery operation 200453 will serve 1.23 million people over two years. The activities reflect a transition to recovery, but maintain a capacity for rapid response if necessary.

The objectives are to:

- protect and promote livelihoods and enhance the self-reliance of targeted, vulnerable households in emergencies and during early recovery (Strategic Objective 1);
- enhance communities’ resilience to shocks through safety-net or asset-creation activities (Strategic Objective 2);
- support the re-establishment of livelihoods, food security and nutritional well-being of communities and families affected by shocks (Strategic Objective 3); and
- support malnourished adults and children by helping them to regain their productive capacity (Strategic Objective 3).

The operation is in line with the Government’s Mid-Term Plan, the national Food Deficit Mitigation Strategy, the Food and Nutrition Security Policy, the Productive Community Works Policy Framework, the Social Transfer Policy Framework, the United Nations Development Assistance Framework and Strategic Objectives 1, 2 and 3; it also contributes to Millennium Development Goals 1, 4, 5 and 6.

DRAFT DECISION*



The Board approves the proposed PRRO Zimbabwe 200453 “Responding to Humanitarian Needs and Strengthening Resilience to Food Insecurity” (WFP/EB.1/2013/8-A/2).

* This is a draft decision. For the final decision adopted by the Board, please refer to the Decisions and Recommendations document issued at the end of the session.

ANALYSIS AND SCENARIO

Context

1. Zimbabwe is a low-income, food-deficit country ranked 173rd of 187 countries on the Human Development Index and 118th of 146 countries on the Gender Inequality Index.¹
2. Deteriorating economic conditions between 2000 and 2008 culminated in the collapse of the economy. The country experienced hyperinflation, political turbulence, extensive de-industrialization, large-scale emigration, a significant decline in domestic food production and cuts in human and financial resources for health, education, social services and agriculture. The result is high unemployment and increased poverty.
3. The Global Political Agreement and the introduction of a multi-currency system in 2009 helped to stabilize the economy, facilitate the transition to recovery and promote private-sector engagement to support food security. But the situation remains fragile: Zimbabwe is vulnerable to social, economic, political and climatic shocks.² General elections are scheduled for early 2013, and there is optimism that social and economic improvements will be political priorities.
4. The number of people living with HIV has decreased in the last decade, but Zimbabwe still has the fifth-highest prevalence in the world at 13.7 percent. Its capacity to fight the disease is limited: only half of the people living with HIV have access to anti-retroviral drugs, and 68 percent of tuberculosis (TB) carriers test positive for HIV.³ The number of new infections is 3 percent annually, and an average of 1,370 people die each week. There are 1.6 million orphans and other vulnerable children.⁴
5. Recent restrictions by the South African Government on asylum claims from third-country nationals transiting through Zimbabwe and other neighbouring states have increased the number of returnees and asylum-seekers stranded in Zimbabwe.

The Food Security and Nutrition Situation

6. As a result of drought in 2011 and 2012, rural food insecurity in 2013 is projected to be 7 percent higher than in 2012. According to the 2012 Zimbabwe Vulnerability Assessment Committee (ZimVAC) assessment of rural livelihoods,⁵ 1.7 million people – 20 percent of the rural population – will need emergency food assistance during the peak of the lean season early in 2013.
7. Cereal production fell from 1.6 million mt in 2011 to 1.08 million mt in 2012 – a 33 percent decrease from 2011 and the lowest harvest since 2009. With a national cereal requirement of 2.1 million mt, Zimbabwe faces continued deficits.⁶ Despite the promotion of drought-resistant crop varieties, the area of land planted and agricultural production have declined over the last four seasons.

¹ United Nations Development Programme. 2011. *Human Development Report 2011*. New York.

² Zimbabwe is in the World Bank's list of fragile states with a country policy and institutional assessment of 1.954 – well below the 3.0 cut-off for countries considered to be "core" fragile states.

³ The Ministry of Health and Child Welfare, HIV Annual Report for 2011.

⁴ Zimbabwe National AIDS Strategic Plan II (2011–2015).

⁵ ZimVAC rural livelihoods assessment, 2012.

⁶ Ministry of Agriculture, Mechanization and Irrigation Development, second-round crop and livestock assessment, March 2012.

8. As a result of inadequate cereal production and limited employment opportunities, many rural households consume their food reserves and exhaust their cash assets during the lean season,⁷ when cereal prices in grain-deficit regions can be twice as high as in grain-surplus regions, typically peaking between December and March.
9. Most livelihoods in drought-prone grain-deficit areas are agriculture-based. Alternative sources of income include non-farm labour, vegetable production, mining, livestock production, trade and increasingly unreliable foreign remittances. The erosion of household assets, typically through distress sales of livestock, has compromised people's resilience and capacity to cope with shocks.
10. Malnutrition is a serious problem that is seen as the result and driver of poverty. A third of all children are stunted:⁸ prevalence has increased since 2009 and exceeds 35 percent in 24 of 64 districts; the highest rate of stunting – 47 percent – is in Mutare.^{9,10} Fewer than 10 percent of children under 2 receive an acceptable diet. Acute malnutrition (wasting) among children appears to be stable at 2.4 percent, but it reaches 19 percent among adults with HIV.^{11,12}

POLICIES, CAPACITIES AND ACTIONS OF THE GOVERNMENT AND OTHERS

Policies, Capacities and Actions of the Government

11. Protracted relief and recovery operation (PRRO) 200453 is guided by the following national policies:
 - The Mid-Term Plan (2010–2015) to maintain and promote economic stability prioritizes the restoration of economic capacity to ensure balanced development and equal opportunities for all, and sustained delivery of good-quality social services.
 - The Food and Nutrition Security Policy (2012) recognizes food security and nutrition as a major input for social and economic development.
 - The National HIV and AIDS Strategic Plan (2011–2015) takes improved nutrition into account; the National Health Strategy (2009–2013) provides guidelines for treatment of acute malnutrition, behaviour change, communications and micronutrient fortification.
 - The Food Deficit Mitigation Strategy (2010) promotes assistance through community works and asset creation. The Government is concerned that general food distributions lead to dependency and do not address the causes of food insecurity; such assistance is discouraged outside the lean season.

⁷ The lean season is October–March, with a peak in January–March.

⁸ Zimbabwe National Security Agency and Inner City Fund International. 2012. *Demographic and Health Survey 2012*. Harare.

⁹ Food and Nutrition Council National Nutrition Survey – 2011.

¹⁰ Stunting prevalence of 20–29 percent is “medium”, 30–39 percent is “high” and 40 percent is “very high”. World Health Organization, 1995; see: www.who.int/nutgrowthdb/en

¹¹ WFP monitoring data, 2011.

¹² Wasting prevalence of 5–9 percent is “poor”, 10–14 percent is “serious” and above 15 percent is “critical”. World Health Organization, 1995; see: www.who.int/nutgrowthdb/en

- The Productive Community Works Policy Framework addresses unemployment, productivity enhancement, environmental regeneration and capacity development.
- The 2012 National Social Transfer Policy Framework promotes the use of cash transfers.

Policies, Capacities and Actions of Other Actors

12. Since 2010, the United Nations Children's Fund (UNICEF), the Food and Agriculture Organization of the United Nations (FAO) and WFP have improved food-security and nutrition analysis by building capacity in the national Food and Nutrition Council, resulting in the Food and Nutrition Security Policy.
13. In partnership with the Government under the Zimbabwe United Nations Development Assistance Framework (ZUNDAF) for 2012–2015, FAO, UNICEF, WFP and the World Health Organization will implement the Nutrition Flagship Programme to reduce undernutrition and prevent stunting through food fortification, treatment of moderate acute malnutrition and feeding programmes for infants and young children.
14. The United Nations Children's Fund supports programmes advocating nutrition, child protection, education and water/sanitation. FAO supports farm-input programmes using vouchers and provides emergency veterinary support.
15. Recent relief and early-recovery programmes of the Government and other stakeholders have shifted to modalities such as cash transfers, vouchers, bank cards and scratch cards.

Coordination

16. Through ZUNDAF, the United Nations country team supports national development priorities and addresses human rights, gender equality, HIV, basic social services, improved food security and sustainable management of natural resources.
17. The United Nations cluster system is moving to long-term planning: WFP coordinates regular meetings of the food-assistance working group, the main coordination forum for partners in food security and nutrition programmes.
18. WFP leads the logistics cluster and provides logistics support for United Nations agencies and non-governmental organizations (NGOs); it also leads the emergency telecommunications cluster and the information, communication and technology (ICT) working group, and participates in the nutrition cluster.

OBJECTIVES OF WFP ASSISTANCE

19. The objectives of PRRO 200453 are aligned with Strategic Objectives 1, 2 and 3¹³ and Millennium Development Goals 1, 4, 5 and 6.¹⁴ The operation will:
 - protect and promote livelihoods and enhance self-reliance among targeted vulnerable households in emergencies and early recovery (Strategic Objective 1);
 - enhance communities' resilience to shocks through safety-nets or asset-creation activities (Strategic Objective 2);

¹³ Strategic Objective 1 – Save lives and protect livelihoods in emergencies; Strategic Objective 2 – Prevent acute hunger and invest in disaster preparedness and mitigation measures; Strategic Objective 3 – Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations.

¹⁴ MDG 1 – Eradicate extreme poverty and hunger; MDG 4 – Reduce child mortality; MDG 5 – Improve maternal health; MDG 6 – Combat HIV/AIDS, malaria and other diseases.

- support the re-establishment of livelihoods, food security and the nutritional well-being of communities and families affected by shocks (Strategic Objective 3); and
- support malnourished adults and children by helping them to regain their productive capacity (Strategic Objective 3).

WFP RESPONSE STRATEGY

Nature and Effectiveness of Food Security Assistance

20. From 2006 to early 2009, WFP's food response has targeted as many as 5 million beneficiaries. Since 2009, the improved political and economic context has provided the conditions to pilot innovative approaches for a shift from emergency response to recovery: this includes the enhancement of partnerships, asset-creation interventions, cash and voucher transfers, and local procurement. Lessons learned include the need to assess market conditions and household dynamics, the importance of using new tools in integrated approaches and the need to be flexible in adopting appropriate tools.
21. In 2011 an independent evaluation of the 2006–2010 country portfolio¹⁵ concluded that WFP's activities were relevant to the needs of poor households and that resources were efficiently utilized. The portfolio was evaluated as effective, with a recognition that the increased use of new instruments and enhanced partnerships had maximized impacts. Recommendations focused on the transition to recovery and development and the need to leverage expertise to support a national social-protection framework. The evaluation noted that despite positive economic and political developments since 2009, food security remained precarious, and recommended that WFP maintain the capacity to scale-up relief assistance if required.
22. An evaluation of the cash-transfer pilot indicated that cash transfers increased household cereal consumption and encouraged farmer-to-farmer sales,¹⁶ and also improved market integration between deficit and surplus areas by injecting cash into local economies, enabling beneficiaries to purchase as they chose.
23. In 2012, WFP provided logistical support to transport grain from the Government's grain reserve to food-deficit areas. This initial joint relief response by WFP and the Government is a base from which WFP intends to help the Government to enhance its disaster-response capacity.

Strategy Outline

24. The protracted relief and recovery operation 200453 will promote a transition from emergency assistance to recovery while maintaining a capacity for emergency response, and will strike a balance between direct implementation by WFP and its contribution to enhancing national safety-net systems. WFP will inform the emerging social-protection framework through best practices and a sound evidence base. The strategy recognizes that partnerships with other stakeholders are fundamental to increasing the impact and sustainability of interventions.

¹⁵ WFP/EB.A/2012/7-B.

¹⁶ Oxford Policy Management evaluation of Zimbabwe's emergency cash-transfer programme in 2011.

25. The operation is aligned with national priorities. Its three components are: i) creation of productive assets; ii) promotion of health and nutrition; and iii) disaster response and risk reduction (DRRR).

Asset Creation and Resilience

26. WFP will partner the Government and stakeholders in empowering communities to increase their resilience to shocks by creating assets that will gradually offset the need for seasonal food assistance. This will include:
- rainwater harvesting technologies such as “dead level contours” and the construction of dams, wells and weirs;
 - crop and livestock productivity initiatives such as irrigation schemes, conservation agriculture and dip tanks;
 - income generation through gardening and crop diversification; and
 - improved market infrastructure and access.
27. Community-level participatory planning linked to government development processes in rural areas will be based on experience, context, local priorities and local partnerships to maximize complementarity. Local ownership promotes direct utilization, management and maintenance of assets.
28. The design and choice of assets will be appropriate to dry areas prone to shocks with little rainfall and high rainfall variability, corresponding to agro-ecological regions IV and V.¹⁷

Health and Nutrition Promotion

29. WFP’s health and nutrition activities are included in the ZUNDAF Nutrition Flagship Programme. WFP will treat moderately acutely malnourished HIV and TB patients, pregnant and lactating women and children under 5 with special nutritious food products at clinics, where services will include nutrition assessment, education and counselling. The clinics will also be used to build evidence and best practices in partnership with the Ministry of Health and Child Welfare.
30. Highly vulnerable households hosting moderately malnourished HIV or TB patients in the most food-insecure areas will receive food assistance for the duration of treatment. Food assistance has proved effective in supporting adherence to treatment and early weight recovery among people living with HIV.
31. WFP will contribute to a national campaign to reduce stunting by helping to improve nutrient intake through the fortification of staple foods and promoting nutritious diets.
32. Small-scale school feeding for primary schools will be piloted under PRRO 200453 with a view to improving child nutrition by addressing micronutrient deficiencies and to providing a safety net for schoolchildren and vulnerable households. WFP is discussing this with the Ministry of Education, Sport and Culture, and there are cooperating partners ready to support implementation.

¹⁷ Zimbabwe is divided into five agro-ecological regions on the basis of factors such as rainfall, soil quality and vegetation cover. Rainfall and crop production progressively deteriorate from region I to region V.

Disaster Response and Risk Reduction

33. Seasonally affected food-insecure households will be assisted through targeted cash and food transfers during the lean season, in line with the Government's Food Deficit Mitigation Strategy.
34. Vulnerable people deported from Botswana and South Africa will receive hot meals at border reception centres managed by the International Organization for Migration (IOM). Inter-agency contingency plans include food stocks to support up to 10,000 vulnerable people affected by resettlement, complementing the IOM package.
35. WFP will promote national disaster-response systems through improved partnerships for early warning and assessment with the Ministry of Labour and Social Services, the Food and Nutrition Council and ZimVAC, and with the Civil Protection Unit and other government bodies on disaster risk reduction and management.

Innovative Modalities

36. To meet beneficiary needs and achieve the objectives of PRRO 200453, WFP will complement in-kind assistance with cash or voucher transfers in cases where:
 - food is readily available in markets, particularly after the March harvest and when beneficiaries lack resources;
 - targeted food-insecure areas are close to surplus areas and market routes, and have good roads;
 - cash and vouchers would increase dietary diversity and adequacy;
 - opportunities exist to stimulate markets, improve market integration and encourage farmer-to-farmer sales;
 - cash or vouchers would allow for a faster response than regional procurement and transport; and
 - cash would help to harmonize interventions, in accordance with the national social-transfer policy.
37. Beneficiaries will receive a combination of pulses and vegetable oil and cash transfers as part of the asset-creation/resilience and DRRR components. Cash transfer values will be based on the market value of maize; targeting, timing and duration will depend on seasonal availability of grains in markets. Cash transfers have hitherto been very cost-efficient, with an alpha value of 0.54.¹⁸
38. A combined food voucher and cash transfer will be used in urban areas for households of malnourished people assisted under the health and nutrition component. Analyses suggest that vouchers are less cost-efficient – alpha value 1.68 – than food transfers, but a voucher-and-cash modality enables beneficiaries to redeem vouchers at any time, purchase a range of foods, maintain their dignity and avoid the stigma associated with food distributions near medical facilities. Access to fortified foods through vouchers could stimulate local fortification options. The private sector is expected to participate in fortification initiatives and to produce and market affordable nutritious foods.

¹⁸ The alpha value compares the cost to WFP and its donors of delivering food to beneficiaries with the market value of the same foods. A value below 1.0 indicates an advantage for cash transfers; a value over 1.0 indicates an advantage for food transfers.

Hand-Over

39. WFP has a long-term hand-over strategy that aims to develop government capacity to lead responses to food security and nutrition shocks. It will involve needs-based targeting, monitoring and situation analyses, enhanced partnerships with stakeholders, capacity development for counterparts and the scaling up of asset-creation activities.
40. WFP will work with the Government to support market linkages and commercial supply chains with a view to achieving sustainable food and nutrition security. It will also increase its cooperation with the Government and stakeholders in the design and implementation of food-security and hunger-reduction policies. Implementation of PRRO 200453 will anticipate a future WFP country programme.

BENEFICIARIES AND TARGETING

41. The operation will reach 1.23 million beneficiaries (see Table 1), of whom 50-70 percent will be women. During the second year WFP will give greater priority to asset creation, which is expected to progressively reduce the need for food assistance during the lean season.

TABLE 1: BENEFICIARIES BY ACTIVITY OR TYPE OF ASSISTANCE			
Activities	Men/boys	Women/girls	Total
Asset creation and resilience			
Food for assets (FFA)	67 200	72 800	140 000
Cash/food for assets (C/FFA)	100 800	109 200	210 000
Health and nutrition promotion			
<i>Treatment of moderate acute malnutrition</i>			
Anti-retroviral treatment (ART) patients	24 000	26 000	50 000
TB patients	1 440	1 560	3 000
Pregnant and lactating women	-	5 000	5 000
Children under 5	10 080	10 920	21 000
<i>Support for food-insecure households hosting malnourished HIV patients</i>			
Recipients of food	108 780	117 520	226 000
Recipients of food vouchers and cash	24 000	26 000	50 000
Pilot: school feeding	4 800	5 200	10 000
DRRR seasonal targeted assistance			
Recipients of food	285 600	309 400	595 000
Recipients of cash and food	122 400	132 600	255 000
Returnees	2 400	2 600	5 000
Contingency	4 800	5 200	10 000
ADJUSTED TOTAL	588 000	642 000	1 230 000

42. WFP will use a combination of geographic and demographic targeting criteria to identify beneficiaries.

43. WFP will ensure that asset creation targets populations in areas prone to shocks where food insecurity is most severe on the basis of a five-year trend analysis and district profiling data. The beneficiaries will be people in food-insecure households with capacity for labour, and immediate family. If there are no other safety-net programmes, communities may include labour-constrained food-insecure households to carry out light tasks.
44. Geographic targeting for seasonal targeted assistance will be based on the annual ZimVAC assessment, WFP district profiling and the triangulation of crop production, livelihood and market data. Beneficiaries will be identified through community-based targeting. Beneficiary planning figures assume that agricultural production, livelihoods and market patterns will stabilize and improve during PRRO 200453.
45. Health and nutrition beneficiaries will be identified through indicators of malnutrition assessed by healthcare personnel at clinics. The planned beneficiary figures are derived from HIV prevalence data, malnutrition data obtained from WFP monitoring and extrapolation from data in the Demographic Health Survey on malnutrition among women of child-bearing age and expected pregnancies. Activities are expected to reach only 70 percent of malnourished people because the number of clinics is limited.
46. Household vulnerability assessments will be carried out by WFP's cooperating partners to assess factors influencing food security. WFP will oversee beneficiary registration; physical verification will be carried out by WFP and cooperating partners.

NUTRITIONAL CONSIDERATIONS AND RATIONS; TRANSFER VALUES

47. The food basket and ration sizes reflect the diet of the targeted population, as shown in Table 2.
48. WFP will emphasize nutrition in all activities with a view to improving nutrition results, even when nutrition is not the primary outcome. This will include the publication of nutrition-related messages.

TABLE 2: FOOD RATION/TRANSFER BY COMPONENT (g/US\$/person/day)

	Asset creation		Health and nutrition promotion					DRRR				
	FFA	Combined C/FFA	Treatment of moderate acute malnutrition			Households hosting HIV/TB patients		School feeding pilot	Seasonal targeted assistance		Contingency	Returnees
			PLW*	ART/TB	Children under 5	Urban	Rural		Food	Food and cash		
Cereals	333	-	-	-	-	-	333	-	333	-	333	400
Pulses	67	67	-	-	-	-	67	-	67	67	67	67
Vegetable oil	25	25	-	-	-	-	25	10	25	25	25	25
SuperCereal	-	-	333	333	-	-	-	100	-	-	-	110
SuperCereal Plus	-	-	-	-	200	-	-	-	-	-	-	-
Cash (US\$/person/day)	-	0.13	-	-	-	0.03	-	-	-	0.13	0.13	-
Food voucher (US\$/person/day)	-	-	-	-	-	0.27	-	-	-	-	-	-
TOTAL	425g	425g	333g	333g	200g	US\$0.3	425g	110g	425g	425g	425g	602g
Kcal/day	1 611	1 611	1 166	1 166	840	-	1 611	464	1 611	1 611	1 611	2 259
% kcal from protein	11.6	-	-	-	-	-	-	-	11.6	-	11.6	-
% kcal from fat	21.9	-	-	-	-	-	-	-	21.9	-	21.9	-
Feeding days/year	210		180	180	90	180	180	200	180		-	1

* Pregnant and lactating women.



TABLE 3: TOTAL FOOD/CASH AND VOUCHER REQUIREMENTS <i>(mt and US\$)</i>				
	Asset creation	Health and nutrition	DRRR	Total
Cereals	19 600	21 636	50 998	92 234
Pulses	9 800	4 327	15 288	29 415
Vegetable oil	3 675	1 659	5 733	11 067
Mixed and blended food		11 292	13	11 305
<i>Cash/voucher (US\$)</i>	<i>11 760 000</i>	<i>9 600 000</i>	<i>10 180 000</i>	<i>31 540 000</i>
TOTAL FOOD (mt)	33 075	38 914	72 032	144 021

49. The choice of foods for rations is based on traditional diets. The rations provide at least 70 percent of nutritional needs; beneficiaries are expected to meet the remainder from other sources. The micronutrient gap in highly food-insecure areas will be addressed in other fortification initiatives.
50. Cash transfer values are based on the cost of cereals in markets in targeted areas. Voucher transfer values are based on the average retail cost of a standard food basket. Market prices are monitored monthly with a view to adjusting transfer values.

IMPLEMENTATION ARRANGEMENTS

Participation

51. Community-based participatory planning and targeting ensure that women are well represented. WFP will continue to promote women's participation in activity management: the measures in place ensure that at least 50 percent and sometimes 80 percent of community participants are women.
52. Communities are expected to provide logistical support for local resources for asset creation and will establish management committees to ensure that the assets are sustainable.
53. WFP ensures that beneficiaries will not travel more than 10 km or walk for more than two hours to distribution points, which are located close to clinics and schools to minimize security risks. Staff of WFP and cooperating partners will be trained in the prevention of sexual exploitation and abuse in humanitarian operations.

Partners and Capacities

54. WFP works with the Government, FAO, the Famine Early Warning System Network and other stakeholders in food-security and livelihood assessments. WFP has established partnerships with various NGOs – the Adventist Development and Relief Agency, Africare, the Cooperative for Assistance and Relief Everywhere, Catholic Relief Services, Christian Care, GOAL, the Organization of Rural Associations for Progress, Plan International, Save the Children, the United Methodist Committee on Relief and World Vision International – which were consulted during planning for PRRO 200453, and which participate in the food-assistance working group coordinated by WFP.

55. WFP and the World Bank are partnering to align asset creation with the Government's Productive Community Works Policy. WFP also coordinates with the NGO consortium Promoting Recovery in Zimbabwe in asset-creation schemes for recovery.
56. WFP collaborates with the Ministry of Health and Child Welfare on food fortification and the rehabilitation of malnourished patients and supports the ministry in building logistics capacity and improving the supply chain, reporting systems and the distribution of nutritional products.
57. WFP, UNICEF and the Ministry of Labour and Social Services are planning complementary interventions involving the national cash-transfer system and WFP activities to integrate beneficiary registers and harmonize cash transfers.
58. WFP and its partners coordinate with local authorities through provincial and district drought-relief committees on DRRR. FAO and WFP are partners in disaster-mitigation interventions relating to climate change, conservation farming and management of post-harvest losses.

Procurement and Logistics

59. Procurement will follow standard procedures. WFP will encourage local procurement with a view to connecting smallholder farmers with traders to facilitate market integration and promote production of small grains and drought-tolerant varieties in semi-arid regions.¹⁹ There is a risk that neighbouring countries could impose export bans, as Malawi did in 2011, so WFP monitors regional grain production and requirements and works with the Ministry of Agriculture and food reserve agencies in Malawi, Zambia and Zimbabwe.
60. Malawi and Zambia are the primary sources of regionally procured food. Other international purchases will be received through Durban in South Africa and Beira in Mozambique. Food will be stored in WFP facilities in Bulawayo, Harare, Masvingo and Mutare and transported by WFP to extended delivery points. Cooperating partners will be responsible for the extended delivery points, transport to final delivery points and distribution to beneficiaries. WFP will provide logistics support for partners that cannot transport food to final delivery points.

Transfer Modalities

61. Cash transfers are the responsibility of cooperating partners, which hire cash-in-transit security companies. Beneficiaries sign against their names as proof of receipt. The pulses and vegetable oil provided in addition to the cash are also distributed by cooperating partners.
62. For voucher transfers, WFP has cooperating partners for distribution and monitoring and a private-sector partner for electronic services and the selection and management of retailers. Beneficiaries collect vouchers at distribution points, and redeem them at selected retailers for particular brands of maize meal, pulses and vegetable oil and for cash by showing an identification document linked to the identifier codes on the vouchers.

¹⁹ Dawes, M. 2012. *Local Purchase of Food Commodities to Assist Smallholder Market Development*. Consultancy report for WFP. Harare.

63. Voucher redemption involves transferring the costs associated with the food basket and cash transfer to retailers' accounts. WFP will disburse the funds required for each month's distribution to an account held by a private-sector partner. The funds in the account will be used to pay retailers when vouchers are redeemed. The account is maintained on a no-charge and no-interest basis. All transactions are electronically recorded, and the information is accessible on the internet.
64. Risks associated with cash and voucher interventions include price fluctuations, uncertain market capacity, limited financial literacy, insecurity and limited experience among some cooperating partners. WFP's price-monitoring system will enable timely adjustments to the transfer value: if the market or traders' capacity to meet requirements fails, WFP will reduce cash or voucher transfers and shift to in-kind transfers. WFP and its cooperating partners will help beneficiaries to understand their entitlements. To minimize the risks of transporting cash, WFP will continue to use reputable security companies.²⁰

Non-Food Inputs

65. WFP's cooperating partners will contribute non-food inputs for joint activities. Asset creation depends on predictable resources for acquiring items such as cement, fencing, poles, wire mesh, first-aid kits, hoes, wheelbarrows, picks, mattocks, axes and pumps. For DRRR and the promotion of health and nutrition, WFP, UNICEF and FAO will fund communications about behaviour change, research into food fortification and training, as required under ZUNDAF.

PERFORMANCE MONITORING

66. WFP will monitor registration to ensure fairness and transparency and to make adjustments as required, and will work with cooperating partners to verify the robustness of household selection processes.
67. Process monitoring will assess the timeliness, adequacy and effectiveness of food and cash transfers. Post-distribution monitoring will assess the adequacy and efficiency of WFP assistance, beneficiary satisfaction and short-term impact, and will record household decisions as to the choice of food or cash. For asset-creation, site monitoring will assess progress towards planned outputs and will help in addressing challenges.
68. Output reporting will be compiled from distribution data from cooperating partners. Six-monthly community and household surveillance will reveal immediate outcomes by comparing the food consumption and stress of beneficiary households with those of non-beneficiaries. Other indicators will rely on internal monitoring and secondary data from collaborative programmes with United Nations agencies and government organizations, which will provide reliable information.
69. As a follow-up to the 2011 evaluation of the Zimbabwe country portfolio, WFP will carry out self-evaluations of the asset-creation activities to determine their impact.

²⁰ Cash carried by these security companies is insured.

RISK MANAGEMENT

70. WFP has instituted minimum preparedness actions under the emergency preparedness and response package; these will be reviewed annually.
71. The main contextual risk is drought, which affects rural livelihoods and reduces resilience to shocks. Early-warning systems are in place, run by the Meteorological Services Department and the National Early-Warning Unit. Assessments of rural livelihoods will enable WFP to adapt its responses according to needs. WFP is partnering with local NGOs and the local Red Cross to develop capacities and ensure uninterrupted delivery of assistance at all times.
72. The main programmatic risk is gaps in technical capacity. WFP will ensure that NGO partners have the appropriate skills, and will develop capacities if necessary. WFP will draw on ZUNDAF partners for expertise and resources in capacity development.
73. With regard to institutional risks, WFP will adhere to internal business processes and controls such as segregation of duties, monitoring and evaluation of suppliers and contractors, and access-controls.

Security Risk Management

74. Harare, Beitbridge and Bulawayo are at United Nations security level 2 (low); Masvingo and Mutare are at security level 1 (minimal). WFP complies with minimum operating security standards and liaises with the United Nations Department of Safety and Security to ensure staff safety.

ANNEX I-A

PROJECT COST BREAKDOWN			
Food ¹	Quantity (mt)	Value (US\$)	Value (US\$)
Cereals	92 234	29 789 992	
Pulses	29 415	18 777 272	
Oil and fats	11 067	15 661 886	
Mixed and blended food	11 305	7 052 902	
Total food	144 021	71 282 052	
Cash transfers		21 940 000	
Voucher transfers		9 600 000	
Total food, cash and voucher transfers			102 822 052
External transport			8 988 526
Landside transport, storage and handling			36 641 824
Other direct operational costs			18 740 369
Direct support costs ² (see Annex I-B)			25 416 195
Total WFP direct costs			192 608 966
Indirect support costs (7.0 percent) ³			13 482 628
TOTAL WFP COSTS			206 091 593

¹ This is a notional food basket for budgeting and approval. The contents may vary.

² Indicative figure for information purposes. The direct support cost allotment is reviewed annually.

³ The indirect support cost rate may be amended by the Board during the project.

ANNEX I-B

DIRECT SUPPORT REQUIREMENTS (US\$)	
Staff and staff-related costs	
International professional staff	6 847 516
Local staff – national officers	1 755 312
Local staff – general service	2 230 814
Local staff – temporary assistance	5 604 984
Local staff – overtime	391 790
International consultants	151 062
Local consultants	431 638
United Nations volunteers	251 769
Staff duty travel	1 539 678
Subtotal	19 204 562
Recurring expenses	
Rental of facility	523 404
Utilities	413 255
Office supplies and other consumables	130 200
Communications services	1 171 800
Equipment repair and maintenance	26 040
Vehicle running costs and maintenance	830 676
Office set-up and repairs	26 040
United Nations organization services	260 400
Subtotal	3 381 815
Equipment and capital costs	
Vehicle leasing	775 200
Communications equipment	361 152
Local security costs	1 693 466
Subtotal	2 829 818
TOTAL DIRECT SUPPORT COSTS	25 416 195



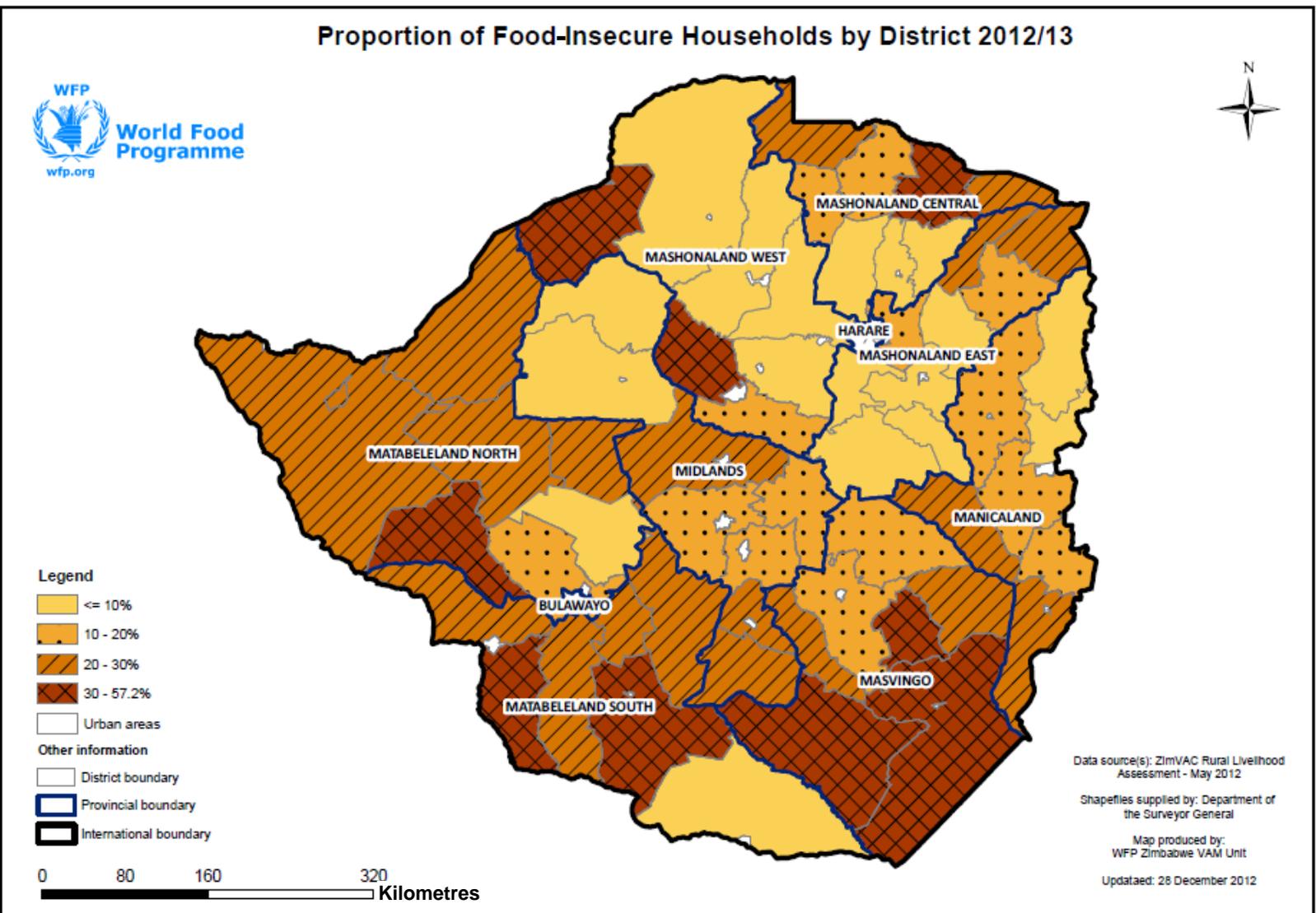
ANNEX II: LOGICAL FRAMEWORK		
Results	Performance indicators	Assumptions
Strategic Objective 1: Save lives and protect livelihoods in emergencies Component: DRRR		
Outcome 1 Improved food consumption over assistance period for seasonally-affected food-insecure households	<ul style="list-style-type: none"> ➤ Household food consumption score Target: Score exceeds 21 	Capable cooperating partners available for implementation. Government and donor support forthcoming.
Output 1.1 Food and non-food items, cash transfers and vouchers distributed in sufficient quantity and quality to targeted groups under secure conditions	<ul style="list-style-type: none"> ➤ No. of people receiving food, non-food items, cash transfers and vouchers, by category, activity, transfer modality and as % of planned Target: 100% ➤ Tonnage of food distributed, by type, as % of planned Target: 100% ➤ Quantity of non-food items distributed, by type, as % of planned Target:100% ➤ Total cash transferred to beneficiaries Target:100% of planned ➤ Total food/cash equivalent of vouchers distributed Target:100% of planned 	Capable cooperating partners available for implementation. Government and donor support forthcoming. Continuity of delivery.

ANNEX II: LOGICAL FRAMEWORK

Results	Performance indicators	Assumptions
Strategic Objective 2: Prevent acute hunger and invest in disaster preparedness and mitigation measures Component: Productive asset creation		
Outcome 2.1 Adequate food consumption over assistance period for target households at risk of acute hunger	➤ Household food consumption score Target: Score exceeds the threshold of 35	Capable cooperating partners available for implementation. Government and donor support forthcoming.
Outcome 2.2 Hazard risk reduced at the community level in target communities	➤ Community asset score Target: Risk reduction and disaster mitigation assets increased	Ability of cooperating partners and Government to deliver on commitments. Adequate staffing levels/capacity for risk reduction and disaster mitigation assets.
Output 2.1 (See Output 1.1 for distribution of food and non-food items, cash transfers and vouchers)		
Strategic Objective 3: Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations Component: Health and nutrition promotion		
Outcome 3.1 Adequate food consumption over assistance period for households at risk of falling into acute hunger; malnourished members benefit from care and treatment programmes	➤ Household food consumption score Target: Score exceeds 35	Capable cooperating partners available for implementation. Government and donor support forthcoming.
Outcome 3.2 Improved nutritional recovery of anti-retroviral therapy and TB patients	➤ Nutritional recovery rate for anti-retroviral therapy Target: >75% ➤ Nutritional recovery rate for TB treatment Target: >75%	Drugs and other medical supplies available. Resources such as health staff, anthropometric equipment and facilities available for growth monitoring. Clinical partners available for development of integrated nutrition rehabilitation, including assessment, education and counselling.
Output 3.1 (See Output 1.1 for distribution of food and non-food items, cash transfers and vouchers)	➤ No. of health centres assisted Target: 100% of planned	



ANNEX III



The designations employed and the presentation of material in this publication do not imply the expression of any opinion whatsoever on the part of the World Food Programme (WFP) concerning the legal status of any country, territory, city or area or of its frontiers or boundaries.



ACRONYMS USED IN THE DOCUMENT

ART	anti-retroviral treatment
C/FFA	cash/food for assets
DRRR	disaster response and risk reduction
FAO	Food and Agriculture Organization of the United Nations
IOM	International Organization for Migration
NGO	non-governmental organization
PRRO	protracted relief and recovery operation
TB	tuberculosis
UNICEF	United Nations Children's Fund
ZimVAC	Zimbabwe Vulnerability Assessment Committee
ZUNDAF	Zimbabwe United Nations Development Assistance Framework