

BUDGET REVISION 08 TO TANZANIA PROTRACTED RELIEF AND RECOVERY OPERATION 200603

Food Assistance for Refugees

Start date: 1 July 2014 End date: 31 December 2016

Extension/Reduction period: six months New end date: 30 June 2017

Total revised number of beneficiaries	350,000		
Duration of entire project	1 July 2014 to 30 June 2017		
Extension/Reduction period	6 months		
Gender marker code	1		
WFP food tonnage	128,793 mt		
Cost (United States dollars)			
	Current Budget	Increase	Revised Budget
Food and Related Costs	74,782,633	28,298,820	103,081,453
Cash and Vouchers and Related Costs	661,763	3,792,877	4,454,640
Capacity Development & Augmentation	-	-	-
DSC	16,045,714	4,609,551	20,655,265
ISC	6,404,308	2,569,087	8,973,395
Total cost to WFP	97,894,418	39,270,335	137,164,753

NATURE OF THE INCREASE

1. Since the early 1970s, Tanzania has been host to several waves of incoming refugees fleeing into the country's Kigoma and Kagera regions as a consequence of civil strife and ethnic conflict in neighbouring countries. Until recently, following a voluntary repatriation exercise for Burundian refugees conducted in 2012, Nyarugusu refugee camp in Kasulu district, Kigoma region was the only remaining camp, hosting approximately 65,000 refugees mainly from the Democratic Republic of the Congo (DRC). The camp was also home to a small number of refugees from Burundi who were found to be in need of international protection as a result of a status determination exercise conducted in 2012.
2. Since April 2015, renewed political instability in Burundi has triggered an influx of Burundian refugees into eastern DRC, Rwanda, Tanzania, Uganda and Zambia. In 2015, Tanzania received over 100,000 refugees within six months, and the number of Burundian refugees in the country has kept increasing since then. The Government of Tanzania has allocated three former refugee camps to accommodate this new influx (Nduta, Mtendeli and Karago), in addition to Nyarugusu. By October 2016, all three operational camps (Nyarugusu, Mtendeli and Nduta) reached their maximum capacity while Karago was found not to be a viable option due to lack of water. A new site has been potentially identified in Lumasi to host the incoming caseload.
3. According to data from the Office of the United Nations High Commissioner for Refugees (UNHCR) the total refugee population in Tanzania currently exceeds 240,000. Ongoing discussions on the 2017 contingency planning forecast an influx of at least 100,000 new refugees during the first half of the year. However, there is no clarity from the Government

of Tanzania as to where potential new camps will be opened to host the new arrivals. With consideration to the location of Lumasi camp, WFP may need to open an operational base close to the site, in Ngara town, and increase its logistical capacity to support activities in the new location.

4. This eighth budget revision to the Tanzania Protracted Relief and Recovery Operation (PRRO) 200603 extends the operation from 1 January 2014 to 30 June 2017, to align programming with the ongoing Country Strategy Plan development process, expected to be concluded by June 2017.
5. This budget revision increases the number of planned beneficiaries to 350,000 (171,500 men/boys and 178,500 women/girls) based on the trend analysis of new arrivals and planning figures to be used in the development of the 2017 Regional Refugee Response Plan. During the course of this budget revision WFP will:
 - Maintain on-going food assistance activities under this PRRO, including exploring partnerships on livelihood strategies for refugees to diversify their food access;
 - Scale-up cash based transfers (CBT) from the initial 10,000 recipients identified to have special needs (PSN),¹ to 70,000 refugees at Nyarugusu refugee camp using mobile money transfers and/or other financial provisions. The scale up will include PSNs and non-PSN refugees, and will replace the entire food basket with cash;
 - A total of 88,711 beneficiaries will benefit from the nutrition programmes, which include MAM treatment for children aged 6-59 months, stunting prevention for children aged 6-23 months and Pregnant and Lactating Women (PLW), and MNP supplementation for children 24-59 months.

This revision increases the budget by US\$39,270,335, bringing the total budget of PRRO 200603 to US\$ 137,164,753.

JUSTIFICATION FOR BUDGET INCREASE

Summary of Existing Project Activities

6. PRRO 200603 was initially approved for a period of two years, starting 1 July 2014 and scheduled to end 30 June 2016. Budget revision seven extended the operation from 1 July 2016 to 31 December 2016. Through this operation, WFP meets the food and nutrition needs of refugees residing in camps in Tanzania through:
 - Monthly general food distributions (GFD) of maize meal, pulses (beans or split peas), Super Cereal, fortified vegetable oil and iodised salt;
 - Distribution of Super Cereal Plus to children aged 6-23 months to prevent stunting;²
 - Take-home rations of Super Cereal with sugar and vegetable oil for PLW to support stunting prevention and address acute malnutrition;
 - Distribution of Micronutrient Powders (MNPs) to children aged 24-59 months to prevent micronutrient deficiencies;
 - Provision of Super Cereal Plus to children aged 6 -59 months for the management of moderate acute malnutrition (MAM);

¹ Refugees identified to have special needs are the most vulnerable of the refugee population in the Nyarugusu refugee camp who are faced with physical and structural barriers that hinder their access to essential humanitarian services and income opportunities. The refugees with special needs have been systematically identified and documented jointly with UNHCR to inform appropriate programme design and assistance consistent with their vulnerabilities.

² This activity is accompanied by a social behavioural change communication (SBCC) component to convey nutritional messages. The SBCC is managed by Tanzania Red Cross Society.

- Rations of maize meal, pulses, Super Cereal with sugar, fortified vegetable oil and iodised salt, for hospital in-patients;
- Distribution of High Energy Biscuits (HEB) to new arrivals while on transit;
- Provision of hot meals (wet feeding) at the transit and reception centres.

Conclusion and Recommendations of the Re-Assessment

7. Due to the encampment policy enforced by the Government of Tanzania, refugees hosted in the camps remain largely dependent on WFP food assistance to meet their food security and nutrition needs. According to the preliminary Community Household Surveillance³ report, food assistance is the most important livelihood source for 87 percent of the refugees.
8. Findings from WFP Tanzania's country portfolio evaluation (CPE) recommended that WFP increasingly shift its focus in the country to the provision of technical assistance for social protection interventions, with particular emphasis on exploring the use of cash-based transfers (CBT) where feasible.
9. A strong desire for cash transfers was expressed by refugees hosted in Nyarugusu refugee camp, and particularly by long-term ones, who have been in the camp for up to seventeen years. The scale-up of CBTs could enhance food consumption, increase food diversification for the refugees, and contribute to the local economy. The government is currently reviewing the refugee policy and issue of the camp encampment is one of the items under discussion.
10. In 2012, WFP conducted a CBT pilot in Tanzania to determine the feasibility of using the transfer modality when linked to community-based maternal and child health to address food insecurity in rural locations. Lessons from the pilot demonstrated the need to conduct comprehensive assessments of mobile network coverage in target locations and to assess beneficiary capacity to utilize mobile money platforms. In addition, it was found vital to sensitize beneficiaries to both the project and the use of a mobile money platform as a means of receiving assistance. Subsequently in 2014, WFP completed a CBT feasibility study⁴ in Nyarugusu refugee camp,⁵ which determined that the use of CBT in Nyarugusu would be possible given positive market functionality in areas surrounding the camp. A follow-up study conducted in 2015 to explore different delivery mechanisms recommended the use of mobile money transfers.
11. In 2016, a market structure has been established in Nyarugusu refugee camp to enable Tanzanian and refugee vendors to supply basic food and non-food items. The market is open to both refugees and local residents, to purchase and to trade. In May 2016, WFP conducted a comprehensive supply chain and market assessment⁶ in Kasulu and Nyarugusu refugee camps. This determined that Kasulu – an area of high agricultural production – is food surplus and has the capacity to supply markets both within and beyond the district. Local markets were found to be functional and competitive; characterized by a large number of traders with adequate short-term supply capacity, though limited access to both storage and credit to support more medium-term supply.
12. The assessment further concluded that the Nyarugusu common market, supplied by markets in Kasulu, would be able to support CBT for refugees, though found it currently

³ July 2016

⁴ Nyarugusu Cash and Voucher Feasibility Study Report, 2014

⁵ A CBT feasibility study has not yet been conducted in the two former refugee camps – Nduta and Mtendeli that are accommodating the influx of the new Burundi refugees.

⁶ Cash-Based Transfer Market Assessment, May 2016, WFP

underutilized owing to a combination of factors. Market responsiveness is challenging in the short-term due to (i) absence of an organized supply chain and ubiquity of informal traders supplying the market, (ii) limited purchasing power among refugees, (iii) challenges to physical access resulting largely from poor road infrastructure in the area, (iv) inadequate storage capacity and (v) hygiene concerns. The Government's encampment policy, which limits refugee movement beyond camp borders, further restricts access to food to the items available on the Nyarugusu common market and at the price the market dictates. As such, the assessment noted a risk in suppliers offering poorer quality foods at high cost within the camp. For the first phase of CBT, WFP is working closely with traders in the Nyarugusu common market to ensure that supply of essential food items is maintained constant and to avoid opportunistic price increases.

13. A Standardised Expanded Nutrition Survey (SENS) led by UNHCR was conducted in September 2016 covering the three refugee camps of Nyarugusu, Nduta and Mtendeli. Preliminary findings from the survey have shown a Global Acute malnutrition (GAM) prevalence of less than five percent amongst children aged 6-59 months in all the three camps. The prevalence of anaemia among children in the same age group is above 40 percent⁷ in two out of three camps. The rates of stunting across the three camps are above the 40 percent⁸ threshold, which is considered critical according to WHO classifications.

Purpose of Budget Increase

14. This budget revision will extend PRRO 200603 by six months until June 2017 to align with the ongoing Country Strategy Plan process, and reflect the increase in the number of refugees in need of humanitarian assistance in north-western Tanzania. This extension acknowledges that the strategy and planning figures for the 2017 Regional Refugee Response are higher than those for 2016 and are still under discussion.
15. Through this budget revision, WFP will continue to provide food and nutrition assistance in-kind to the majority of refugees hosted in camps. Based on results and lessons learned from the ongoing CBT pilot in Nyarugusu refugee camp, WFP will gradually scale up CBT from an initial target of 10,000 refugees (about 2,000 households) with special needs⁹ to 70,000 refugees including those without special needs. During the pilot phase two commodities (vegetable oil and Super Cereal) continue to be distributed in-kind, both for supply and nutrition-related concerns. However, considering that the market is expected to react positively to the increased demand during the pilot phase, WFP plans to replace the entire food basket with cash during the scale-up covered by this extension. The value of the transfer will increase as a result to US\$ 11.35/person/month. This will reduce the burden of assistance on the beneficiaries, who would otherwise have to receive their entitlements in three separate distributions (one in-kind and two cash transfers per month); it will also increase the efficiency of the food pipeline by rationalising the entitlements for cash and in-kind recipients. All refugees in the camps and transit centres will receive WFP food assistance, either in kind or cash-based.
16. As banks and financial institutions are not available in the refugee camp area, and many refugees are already using mobile money services within the camp, mobile money was chosen as the preferred delivery mechanism. A service provider has been selected and has

⁷ The prevalence of anaemia are at 42.3%, 45.2%, 37.2% and 40.7 % for Nyarugusu (Congolese population), Nyarugusu (Burundian Pop), Nduta and Mtendeli respectively.

⁸ The prevalence of stunting are at 44.0%, 43.7%, 57.1 % and 54.8% for Nyarugusu (Congolese population), Nyarugusu (Burundian Pop), Nduta and Mtendeli respectively

⁹ People with special needs include the physically handicapped, female headed households, child headed holds, elderly and the chronically ill.

improved the mobile network coverage in the refugee camp for the purpose of the pilot CBT intervention. A new tender for a service provider will be organised for the scale-up phase.

17. Considering the findings of the 2016 market assessment in Kasulu district, the programme will initially be implemented at a small scale, with a view to progressively expand in the future to the whole of Nyarugusu refugee camp as well as Nduta and Mtendeli. In preparation, WFP will conduct further assessments in the newly opened camps of Nduta and Mtendeli, and will work with the Government and partners to address challenges and pursue the key recommendations outlined by the assessment. WFP will support joint advocacy efforts with the Government to promote greater ease of movement by refugees outside camp borders, thereby allowing access to other markets in Kasulu and easing pressure on the Nyarugusu common market as the sole provider of diverse food items at an affordable cost.
18. WFP will also conduct weekly food price monitoring within the camp and surrounding markets. In accordance with the findings of an ICT sectoral capacity assessment, WFP will engage mobile money service providers to ensure that mobile network coverage is adequate within the camp to support a reliable service to large numbers of beneficiaries. Implementation and learning from the initial phase of the programme will inform the planned future scale up.
19. To support learning processes and coordination, WFP and UNHCR have initiated a CBT Working Group comprising UN and Non-Governmental Organisation (NGO) partners interested or working in cash-based assistance. During this budget revision, CBT coordination mechanisms will be activated also at the field level.
20. In accordance with new international standards, WFP is now providing micro-nutrient powders (MNPs) instead of CSB to address micronutrient deficiencies among children aged 24-59 months. To accompany the change in commodity, WFP will scale-up and strengthen its Social Behaviour Change Communication (SBCC) messaging and activities on nutrition. SBCC around dietary diversity and nutrition will take place to promote of nutritional improvements to accompany the provision of CBT. In parallel, UNICEF is supports the Tanzanian Red Cross Society (TRCS) to strengthen SBCC in order to improve maternal, infant and young child feeding (MIYCF) practices.
21. WFP continues to explore partnership opportunities to implement livelihood and income generating activities targeting 5,000 household in the refugee camp. Support to these households would include provision of non-food inputs (including animal pens, vegetable planting supplies, and related training) to support small-scale income generating opportunities.¹⁰ These complementary activities have the potential to improve dietary diversity, by providing animal protein and iron-rich foods to supplement WFP's food basket. WFP will further strengthen SBCC activities for these households and explore the potential of linking partner activities with CBT transfers in the future. This will be in line with the new UNHCR/WFP Joint Strategy on enhancing Self-Reliance in Food Security and Nutrition in Protracted Refugee Situations.
22. Through sensitization of beneficiary groups, WFP will continue to encourage the equal participation of men and women in the membership and leadership of food committees. In 2015, 46 percent of leadership positions in these committees were held by women. More so, WFP will ensure gender and women empowerment actions are implemented as per the new Country Office Gender Action Plan.

¹⁰ Vulnerable women headed households will be targeted, especially those with children who are suffering from acute malnutrition as the complementary activities have the potential to improve dietary diversity.

23. Recognising the primary role of women in food management at the household level, WFP in collaboration with UNHCR, has been issuing food ration cards in the names of women since 2013. This arrangement aims to provide women and girls with increased decision-making power over food and nutrition security in the household. The 2015 post-distribution monitoring results show that the proportion of households where females make decisions over the use of food is approximately 65 percent. To date, no increase in household tensions have been reported as a result of this shift.
24. In line with recommendations from the 2015 CPE, WFP will support a gender assessment in the refugee camps. This will also enable the articulation of activities to support the implementation of the 2015-2020 gender policy.
25. In collaboration with implementing partners, during this extension WFP will continue monitoring activities at process, output and outcome level. The collection of distribution data will be done by partners and consolidated by the sub-offices into a report by activity/intervention/location. The output data disaggregated by beneficiary category, age, gender, and transfer modality, as collected on a monthly basis by cooperating partners and WFP monitors, will be captured in COMET and analysed to inform decision-making.
26. Monitoring for outcome will be done through the CHS and PDMs. The Community and Households Surveillance (CHS) will be done annually to include food security and livelihood indicators. The PDM (with statistically significant sampling) will also collect outcome indicators, preferably the nutrition ones annually even though the PDM for process monitoring will be done quarterly. In addition, a review of the CBT pilot will be undertaken before scaling up CBTs to additional beneficiaries.
27. The WFP country office will provide support and operational oversight; sub-office staff will continue to be responsible for monitoring of outputs (in collaboration with Cooperating Partners) and processes. Monitoring results will feed into programme planning and reporting.

Activity	Category of beneficiaries	Current			Increase during six month extension*			Revised		
		Boys / Men	Girls / Women	Total	Boys / Men	Girls / Women	Total	Boys / Men	Girls / Women	Total
General Food Distribution**	All	117600	122400	240000	171500	178500	350000	171500	178500	350000
Prevention of Stunting***	PLW	0	10800	10800	0	22750	22750	0	22750	22750
General Food Distribution – CBT	PSN/All	4900	5100	10000	34300	35700	70000	34300	35700	70000
Prevention of Stunting****	6-23 months	9408	9792	19200	13720	14280	28000	13720	14280	28000
Prevention of Micronutrient Deficiencies	24-59 months	14112	14688	28800	20580	21420	42000	20580	21420	42000
Hospital patients	All	2462	3538	6000	3430	3570	7000	3430	3570	7000
Treatment of MAM	6-59 months	1225	1275	2500	1715	1785	3500	1715	1785	3500
HEB provided to	All	73500	76500	150000	53900	56100	110000	127400	132600	260000

new arrivals*****										
TOTAL¹¹		117600	122400	240000	171500	178500	350000	171500	178500	350000

*The male/female breakdown for the increase is based on the breakdown of the current caseload. The increase section considers the new beneficiaries to be assisted in 2017 (110,000 planned new arrivals) and the beneficiaries already assisted which WFP will continue to assist during the extension period.

** All refugee beneficiaries will eventually receive GFD, once absorbed into the regular camp setting and cycle.

*** Supplementation for PLW will contribute to the prevention of stunting by ensuring sufficient nutrient intake, thereby promoting the healthy growth of the unborn and breastfed children.

****Incoming refugee children will benefit from the established stunting prevention

***** Only new arrivals going forward will receive HEB

Note: The total beneficiaries which will be assisted during the extension period is 350,000 of which only 110,000 are new.

TABLE 2: REVISED DAILY FOOD RATION/TRANSFER BY ACTIVITY
(g/person/day)

	General Food Distribution	Prevention of Stunting (PLW)	Prevention of Stunting (6-23 months)	Prevention of Micronutrient Deficiencies (24-59 months)*	Hospital patients	Treatment of MAM (6-59 months)	HEB (for new arrivals)
Cereals	380				200		
Pulses	120				100		
Super Cereal with sugar	50	100			200		
Super Cereal Plus			100			200	
Oil	20	20			30		
Salt	5				5		
High Energy Biscuits							500
Micronutrient Powders (MNPs)				0.5			
Cash/voucher (USD/person/day)	0.33						
TOTAL	575	120	100		535		500
Total kcal/day	2 145	558	394		2 080		2 300
% kcal from protein	12.3	11.1	16.6		14.23		11.1
% kcal from fat	13.2	45.5	23.2		21.72		30
Number of feeding days per year or per month (as applicable)	365	365	365	365	365	90	Up to 3 days

* Children aged 24-59 months receive a total of 1g of MNPs for 2 days MNPs through the “prevention of micronutrient deficiencies (24-59 months)”

¹¹ Beneficiaries of other activities all receive GFD and therefore there is a 100% overlap.

FOOD REQUIREMENTS

28. In order to support operations under this budget revision, a total of 35,762 mt of mixed food commodities will be needed, thus bringing the total tonnage of this PRRO200603 to 127,694 mt.

Activity	Commodity / Cash & voucher	Food requirements (mt) Cash/Voucher (USD)		
		Current	Increase	Revised total
General Food Distribution	Commodity	86 359	35,030	121389
General Food Distribution – CBT	Cash / Voucher	600,000	2,842,200	3,442,200
Prevention of Stunting (PLW)	Commodity	778	494	1,272
Prevention of stunting (6-23 months)	Commodity	1 148	507	1,655
Prevention of Micronutrient Deficiencies (24-59 months)	Commodity	1 316	4	1,320
Treatment of MAM	Commodity	194	127	324
Hospital patients	Commodity	1 924	678	2,602
HEB (new arrivals)	Commodity	215	22	237
TOTAL MT	Commodity	91 932	36,861	129,793
US \$	Cash	600,000	2,842,200	3,442,200

* Figures rounded

Hazard / Risk Assessment and Preparedness Planning

29. The scale of the budget revision proposed herein is aligned to the ongoing discussions on the 2017 contingency planning and Regional Refugee Response Plan currently being developed with UNHCR and partners. However, the situation remains volatile both in Burundi and in DRC, with limited options for the return of the current refugees and a high probability of increased arrivals in 2017. The risks are in line with the 2016 Risk Register and mitigation actions for the country office. Should the situation change or deteriorate, further revisions to this PRRO will be required in accordance with an updated assessment of needs. Additional risks might arise, in case of massive refugee influx, given the current overcrowding of existing camps and the limited options for the opening of new sites. WFP will closely follow up on the discussions between UNHCR and government on allocation of additional space for the opening of the new camp and determine operational needs based on its location.
30. The success of both the CBT programme and the partnership with an INGO to promote complementary income-generating opportunities, will largely depend on a review of the Government's refugee encampment policy which limits refugee movement beyond the camp setting that discourages refugees from engaging in livelihood activities. WFP will continue to work with partners to advocate for the importance of complementary interventions that move beyond a perpetual care and maintenance approach for the refugees.

Approved by:

Ertharin Cousin
Executive Director, WFP

Date:

ANNEX I-A

PROJECT COST BREAKDOWN			
	Quantity (mt)	Value (USD)	Value (USD)
<i>Food Transfers</i>		-	-
Cereals	23,992	9,038,897	28,298,820
Pulses	7,075	3,330,252	
Oil and fats	1,278	1,240,166	
Mixed and blended food	4,216	2,614,149	
Others	300	141,154	
Total Food Transfers	36,861	16,364,618	
External Transport			
LTSH			9,041,475
ODOC Food			1,653,033
Food and Related Costs ¹²			
C&V Transfers			2,842,200
			3,792,877
C&V Related costs			950,677
Cash and Vouchers and Related Costs		-	
Capacity Development & Augmentation		-	
<i>Direct Operational Costs</i>			32,091,697
Direct support costs (see Annex I-B)			4,609,551
Total Direct Project Costs			36,701,248
Indirect support costs (7,0 percent) ¹³			2,569,087
TOTAL WFP COSTS			

¹² This is a notional food basket for budgeting and approval. The contents may vary.

¹³ The indirect support cost rate may be amended by the Board during the project.

ANNEX I-B

DIRECT SUPPORT REQUIREMENTS (USD)	
WFP Staff and Staff-Related	
Professional staff [*]	1,751,625
General service staff ^{**}	800,087
Danger pay and local allowances	-
Subtotal	2,551,712
Recurring and Other	480,164
Capital Equipment	396,420
Security	510,110
Travel and transportation	566,145
Assessments, Evaluations and Monitoring¹	105,000
TOTAL DIRECT SUPPORT COSTS	4,609,551

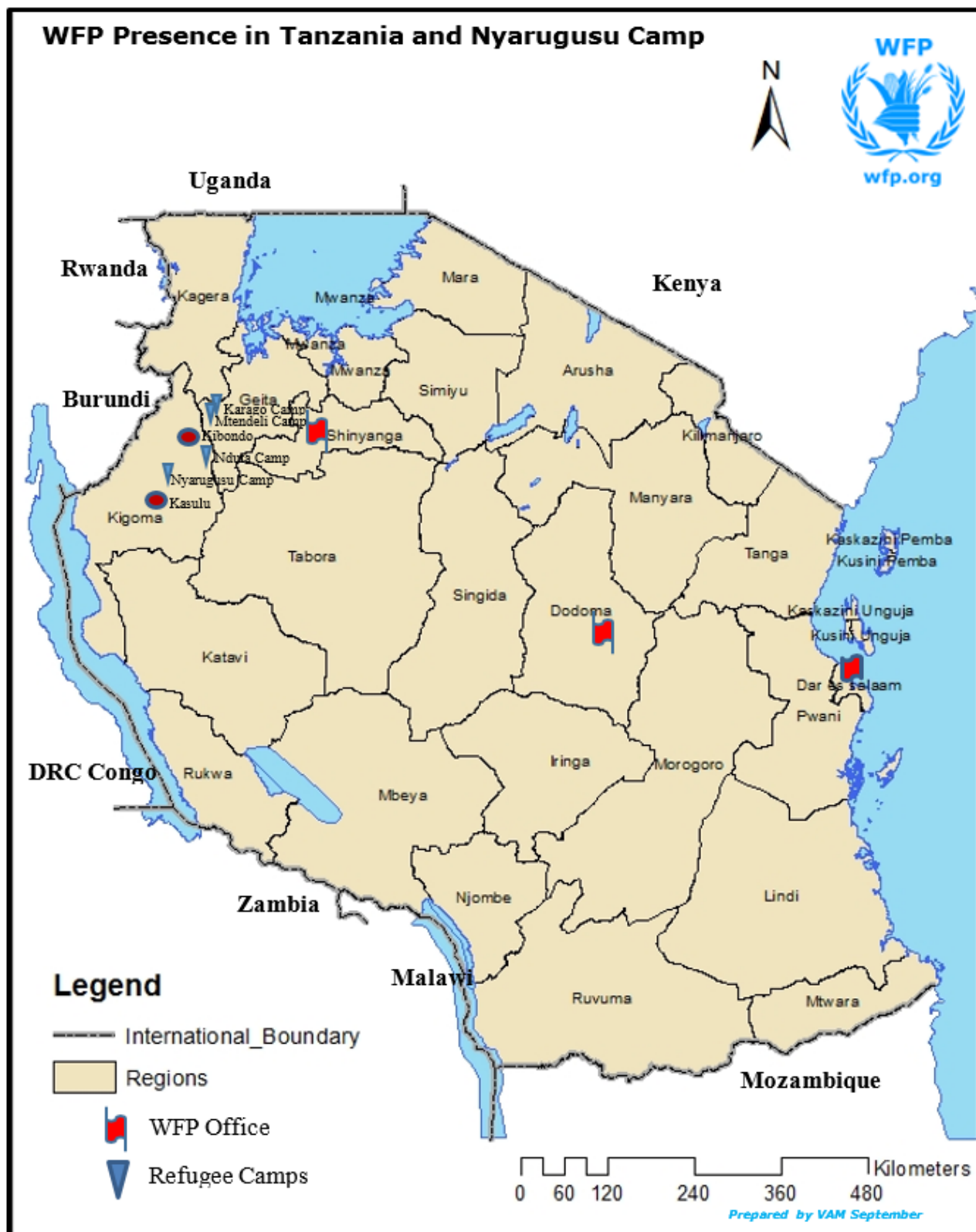
* Costs to be included in this line are under the following cost elements: International Professional Staff (P1 to D2), Local Staff - National Officer, International Consultants, Local Consultants, UNV

** Costs to be included in this line are under the following cost elements: International GS Staff, Local Staff - General Service, Local Staff - Temporary Assist. (SC, SSA, Other), Overtime

¹ Reflects estimated costs when these activities are performed by third parties. If WFP Country Office staff perform these activities, the costs are included in Staff and Staff Related and Travel and Transportation.

ANNEX III

MAP



ACRONYMS USED IN THE DOCUMENT

BR	Budget revision
CBT	Cash Based Transfers
DRC	Democratic Republic of Congo
GAM	Global Acute Malnutrition
GFD	General Food Distribution
HEB	High Energy Biscuits
MAM	Moderate Acute Malnutrition
MUAC	Mid-upper arm circumference
PLW	Pregnant and lactating women
SAM	Severe Acute Malnutrition
UNHCR	Office of the United Nations High Commissioner for Refugees
WFP	World Food Programme