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PROJECTS FOR EXECUTIVE BOARD APPROVAL

Agenda item 8

For approval



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BUDGET INCREASE TO PROTRACTED RELIEF AND RECOVERY OPERATION – INDONESIA 10069.1

Assistance to Tsunami Recovery and Nutritional Rehabilitation

	Current Budget	Increase	Revised Budget
	Cost (United States dollars)		
WFP Food Cost	53,440,693	50,033,150	103,473,843
Total Cost to WFP	108,323,608	88,127,239	196,450,847

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NOTE TO THE EXECUTIVE BOARD

This document is submitted for approval by the Executive Board.

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.

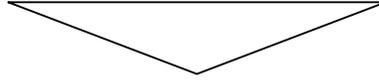
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Should you have any questions regarding matters of dispatch of documentation for the Executive Board, please contact Ms C. Panlilio Administrative Assistant, Meeting Servicing and Distribution Unit (tel.: 066513-2645).



DRAFT DECISION*



The Board approves the budget increase to PRRO Indonesia 10069.1 “Assistance to Tsunami Recovery and Nutritional Rehabilitation” (WFP/EB.2/2005/8-C/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.



NATURE OF THE INCREASE

1. Indonesia is a low-income food-deficit country. Multiple crises in the 1990s contributed to economic decline and increased levels of poverty. Poverty rates have declined marginally in the last seven years but are still high; malnutrition is widespread. WFP launched an emergency operation (EMOP) in 1998 and continued its support through two protracted relief and recovery operations (PRROs). PRRO 10069.1, approved by the Board in January 2004, started on 1 January 2005 for three years to 31 December 2007. It does not cover beneficiaries in Aceh and Nias.
2. In response to the tsunami on 26 December 2004, WFP established regional EMOP 10405.0, which included assistance to people in Indonesia; it will end in December 2005. The purpose of this budget revision is to incorporate assistance to tsunami and earthquake victims in Aceh and Nias into PRRO 10069.1 for 2006 and 2007. In the light of the recent agreement between the Government and the Free Aceh Movement (GAM), PRRO 10069.1 may also assist people affected by the conflict in support of peace-building and community reintegration.
3. WFP has reviewed beneficiary caseloads across the country, including Greater Jakarta, East Java, Nusa Tenggara Timur (NTT), Nusa Tenggara Barat (NTB), South Sulawesi and areas hit by the tsunami and earthquake in Aceh and Nias.
4. This budget revision is requested to cover an additional 1.2 million beneficiaries in Aceh and Nias in 2006 and 934,000 beneficiaries in 2007. The value of this increased assistance is estimated at US\$88 million.

JUSTIFICATION FOR THE BUDGET INCREASE TO PRRO 10069.1

Aceh and Nias

5. In Aceh, the tsunami disaster displaced 680,000 people and resulted in loss of their livelihoods.¹ An earthquake in March 2005 displaced 80,000 people in Simeulue (Aceh Province) and 50,000 in Nias (North Sumatra). During 2005, most resources were concentrated on immediate relief and, where possible, rehabilitation and restoration. WFP continued general food distribution (GFD) to the families most affected and displaced, and initiated school feeding and mother-and-child health (MCH) programmes as part of the current EMOPs; it is currently assisting 800,000 beneficiaries.
6. A joint food supply and demand assessment by WFP and the Food and Agriculture Organization of the United Nations (FAO)² in May 2005 in Aceh Province and Nias Island indicated that those who are still displaced in camps and temporary living shelters (TLCs) or living with host families should therefore receive relief food aid until they can rebuild homes and livelihoods. Once recovery activities start, relief assistance should enable these families to spend time and resources on restoring their lives.
7. A nutrition assessment led by the Government and supported by the United Nations Children's Fund (UNICEF) and WFP³ stated that high prevalence of anaemia among

¹ WFP Post-Tsunami Emergency Needs Assessment in Aceh Province, Indonesia, January–February 2005.

² FAO/WFP Food Supply and Demand Assessment for Aceh Province and Nias Island (Indonesia), 5 May 2005.

³ A comprehensive Assessment of Nutrition and its determinants in Tsunami affected districts in Nanggore Aceh Darussalam. Government of Indonesia, UNICEF and WFP, February to March 2005.



children, low protein intake, low consumption of fresh foods and low micronutrient supplementation indicated that emergency relief had had the greatest impact on the macronutrient situation and very little on micronutrients. It recommended a targeted nutrition programme for the worst areas through the MCH component. UNICEF is currently undertaking nutrition surveillance in Aceh Province,⁴ the preliminary results of which will be available by mid-November 2005. This will guide WFP in targeting, planning and expanding its MCH programmes.

8. A food and labour market analysis and monitoring in Aceh⁵ noted that the people affected need food aid until the rehabilitation programme reaches them. Food should be withdrawn gradually, however, in line with the rate of recovery and as internally displaced people (IDPs) recover to their livelihoods and incomes. The analysis stated that the living conditions and livelihoods of IDPs should be reassessed regularly to improve distribution of food aid.
9. Some IDPs have returned home, built temporary structures and are finding ways to supplement their incomes, but there is no evidence yet of large-scale reconstruction in the province.
10. On the basis of the recommendations of the assessments and the possibility of supplementary resources being available, WFP proposes to continue GFD in 2006 only and to accelerate targeted programmes for the most vulnerable groups through school feeding, MCH, nutritional rehabilitation and, where appropriate, food-for-work (FFW) activities.
11. The proposed budget revision includes:
 - making recovery and reconstruction activities in Aceh and Nias part of PRRO 10069.1;
 - increasing geographical coverage to Aceh province to support peace-building, reconciliation and reintegration;
 - GFD for populations affected by the tsunami; and
 - assistance to people affected by the conflict in Aceh, including returnees, through a combination of FFW and food-for-training (FFT) activities.
12. To respond flexibly to the needs of the targeted population in 2006 and 2007, WFP will use the findings from a rapid food security assessment and a joint crop and food supply assessment mission with FAO scheduled for October 2005 that will provide additional information on food availability, status of livelihood restoration and market trends, which will enable modifications to geographic and beneficiary targeting.
13. WFP will continue to phase down GFD to IDPs and others who have lost their livelihoods as they recover their livelihoods. The initial planning figures for 2006 are 75,000 beneficiaries for full rations and 424,000 beneficiaries for reduced rations. WFP will review the GFD requirement for 2007 on the basis of an in-depth food security assessment and self-reliance study planned for mid-2006.
14. As GFD is phased down, targeted programmes will expand as follows: in 2006, WFP expects to feed 159,000 beneficiaries through MCH care, 433,000 through school feeding and 17,000 through FFW; in 2007, the planned number of MCH care beneficiaries is

⁴ Led by Department of Health in Aceh Province, supported by UNICEF and WFP.

⁵ Food and Labour Market Analysis and Monitoring System in Nanggroe Aceh Darussalam (NAD) Province, by the Indonesian Centre for Agro-Socio-Economic Research and Development (ICASERD), May–June 2005.



234,000; school feeding will reach 450,000 beneficiaries; FFW will cover 50,000 beneficiaries.

15. WFP will monitor the situation regularly and adjust activities according to the pace of recovery. It will strengthen its monthly monitoring of food and labour markets to provide the basis for initiating the self-reliance study. This budget revision reflects the move towards targeted feeding in Aceh and is in line with the Government's recovery plan, which calls for food aid until peoples' livelihoods are restored.

WFP's Support for the Peace Process in Aceh

16. WFP has been requested by the Government and GAM to support the peace agreement signed on 15 August 2005. People affected by conflict are concentrated in northeastern coastal areas, parts of Aceh Barat Daya and the interior districts of Aceh Tengah and Bener Meriah. The objective of WFP assistance would be rehabilitation of farmlands through FFW and FFT activities. Assistance may be required in the form of short-term GFD to returnees while they reintegrate into society and find sustainable sources of income.

Other Areas of Indonesia

17. Despite improved access to food and marginal improvement in the nutritional status of vulnerable groups, especially children under 5 and women, continuing high rates of malnutrition continue to cause concern in the Government. In collaboration with the Ministry of Agriculture, WFP has produced a comprehensive food-security atlas of Indonesia that identifies 100 priority districts requiring interventions. In response to a government request, WFP plans to expand its nutritional rehabilitation programme to tuberculosis (TB) patients in poor and food-insecure areas, including Nusa Tenggara Timur (NTT), Nusa Tenggara Barat (NTB), eastern Java and greater Jakarta.

NUTRITIONAL CONSIDERATIONS

18. Differences have been reported in the level of livelihood recovery in Aceh. WFP has identified areas where recovery has been particularly slow, malnutrition rates are high and economic activities remain poor and where the targeted beneficiaries will continue to receive a full ration during periods of 2006 to prevent increases in malnutrition rates and adoption of negative coping mechanisms. The ration has additional pulses to increase protein intake and meet WFP/Sphere standards. WFP will carry out a rapid food security assessment in the last quarter of 2005 to identify vulnerable areas and households.
19. A reduced ration providing 1,500 kcal will be distributed to 85 percent of the GFD caseload, because these families have partially regained their livelihoods but need supplementary food assistance. Their self-reliance will be regularly monitored and beneficiary numbers adjusted accordingly. WFP will cooperate with partners in piloting alternatives to GFD such as voucher projects during the last quarter of 2005, utilizing markets.
20. Nutritional assessments and surveillance reports show that in Aceh children under 5 are particularly vulnerable in terms of dietary intake. WFP has planned a feasibility study in collaboration with UNICEF and the Ministry of Public Health for a locally produced blended food – *Makanan Pendamping Air Susu Ibu* (MPASI) or its equivalent – to be used to address this problem. For 2006–2007, biscuits for children under 5 have been replaced in the budget with corn-soya blend (CSB) with oil and sugar giving the same kcal value



until the feasibility study has determined the final product. WFP will work with the Government to ensure that fortified products meet its quality standards.

TABLE 1: DAILY RATION SCALE BY PROGRAMME COMPONENT (g/day/person)						
Commodity	GFD (full)	GFD (reduced)	TB programme	School feeding	MCH programme	FFW/FFT programme
Rice	400	333	333			500
Vegetable oil	25	25			5	30
Canned fish	33	16				
Beans	50					
CSB					75	
Sugar					8	
Fortified biscuits				50	50	
Fortified noodles					167	
kcal	2 000	1 500				
Protein %	9	7				
Fat %	17	18				

THE OBJECTIVES OF WFP ASSISTANCE

21. The objectives of WFP assistance in PRRO 10069.1 are to:
 - a) prevent deterioration in the nutritional status of the population affected by the disaster;
 - b) improve the food and livelihood security of the targeted food-insecure households and increase their resilience to shocks;
 - c) improve the livelihoods of TB-affected households;
 - d) improve learning capacity among primary schoolchildren; and.
 - e) improve the nutritional and health status of children under 5 and pregnant and lactating women in vulnerable areas.
22. The goal is to contribute to the nutritional rehabilitation of vulnerable groups and to the recovery of livelihoods of people affected by conflict and those affected by the tsunami in Aceh and Nias, contributing to the Millennium Development Goals (MDGs) and the National Nutrition Strategy in the most vulnerable areas.

MAIN COMPONENTS OF THE PRRO

23. GFD will target people affected by the tsunami and earthquake, particularly IDPs living in temporary camps or with host families. WFP will continue GFD through the Cooperative for Assistance and Relief Everywhere (CARE) and World Vision.
24. The Nutritional Rehabilitation Programme through Local Health Centres (Posyandu) will provide fortified blended food in Aceh and Nias for children under 5 and fortified noodles for pregnant and lactating women, and a monthly ration of fortified biscuits in other areas of Indonesia. Local non-governmental organizations (NGOs) will be engaged by WFP to supervise distribution, targeting, registration and reporting.



25. Under the primary school feeding programme, fortified biscuits will be distributed to children by teachers and consumed in the classroom. Discussions are under way with local government institutions and NGOs to combine this programme with nutrition education, basic sanitation and infrastructure renovation. WFP will target the poorest areas prioritized by the Government that are not supported by any other school feeding programme and will seek local government allocations for deworming.
26. In the poorest communities of Greater Jakarta, East Java, NTT and NTB – and possibly in Aceh, where there is high prevalence of TB and programmes of directly observed treatment with short-course chemotherapy (DOTS) sponsored by the World Health Organization (WHO) – WFP will provide patients with a monthly ration of rice. Local NGO partners will deliver to health clinics, where staff will distribute the rations, and monitor beneficiary registration, accountability and the impact of WFP food rations on detection and cure rates.
27. FFW/FFT activities in East Java, NTT and Aceh will be programmed in line with the needs of food-insecure communities, particularly IDPs identified by NGO partners, who will be responsible for activity and beneficiary selection, logistics, distribution and programme supervision. Involvement of women in the identification process and as participants will be monitored.
28. WFP's community development projects (CDPs) will continue to use funds generated by sales of OPSM rice through a trust fund to train local NGOs in implementing small-scale projects to promote livelihoods and food security and to promote reconciliation among divided communities, as agreed with the Government.
29. Capacity-building measures supported by vulnerability analysis and mapping (VAM) will be based on the food-insecurity atlas, involving training local partners in nutrition, livelihood surveillance systems, nutrition mapping, hunger surveys, nutrition surveillance and market surveys; a pilot phase started in August 2005 in five districts in Aceh.

MODALITY OF FOOD DISTRIBUTION TO BENEFICIARIES

30. WFP will channel food aid through the components of the PRRO to the poorest areas and communities, coordinated by the Ministry for People's Welfare (MENKOKESRA) and in consultation with the ministries of health, education, social affairs and agriculture, and the National Coordinating Board for Disaster Management and Internally Displaced People (BAKORNAS). Partner NGOs and government departments will continue to be responsible for implementing the activities, distributing the food, and monitoring and reporting.
31. Cooperating partners will continue to collect food at extended delivery points (EDPs) and transport it to final distribution points (FDPs) for distribution, working with local authorities to promote ownership and sustainability. WFP will continue to monitor joint food distribution and beneficiary contacts with partner NGOs to verify access and the utilization of food.
32. Beneficiaries will collect the food from 5,000 distribution points at health centres, primary schools or as agreed with communities. Rice is usually provided through the national logistics agency (BULOG). Biscuits and noodles are procured locally, mainly in Central Java and Medan in Sumatra.



PROGRAMME MONITORING AND MANAGEMENT

33. The country office has established a monitoring system for the operation and will continue to analyse information for programme management. It also plans to evaluate the PRRO during the last quarter of 2006, the recommendations of which and the findings of the food security and nutrition assessments will help to strengthen WFP's response to the most food-insecure people.

Beneficiaries	2006	2007
Aceh and Nias	1 177 500	934 000
Other areas of Indonesia	963 500	964 500
Total	2 141 000	1 898 500

Food Commodities	Aceh and Nias	Other Areas	Total
Rice	101 412	14 485	115 897
Vegetable oil	5 034	744	5 778
Canned fish	3 383	0	3 383
Beans	1 171	0	1 171
Biscuits	7 441	14 112	21 553
Noodles	3 812	8 064	11 876
CSB	8 168	0	8 168
Sugar	871	0	871
Wheat	19 444	37 965	57 409
Total	150 736	75 370	226 106



TABLE 4: FOOD REQUIREMENTS 2006–2007, BY PROGRAMME COMPONENT (mt)

	Rice	Veg. oil	Canned fish	Beans	CSB*	Sugar	Biscuits	Nood.	Wheat**	Total
GFD										
Other areas of Indonesia										
Aceh and Nias	61 412	4 489	3 383	1 171						70 454
NRP/Posyandu***										
Children under 5										
Other areas of Indonesia							7 560		14 728	22 288
Aceh and Nias		545			8 168	871				9 583
Pregnant and lactating women										
Other areas of Indonesia								8 064	10 473	18 537
Aceh and Nias								3 812	4 948	8 760
NRP/SF										
Schoolchildren										
Other areas of Indonesia							6 552		12 764	19 316
Aceh and Nias							7 441		14 496	21 937
TB programme										
Other areas of Indonesia	5 040									5 040
Aceh and Nias										
FFW/FFT										
Other areas of Indonesia	9 445	744								10 189
Aceh and Nias	40 000									40 000
Total	115 897	5 778	3 383	1 171	8 168	871	21 553	11 876	57 409	226 106
Other areas of Indonesia	14 485	744	0	0	0	0	14 112	8 064	37 965	75 370
Aceh and Nias	101 412	5 034	3 383	1 171	8 168	871	7 441	3 812	19 445	150 736

* To be developed and tested in Aceh with UNICEF and the Government.

** 57,409 mt of wheat will be converted and distributed as 9,237 mt of biscuits and 5,090 mt of noodles, which is 30 percent of the biscuits and noodles to be distributed.

Estimated conversion rates: 1 mt of wheat = 0.33 mt of noodles; 1 mt of wheat = 0.22 mt of biscuits.

*** Nutritional rehabilitation programme/Pos Pelayanan Terpadu (local health centres)



TABLE 5: BENEFICIARIES BY PROGRAMME COMPONENT AND BY YEAR			
Beneficiaries	2005	2006	2007
GFD			
Current PRRO	0	0	0
Revised PRRO	No change	498 750	0
Children under 5			
Current PRRO	193 000	300 000	300 000
Revised PRRO	No change	422 500	480 000
Pregnant and lactating women			
Current PRRO	129 000	96 000	96 000
Revised PRRO	No change	132 750	150 000
NRP/SF			
Schoolchildren			
Current PRRO	359 000	390 000	390 000
Revised PRRO	No change	826 000	840 000
TB programme			
Current PRRO	60 500	105 000	105 000
Revised PRRO	No change	105 000	105 000
OPSM			
Current PRRO	690 000	0	0
Revised PRRO	No change	0	0
FFW/FFT			
Current PRRO	290 000	72 500	73 500
Revised PRRO	No change	156 000	323 500
Current PRRO total	1 721 500	963 500	964 500
Revised PRRO total	No change	2 141 000	1 898 500

TABLE 6: SUMMARY OF REVISED FOOD REQUIREMENTS (mt)			
Commodity	Current	Increase	Revised
Wheat	189 941	(69 218)	120 723
Noodles	4 317	8 997	13 314
Biscuits	6 498	17 221	23 719
Rice	70 000	69 229	139 229
Vegetable oil	1 131	5 046	6 177
Canned fish	0	3 383	3 383
Fortified blended food	0	8 168	8 168
Sugar	0	871	871
Beans	0	1 171	1 171
Total	271 887	44 868	316 755



RECOMMENDATION OF THE EXECUTIVE DIRECTOR

34. The proposed two-year budget revision for Indonesia PRRO 10069.1, which involves an additional commitment of 44,868 mt of food at a cost of US\$88 million, is recommended to the Board for approval.



ANNEX I

PROJECT COST BREAKDOWN			
	Quantity (mt)	Average cost per mt	Value (US\$)
WFP COSTS			
A. Direct operational costs			
Commodity*			
- Wheat	(69 218)	135	(9 332 456)
- Rice	69 229	397	27 517 494
- Noodles	8 997	814	7 327 633
- Biscuits	17 221	833	14 352 848
- Oil	5 046	633	3 193 681
- Canned fish	3 383	1 200	4 059 600
- Beans	1 171	380	444 980
- CSB	8 168	265	2 164 520
- Sugar	871	350	304 850
Total commodities	44 868		50 033 150
External transport			(951 239)
LTSH			15 821 987
Other direct operational costs			1 324 370
Total direct operational costs			66 228 268
B. Direct support costs			16 133 638
C. Indirect support costs (7 percent of total direct costs)			5 765 333
TOTAL WFP COSTS			88 127 239

*This is a notional food basket used for budgeting and approval purposes. The contents may vary depending on the availability of commodities



ANNEX II

DIRECT SUPPORT REQUIREMENTS (US\$)	
Staff	
International professional staff	6 870 600
National professional officers	196 200
National general service staff	2 605 600
Temporary assistance	63 000
Overtime	59 800
Incentives	1 716 800
International consultants	758 100
National consultants	87 800
Insurance subscribers	278 087
Staff duty travel	1 011 340
Staff training and development	154 990
Subtotal	13 802 317
Office expenses and other recurrent costs	
Rental of facility	368 541
Utilities (general)	112 550
Office supplies	89 400
Communication and IT services	926 850
Insurance	630
Equipment repair and maintenance	62 100
Vehicle maintenance and running costs	610 950
Other office expenses	120 600
United Nations organizations services	61 000
Hospitality	(4 500)
Subtotal	2 348 121
Equipment and other fixed costs	
Furniture, tools and equipment	28 000
Vehicles	(67 500)
TC/IT equipment	22 700
Subtotal	(16 800)
TOTAL DIRECT SUPPORT COSTS	16 133 638



ANNEX III: LOGICAL FRAMEWORK MATRIX FOR INDONESIA PRRO 10069.1

Results hierarchy	Performance indicators	Risks, assumptions
Impact	Impact indicators	
Contribute to the nutritional rehabilitation of vulnerable groups and to the recovery of livelihoods of affected people in areas affected by conflict and the tsunami in Aceh and Nias (Northern Sumatra).	National level nutrition rates of vulnerable population. Public expenditure on recovery and rehabilitation in Aceh and Nias.	
Outcomes	Outcome indicators	
1. Preventing deterioration in the nutritional status of disaster-affected populations.	1.1. Prevalence of global acute malnutrition among children under 5, disaggregated by sex and age. 1.2. Crude mortality rate among children under 5 is less than 2/10,000/day.	No further shocks undermine the ability of the population to cope and improve their food security.
2. Targeted food-insecure households improve their food and livelihood security and resilience to shocks.	2.1. Household perception on securing reliable and sustainable access to food and livelihoods: % of households scoring 1 and 2 on a scale of 1 to 5 of food and livelihood security. 2.2. Proportion of households reporting assets created/gained.	Any further disasters are not of unprecedented magnitude. The Government's commitment and support to the operations continues.
3. Livelihoods of TB-affected households improved.	3.1. Number of TB patients reporting economic and social benefits after complete recovery against the total number of TB patients treated.	Recovery activities are initiated on time and complementary non-food resources are available to the affected population.
4a. Improved nutritional status of targeted primary schoolchildren.	4a.1. Prevalence of anaemia among primary schoolchildren. 4a.2. Percentage of girls and boys in primary schools reporting improved hygiene practices.	Surveillance systems are in place to determine the changing needs of the population.
4b. Improved attendance of the targeted primary schoolchildren.	4b.1. Percentage of girls and boys, by grade, in targeted primary schools maintaining attendance rate above 80 percent.	Timely food needs and
4c. Improved capacity of boys and girls to concentrate and learn in the targeted primary schools.	4c.1. Teachers' perception of children's ability to concentrate and learn as a result of eating fortified biscuits.	



ANNEX III: LOGICAL FRAMEWORK MATRIX FOR INDONESIA PRRO 10069.1

Results hierarchy	Performance indicators	Risks, assumptions
5. Improved nutritional and health status of children under 5 and pregnant and lactating women in vulnerable areas.	5.1. Prevalence of wasting (weight for height) among children under 5 is reduced by 4 percent, by sex. 5.2. Prevalence of stunting (height for age) among children under 5 age is reduced by 10 percent, by sex. 5.3. Number of pregnant and lactating women with nutritional anaemia decreased by 10 percent. 5.4. Percentage of pregnant and lactating women using MCH services at community health posts.	livelihood needs assessments will guide the adjustment of the programme.
Key Outputs	Output indicators	
1.1. Timely provision of food in sufficient quantities for targeted beneficiaries affected by disaster.	1.1.1. Actual beneficiaries receiving WFP food assistance through GFD as a percentage of planned beneficiaries, disaggregated by sex. 1.1.2. Actual quantity of commodities distributed through GFD as a percentage of planned distributions, by type of commodity. 1.1.3. Percentage of GFD occurring more than 7 days later than the planned date of distribution. 1.1.4. Percentage of women participating in food committees. 1.1.5. Number of household rations cards issued in the names of women and men. 1.1.6. Number of women in leadership positions in the food committees or in communities responsible for food distribution.	Donors provide timely resources. Cooperating partners' commitment to implement the programme remains high. Partners and suppliers provide timely and cost effective inputs. Free access to implementation areas is granted.
2.1. Construction and rehabilitation of communal infrastructure supported through trust funds with skill training provided for participating beneficiaries.	2.1.1. Number and type of communal assets created. 2.1.2. Number of beneficiaries participating in the CDP activities, disaggregated by sex. 2.1.3. Number of beneficiaries receiving WFP food commodities as a percentage of planned beneficiaries, disaggregated by sex. 2.1.4. Number of beneficiaries trained, by sex, type of training.	



ANNEX III: LOGICAL FRAMEWORK MATRIX FOR INDONESIA PRRO 10069.1

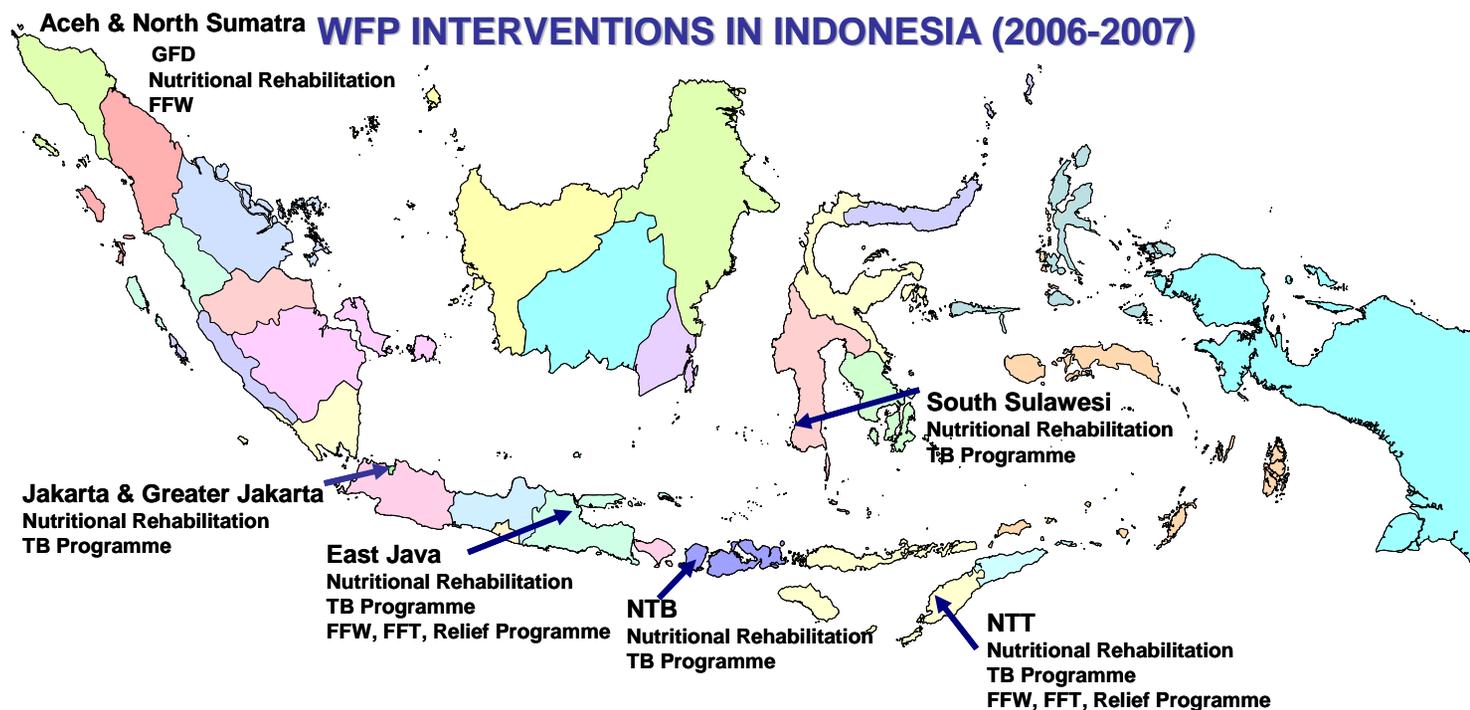
Results hierarchy	Performance indicators	Risks, assumptions
2.2. Creation and rehabilitation of small-scale agricultural and irrigation assets through FFW/FFT and skill training for beneficiaries.	2.2.1. Number and type of communal assets created. 2.2.2. Number of beneficiaries participating in the FFW activities, disaggregated by sex. 2.2.3. Number of beneficiaries receiving WFP food commodities as a percentage of planned beneficiaries, disaggregated by sex. 2.2.4. Actual quantity of commodities distributed through FFW/FFT as a percentage of planned distributions, by type of commodity. 2.2.5. Number of beneficiaries trained, by sex, type of training.	
3.1. Registered TB patients receive monthly food rations.	3.1.1. Number of TB patients receiving WFP food commodities as a percentage of planned TB patients. 3.1.2. Actual quantity of commodities distributed through GFD as a percentage of planned distributions, by type of commodity.	
3.2. Health and awareness activities are carried out in health centres.	3.2.1. Number of awareness campaigns conducted. 3.2.2. Number of people trained, by type of training disaggregated by sex.	
4.1. Schoolchildren in targeted schools receive fortified biscuits.	4.1.1. Number of primary schoolchildren receiving fortified biscuits, disaggregated by sex. 4.1.2. Actual quantity of commodities distributed through school feeding as a percentage of planned distributions, by type of commodity.	
4.2. Health and nutrition education activities are carried out by the teachers in the targeted primary schools.	4.2.1. Number of nutrition and health education sessions conducted as a percentage of planned sessions. 4.2.2. Number of persons trained, by type of training, disaggregated by sex.	
5.1. Children under 5 and pregnant and lactating women receive fortified food rations.	5.1.1. Number of children under 5 receiving fortified biscuits, disaggregated by sex. 5.1.2. Actual quantity of commodities distributed as a percentage of planned distributions, by type of commodity. 5.1.3. Number of pregnant and lactating women receiving fortified food rations. 5.1.4. Actual quantity of commodities distributed as a percentage of planned distributions, by type of commodity.	
5.2. Health and nutrition education activities are carried out in MCH centres.	5.2.1. Number of health and nutrition education sessions conducted as against planned sessions. 5.2.2. Number of people trained by type of training, disaggregated by sex.	



ANNEX III: LOGICAL FRAMEWORK MATRIX FOR INDONESIA PRRO 10069.1

Results hierarchy	Performance indicators	Risks, assumptions
Common output indicator for all programme components		
Capacity of cooperating partners strengthened in the management of the programme, including food distribution and monitoring.	Number of contracts signed with cooperating partners, disaggregated by programme components. Number of cooperating partner staff trained in logistics and food management, disaggregated by programme components. Number of cooperating partners reporting on activities as per agreed reporting deadlines, disaggregated by programme components.	





	Year 2006	Year 2007
Nutritional Rehabilitation Programme/Posyandu		
Children U5	422,500	480,000
Pregnant Women and Lactating Mother	132,750	150,000
Nutritional Rehabilitation Programme/SF	826,000	840,000
TB Programme	105,000	105,000
FFW, FFT, Relief Programme	156,000	323,500
General Food Distribution Aceh	498,750	
Total Beneficiaries	2,140,600	1,898,500

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

BAKORNAS	National Coordinating Board for Disaster Management and Internally Displaced People
BULOG	<i>Badan Urusan Logistik</i> (National Food Logistics Agency)
CARE	Cooperative for Assistance and Relief Everywhere
CDP	community development project
CSB	corn-soya blend
DOTS	directly observed treatment with short-course chemotherapy
EDP	extended delivery point
EMOP	emergency operation
FAO	Food and Agriculture Organization of the United Nations
FDP	final distribution point
FFT	food for training
FFW	food for work
GAM	Free Aceh Movement
GFD	general food distribution
ICASERD	Indonesian Centre for Agro-Socio-Economic Research and Development
IDP	internally displaced person
MCH	mother-and-child health
MDG	Millennium Development Goal
MENKOKESRA	Coordinating Ministry for People's Welfare
MPASI	<i>Makanan Pendamping Air Susu Ibu</i> (Complementary Feeding)
NAD	Nanggroe Aceh Darussalam
NGO	non-governmental organization
NRP	nutritional rehabilitation programme
NTB	Nusa Tenggara Barat
NTT	Nusa Tenggara Timur
ODB	Asia Regional Bureau
OPSM	<i>Operasi Pasar Swadaya Masyarakat</i> (Subsidized Rice Programme)
POSYANDU	<i>Pos Pelayanan Terpadu</i> (local health centres)
PRRO	protracted relief and recovery operation
SP	Strategic Priority
TB	tuberculosis
UNICEF	United Nations Children's Fund
VAM	vulnerability analysis and mapping
WHO	World Health Organization

