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**Executive Board  
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**Rome, 15–17 May 2002**

# **COUNTRY PROGRAMMES**

**Agenda item 5**

***For approval***

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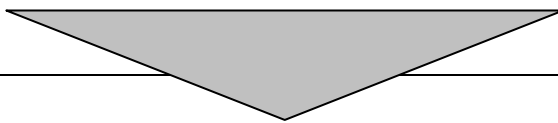
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## **COUNTRY PROGRAMME— ZAMBIA (2002–2006)**

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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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# Executive Summary

Zambia, one of the world's poorest countries with a gross domestic product (GDP) per capita of only US\$250, is classified as a least developed country (LDC). Its population is 10.28 million. Zambia is faced with one of the highest adult HIV/AIDS prevalence levels in the world at 20 percent. Orphans, largely a result of the HIV/AIDS pandemic, reportedly number 1 million. Poverty and food insecurity remain widespread in rural and urban areas. The 2001 United Nations Development Programme (UNDP) human development report ranked Zambia 143<sup>rd</sup> out of the 162 countries in the human development index (HDI). Gender equity is a critical issue in Zambia. According to the UNDP gender-related development index (GDI), Zambia scored 0.413, placing it in the lower tier of countries. The level has continued to decline over the last two years.

The WFP Country Programme (CP) presents a programme of activities for 2002–2006. It is based on the country strategy outline (CSO) for Zambia, which was endorsed by the Executive Board in October 2001.

To synchronize this plan with other United Nations agency programmes, WFP is reducing its current CP cycle (1998–2002) by one year. This CP (2002–2006) includes some activities already initiated under the previous CP. It has been prepared in line with the 2000 United Nations common country assessment (CCA) for Zambia, and the first United Nations Development Assistance Framework (UNDAF), for which the Government has stipulated three priority areas: (i) employment; (ii) social services; and (iii) governance, and three crosscutting themes: HIV/AIDS, gender and regional integration. This CP will address UNDAF priorities (i) and (ii) and respond to the two crosscutting themes of HIV/AIDS and gender.

The goal of the CP is to enhance the capability of hungry poor households, particularly those headed by women, children and elderly people, to take charge of their own development on a sustainable basis and withstand natural disasters while addressing gender and the HIV/AIDS pandemic.

The CP focuses on three main elements:

- to improve children's access to basic education, especially girls, orphans and those from hungry-poor households, and improve completion rates;
- to improve nutritional status and reduce malnutrition-related mortality among chronically malnourished children under 5, expectant and nursing mothers and people living with HIV/AIDS; and
- to improve food security and well-being among hungry-poor households, particularly in areas vulnerable to natural disasters.

In accordance with decision 1999/EB.A/2 of the Executive Board, WFP focuses its development activities on five objectives. This CP addresses objectives (1), (2) and (3) of the enabling-development policy objective: (1) to enable young children and expectant and nursing mothers to meet their nutritional and health needs; (2) to enable poor households to invest in human capital through education and training; and (3) to make it possible for poor households to gain and preserve assets. It will mitigate the effects of recurrent natural disasters. WFP assistance will target an estimated 1,278,895 beneficiaries over the five-year period.

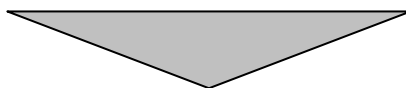
The CP will address these priorities through three basic activities and one supplementary activity. The basic activities will focus on improving the nutritional and health status of expectant and nursing mothers and malnourished children, increasing access to basic education, especially for



girls and orphans and contributing to the achievement of sustainable livelihoods and reduced vulnerability to disasters and food insecurity. The supplementary activity will be to extend supplementary feeding through home-based care. Activities will be concentrated in areas of chronic food insecurity, high rates of malnutrition and high prevalence of HIV/AIDS.

For the proposed Zambia CP (2002–2006), the Executive Director requests the Executive Board to approve, subject to the availability of resources, US\$24,896,953 million representing basic direct operational costs, and to endorse US\$5,170,862 million for supplementary activities.

## Draft Decision



The Board approves the Country Programme for Zambia (2002–2006)  
(WFP/EB.2/2002/5/3).



## STRATEGIC FOCUS: FOOD INSECURITY, HIV/AIDS AND MALNUTRITION

1. The 1998 national poverty-reduction action plan (NPRAP), with which all government and partnership programmes should conform, aims to reduce poverty levels from 73 percent in 1998 to 50 percent by 2005. The Government has drafted a national plan of action for nutrition, which aims to integrate nutrition into food security programmes at household level, and has approved the HIV/AIDS strategic plan. It has prepared the national poverty-reduction frameworks and is finalizing a poverty reduction strategy paper, which will be critical in the country's quest for debt relief. These strategies have a holistic approach to poverty reduction and the problem of HIV/AIDS. The present CCA/UNDAF has taken into account the Government's plans for poverty reduction, underscoring the threat of HIV/AIDS and poverty to the fundamental rights of the Zambian population.
2. In this context, the goal of the CP is to enhance the capability of hungry poor households, particularly those headed by women, children and the elderly, to take charge of their own development on a sustainable basis and withstand natural disasters while addressing gender issues and HIV/AIDS. The intended outcomes of the CP are:
  - improved access to basic education, especially for girls, orphans and other vulnerable children from hungry poor households;
  - improved nutritional status and survival among chronically malnourished and underweight children under 5, expectant and nursing mothers and people living with HIV/AIDS and their families; and
  - improved food security and well-being for hungry poor households, particularly in areas vulnerable to recurring natural disasters.
3. The CP will focus on three areas of intervention: (i) increased investment in basic education, especially for girls, orphans and other vulnerable children; (ii) nutrition, addressed through a nutrition programme for vulnerable groups (NPVG) combined with health activities provided by partners; and (iii) creation and management of assets for sustainable livelihoods in regions of chronic food insecurity that are prone to natural disasters and where HIV/AIDS is a major problem.
4. Design and implementation of CP activities will be guided by the following principles:
  - integration;
  - concentration;
  - coherence;
  - flexibility;
  - community involvement and empowerment;
  - gender mainstreaming and women's participation in decision-making;
  - HIV/AIDS awareness;
  - disaster preparedness and management;
  - advocacy on hunger;
  - partnership with government and development agencies; and
  - human capacity building.



5. In line with the national gender policy and WFP's Commitments to Women, at least 60 percent of beneficiaries will be girls and women. The 1999 gender empowerment measure (GEM) report ranked Zambia 82<sup>nd</sup> of 102 countries and showed that while the gender-related development index (GDI) of some countries has risen, that of Zambia has dropped from 0.427 to 0.413; it is ranked 126<sup>th</sup>. Women continue to be concentrated in marginal ventures of the urban informal sector and spend long hours to generate sufficient income, which undermines human development for urban households. The CP therefore addresses women's basic needs through improved health and nutrition for them and their children and facilitates equal access to resources, education and training, employment and productive assets.
6. These actions will be carried out in the framework of three basic activities in which WFP food resources will be combined with non-food resources:
  - assistance to basic education (ABE), 10,230 tons, 20 percent;
  - nutrition programme for vulnerable groups (NPVG), 20,926 tons, 41 percent; and
  - food-for-assets (FFA) activities including continued support to the Government for disaster management and mitigation, 20,093 tons, 39 percent.
7. Twenty-five percent of the resources from the three basic activities will be directed to HIV/AIDS-affected individuals and households, either in joint activities or in mainstreaming HIV/AIDS support. Subject to availability of resources, the supplementary programme will increase activities by giving 11,970 tons of food assistance to an additional 125,000 home-based care beneficiaries.
8. Geographical targeting of the activities, based on indicators of food insecurity, malnutrition and HIV/AIDS prevalence, has confirmed that the most chronically food insecure, vulnerable and disaster-prone districts are found in parts of the western lowlands and the southern, northern and eastern regions, peri-urban areas of Lusaka and the Copperbelt. WFP assistance will thus continue to be concentrated as shown in the map in Annex IV. The vulnerable are:
  - peasant farmers, most of whom are women;
  - the elderly and orphans, who depend on rainfed and shifting agriculture, have no access to credit and whose annual production is limited to three months' home consumption;
  - undernourished children under 5;
  - people affected by tuberculosis (TB)/HIV/AIDS; and
  - expectant and nursing mothers from vulnerable households.

The areas are characterized by low school enrolment and high drop-out rates. The latter is especially true of girls, who marry early to earn family income or who take care of siblings and sick family members. The same groups have limited ability to cope with recurring natural disasters.

## COUNTRY PROGRAMME ACTIVITIES

### Resources and Preparation Process

9. WFP has reduced the duration of its current programme cycle by one year to synchronize it with other United Nations agencies in Zambia. Given the depth and extent



of poverty in the targeted areas, the disparity of income levels and infrastructure with those of other regions and the effects of HIV/AIDS on productive capacity, an effective contribution to resolving these problems will require a WFP allocation higher than that of the recent past to reach a larger number of beneficiaries. It is therefore proposed to expand the FFA and NPVG activities and increase coverage of the ABE activity. The proposed total resource level is 63,219 tons of food (12,644 tons per year) at a direct operational cost of US\$30.06 million.

10. The activities planned for the CP are:

<b>RESOURCE ALLOCATION FOR THE COUNTRY PROGRAMME ACTIVITIES 2002–2006</b>
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Activity	Quantity of commodities (tons)	Distribution by activity (%)	Number of beneficiaries	Female beneficiaries (%)
<b>Basic activity 1:</b> Assistance to basic education	10 230	20	525 000	53
<b>Basic activity 2:</b> Nutrition programme for vulnerable groups	20 926	41	302 505	63
<b>Basic activity 3:</b> Food for assets	20 093	39	326 390	61
<b>Total basic activities</b>	<b>51 249</b>	<b>100</b>	<b>1 153 895</b>	
<b>Supplementary activity 1:</b> Nutrition programme for home-based care	11 970		125 000	61
<b>Total Country Programme</b>	<b>63 219</b>		<b>1 278 895</b>	

11. The 2002–2006 CP has been prepared in consultation with stakeholders from the Government, local authorities, donors and non-governmental organizations (NGOs) under the chairmanship of the Ministry of Community Development and Social Services (MCDSS). It reflects two of the priorities and two crosscutting issues identified by the Government for the United Nations system in Zambia: (i) employment: development of life and entrepreneurial skills and skills training, especially for young people; and (ii) social services: improved health and nutrition for undernourished expectant and nursing mothers, children under 5 and TB and HIV/AIDS patients, and education for all, with particular emphasis on girls and orphans. All three CP basic activities will address the impact of HIV/AIDS. Gender concerns will be mainstreamed at all levels. The three basic activities will be coordinated at household level. Food-assisted activities will be based on the needs and capacities of very poor and hungry people. WFP will ensure that food is acceptable and provides a balanced diet.

12. Since gender is a crosscutting theme for all United Nations agency programmes and a priority for the Government, WFP will continue to work with stakeholders, gender specialists and the Gender in Development Division (GIDD) to promote women's participation in the development process.

13. The CP will be complemented by the Government, United Nations agencies, NGOs and donors. The Government contribution will cover staff costs and operational costs at regional and district levels. WFP will mobilize complementary non-food items through donors and NGOs. WFP will continue to work with the World Bank and IMF on securing



additional highly-indebted poor countries (HIPC) programme funds for counterparts. In keeping with the Government's decentralization policy, greater emphasis will be placed on implementation through local authorities. The Government's direct contribution to programme is estimated at US\$3 million over the five-year period.

14. Within the UNDAF context, and as a member of the national disaster-management team, WFP will contribute to enhancing the disaster-response capability of the National Disaster Management and Mitigation Unit in the Office of the Vice-President. In emergencies, assessment and implementation will be carried out in collaboration with United Nations agencies.

## The Country Programme Activities

### 📌 *Basic Activity 1: Assistance to Basic Education*

#### Strategic Focus

15. This activity addresses food aid and development (FAAD) priority 2: to enable poor households to invest in human capital through education and training. ABE will improve access to basic education for children from hungry poor households and improve completion rates. Emphasis will be placed on the special needs of girls, orphans and other vulnerable children in the upper grades of primary school. The programme will support primary school feeding and deworming in pilot areas in the first year and extend to other areas as resources become available.

#### Problem Analysis

16. At national level, many school-age children remain out of school even though primary education is free. Primary-school enrolment increased by 0.2 percent during 1991–1999, far less than the population growth rate of 3.3 percent. High dropout and repetition rates compromise the efficiency of the school system. In 1999, primary school completion rates fell from 85 percent to 53 percent, mainly because of a sharp decline in household incomes and food-production levels, especially in rural areas. At this time, 84.6 percent of Zambians were living below US\$1 per day. This was exacerbated by radical socio-economic reforms. Girls continue to drop out, because they constitute a family labour reserve, taking care of younger children and the sick or being married off to gain income. Girls enrol in numbers equal to and in some provinces greater than boys. Gender balance is maintained up to grade 4; in grades 5–7, girls begin to drop out. In most schools they comprise less than 40 percent of pupils at this level.
17. Children from poor hungry households, especially in rural areas, often walk long distances to school on an empty stomach. This affects their nutritional status and limits their attention span and performance. Provinces with a high prevalence of malnutrition and intestinal worms show low enrolment, school attendance and achievements and high dropout rates, especially among girls. Malnutrition in Luapula and Northern provinces is more than 50 percent. In Lapuala, 68.8 percent of children in a sampled primary school had intestinal worms.
18. HIV/AIDS has clearly had a major impact on school children. Chronic illnesses or deaths of parents or siblings result in loss of household income and depleted labour and household assets. Girls, orphans and other vulnerable children are often removed from school to save education expenses and increase household labour. The 1999 end-of-decade survey by the United Nations Children's Fund (UNICEF) shows that 15 percent of children below the age of 18 were orphans and most did not attend school.





### Objectives and Intended Outcomes

19. The long-term objectives are to:

- increase enrolment, school attendance and completion rates, with special attention to girls, orphans and other vulnerable children from HIV/AIDS-affected households and communities;
- reduce the prevalence of intestinal worms and bilharzias among schoolchildren; and
- enhance parents' participation in school matters and improve attitudes towards education, particularly for girls, orphans and other vulnerable children.

20. The intended outcomes are:

- a 20 percent annual increase in enrolment rates of girls and boys;
- a 60 percent increase in the number of girls, orphans and other vulnerable children completing basic education;
- an 80 percent reduction in intestinal infestation and bilharzias;
- an 80 percent increase in improved hygiene and health-seeking practices among children and school communities;
- an increased number of people participating in school matters; and
- a 60 percent increase in parental and community awareness of the importance of educating girls, orphans and other vulnerable children.

### Role and Modalities of Food Aid

21. Food aid support will be provided for all children attending school to combat short-term hunger, improve attention spans and cognitive abilities and provide an incentive to girls and orphans to attend school regularly until completion. Children in targeted schools will receive one wet ration at school. Girls in grades 5–7, orphans and children with special needs will receive a vegetable oil ration to take home as an incentive to poor households to send children to school.

### Implementation Strategy

22. The Ministry of Education (MOE) will implement the activity in the framework of the basic education sub-sector programme (BESSIP), which includes support to community schools where most orphans and other less privileged children are found. An activity steering committee (ASC) will coordinate the activity. It will be chaired by MOE and consist of WFP, the Ministry of Health (MOH), MCDSS and the Ministry of Finance and National Planning (MOFNP). Provincial and district education officers (P/DEO), district councils (DCs) and district development coordinating committees (DDCCs) will coordinate and supervise. WFP will seek assistance from the Ministry of Agriculture, Food and Fisheries (MAFF), the Food and Agriculture Organization of the United Nations (FAO), UNICEF, the World Health Organization (WHO) and donors in providing teaching materials and bore holes. They will carry out deworming and develop school and community agricultural production units as part of the exit strategy.

23. The strategy will involve parents in activities management and ensure that girls and orphans are given equal access to schooling. In conjunction with the NPVG activity, ABE will aim to improve child nutrition. School management committees (SMCs), comprising parent-teacher associations (PTAs), community representatives, teachers and pupils' representatives will be responsible for food management, preparation and distribution.



ABE will promote improved access to safe water and sanitation, especially for girls, in collaboration with partners such as the Water Board and UNICEF.

#### Beneficiaries and Intended Benefits

24. About 60,000 pupils per year will receive a meal at school. Some 9,000 girls and orphans from among them will benefit from take-home rations, for which school attendance is an essential condition. Benefits include increased enrolment and retention rates and improved eligibility of girls and orphans for secondary schooling, leading to increased access to further education and vocational training. The activity is expected to empower parents by helping them build community institutions such as PTAs, AMCs and income-generating activities (IGAs).

#### Support, Coordination and Partnerships

25. WFP is a member of the United Nations expanded theme group on HIV/AIDS, which supports national strategies to mitigate the impact of HIV/AIDS and is participating in the national school health and nutrition steering committee. The CP will take account of studies from donors, United Nations agencies, consultancies, national programmes and implementing partners. The capacity of the AMC will be strengthened to ensure sustainability through awareness raising, education, advocacy, home-based care and support to orphans, widows and vulnerable children.
26. WFP will share its experience with MOE and other stakeholders in similar education-support programmes in other countries of the sub-region. WFP will establish partnerships with GIDD, the Forum for the Advancement of Women's Education in Zambia (FAWEZA), donors and United Nations agencies, in particular UNICEF, the United Nations Population Fund (UNFPA) and FAO, NGOs and community groups. These partnerships will contribute to improved education. UNICEF will provide teacher training and committee training, and drinking water, sanitation facilities, classrooms, equipment and learning materials. UNFPA will contribute in the areas of HIV/AIDS and reproductive health. WHO will provide deworming tablets. FAO will provide technical assistance for school-based agricultural activities and other IGAs. DC and DDCCs will be part of the coordination and management structure.

#### Monitoring Arrangements

27. The logical framework provides monitoring indicators that will be refined by follow-up baseline surveys. At community level, AMCs will assist in monitoring. Women's participation on the committees will be encouraged. MOE will undertake food monitoring and submit quarterly progress reports and project implementation reports to MCDSS, MOFNP and WFP. MOE, MCDSS and WFP, in collaboration with the United Nations Educational, Scientific and Cultural Organization (UNESCO), UNICEF, WHO and UNFPA, will conduct monitoring and technical review missions to assess the effectiveness of collaborative programming.

#### Cost estimates

28. The activity will require 10,230 tons of food at an estimated direct operational cost of US\$6,025,955. The Government's contribution is estimated at US\$602,596.

### **Basic Activity 2: Nutrition Programme for Vulnerable Groups (NPVG)**

#### Strategic Focus



29. The NPVG addresses FAAD priority 1: to enable children and expectant and nursing mothers to meet their special nutritional and nutrition-related health needs. The priority is in line with Zambia's national programme of action for children, the national health policy, national health strategic plan, the poverty-reduction strategy paper, the HIV/AIDS strategic framework and CCA/UNDAF. NPVG will improve nutritional status and reduce malnutrition-related mortality among chronically malnourished and under-weight children under 5, expectant and nursing mothers and people living with HIV/AIDS.

#### Problem Analysis

30. The health status of the Zambian population has recently declined. Mother and child malnutrition and mortality rates are rising as a result of the general economic decline, an HIV/AIDS epidemic, poverty and food insecurity. Micronutrient-deficiency malnutrition is widespread:
- vitamin A: 65.7 percent for children and 21.5 percent for women;
  - iron: 65 percent for children and 42 percent for women of reproductive age; and
  - iodine: 16 percent nationally.
31. Among the under-5 population in 1999, 59 percent were stunted, 24 percent underweight and 5 percent wasted. The prevalence of stunting was 40 percent in 1990 and 43 percent in 1996. District statistics on acute malnutrition indicate 16.8 percent in Luanshya, 11 percent in urban Ndola, 14.5 percent in Mwense, 10 percent in Kawambwa and Mporokoso and 12 percent in Kasama. Severe wasting is prevalent among children of 11-24 months, which reflects the beginning of problems related to child feeding.
32. Infant mortality rose from 90 per 1,000 live births in 1990 to 109 per 1,000 in 1999. Under-5 child mortality per 1,000 live births rose from 192 in 1996 to 202 in 1999. Maternal mortality per 100,000 live births increased from 649 in 1996 to over 800 in 1999. The incidence of infants with a birth weight below 2.5 kg was 4.9 percent in 1992 and 11.2 percent in 1998. The prevalence of TB and HIV/AIDS has worsened the situation. One million people have already died from HIV/AIDS; 20 percent of people aged 15-49 are living with HIV. The rate is currently estimated at 28 percent in towns and 13 percent in rural areas. Almost equal numbers of men and women are infected, but women are particularly disadvantaged because they bear the burden of caring for sick household members at the expense of reproductive and productive activities.
33. HIV/AIDS continues to have a negative impact on the nutritional status of hungry poor households. Households remain impoverished largely because breadwinners are sick or dead and disposable resources are diverted to medical care. Food production and other sources of income are reduced. As a result, consumption is below minimum human caloric requirements. The limited capacity of government institutions and inadequate health resources and trained staff further compound the problem.
34. WFP will provide food related inputs for the NPVG; the Government and other organizations will provide complementary health inputs. The goal is to improve nutritional status. Through the sector-wide approach, which includes partnership with United Nations agencies, civil society and the Government, WFP will support activities such as health and nutrition education, life skills including HIV/AIDS awareness and training in IGAs to ensure that mothers and caregivers acquire knowledge and skills relating to nutrition and health. This should increase the capacity of mothers, poor households and other caregivers to provide nutritional security for their children and families even beyond the project.

#### Objectives and Intended Outcomes



35. The long-term objectives of the NPVG activity are to:
- improve the nutritional status of acutely and chronically malnourished children under 5, expectant and nursing mothers and people living with TB and HIV/AIDS;
  - increase participation and capacity of households, communities and service providers in community-based food and nutrition activities; and
  - improve nutrition, hygiene and health practices.
36. The intended outcomes are:
- a 10 percent reduction in acute and chronic malnutrition and malnutrition-related mortality rates among children under 5;
  - a 50 percent increase in improved nutrition and health practices;
  - reduced rates of mother-to-child transmission of HIV/AIDS; and
  - an increase in the number of community-based institutions and service providers trained to provide care and education in nutrition, health and HIV/AIDS to vulnerable households.

#### Role and Modalities of Food Aid

37. WFP food aid will play a crucial role in reducing malnutrition-related mortality among children under 5 by reversing the effects of transitory hunger and micronutrient deficiencies in children, expectant and nursing mothers and people living with HIV/AIDS, including those in hospitals or at community health and nutrition centres. It will increase quality and length of life among people living with HIV/AIDS so they can contribute to household food security. Food aid will be an incentive for mothers, beneficiaries, caregivers and healthy family members to attend training in health and nutrition skills, HIV/AIDS awareness and IGA.

#### Implementation Strategy

38. The MOH will conduct the activity through the central board of health, and provincial, hospital and district health management boards (DHMBs). DHMBs will implement, coordinate and supervise at district level in collaboration with MOE, MAFF, MCDSS, the Ministry of Local Government and Housing (MLGH) and NGOs. Community-based organizations (CBOs) will implement home-based care to HIV/AIDS and TB patients, with support from NGOs. Men and women will be encouraged to participate to enhance local decision-making. There will be emphasis on integrating programme activities with community-based growth monitoring and promotion, integrated management of childhood illnesses, home-based care, food security and nutrition activities.

#### Beneficiaries and Intended Benefits

39. The beneficiaries will be:
- 86,250 undernourished children between six months and 5 years attending community nutrition centres (17,250 per year). They will have a daily take-home ration that will be doubled to allow sharing among household members;
  - 20,000 children in hospital (4,000 per year) will receive three cooked meals daily;
  - 35,000 undernourished expectant and nursing mothers (7,000 per year) will receive family dry rations during the lean season; and



- 32,253 people living with HIV/AIDS and their dependants, (161,255 beneficiaries) will receive dry family rations through home-based care for up to one year.

Rations will be reviewed during the activity appraisal.

40. To maximize effectiveness, targeting will be refined during appraisal to reach high-risk age groups. Communities will identify target households. WFP, UNICEF, Canadian International Development Agency (CIDA), WHO, UNFPA and NGOs will promote training workshops in food and nutrition, weaning practices, home-based care, reproductive health and HIV/AIDS general awareness and education for community nutrition and health workers, community caregivers and traditional birth attendants. Other benefits will include IGAs for caregivers and community groups.

#### Support, Coordination and Partnerships

41. WFP will mobilize food and non-food resources and provide technical support in planning, implementation, monitoring and evaluation. Within the UNDAF, donors and UNICEF, UNDP, WHO, UNFPA, the United Nations Programme on HIV/AIDS (UNAIDS) and FAO will provide technical, financial and material support. NGOs, CBOs, churches, charities and other service organizations will provide support services to community-based activities, including human, material and financial resources, planning, food distribution, community mobilization, training in IGAs and home-based care services. Within the context of the national plan of action for nutrition, MOH will continue to lead and assist community-based activities in training and planning and funding health and nutrition centres and equipment. The National HIV/AIDS/STD/TB Council and Secretariat will provide guidance and support on HIV/AIDS/TB interventions.
42. Coordination will be carried out through the DDCC. WFP and its partners will provide capacity building to DHMBs in initiating and managing community-based integrated nutrition and health programmes.

#### Monitoring Arrangements

43. Monitoring and evaluation (M&E) indicators were developed through the logical framework approach for community-based monitoring systems. Efforts will be made to integrate indicators in the health management information system and performance audits. District health boards and NGO partners will be responsible for collecting data on food distribution. Quarterly progress reports and project implementation reports, based on data from the districts, will be prepared by the Central Board of Health (CBoH) and submitted to MOH, MOFNP and WFP. Participatory surveys and nutritional assessments will be conducted to complement health management and information system (HMIS) data.

#### Cost Estimates

44. The activity will require 20,926 tons of food at an estimated direct operational cost of US\$10,535,210. The Government contribution to this activity is estimated at US\$1,053,521.

### ➤ **Basic Activity 3: Food for Assets (FFA)**

#### Strategic Focus

45. This activity will address FAAD priority 3: to make it possible for poor families to gain and preserve assets. The activity will improve the food security and well-being of hungry poor households, particularly in areas vulnerable to recurring natural disasters, by creating



assets that build resilience, such as water control and harvesting infrastructure, consolidation of river embankments and implementation of appropriate resource conservation actions, and basic environmental works, HIV/AIDS and gender awareness raising and training for sustainable livelihoods and life skills.

### Problem Analysis

46. Seventy-three percent of Zambia's population faces chronic food insecurity. Over the past decade, food shortages at household and national level have increased. Per capita grain production declined from 235kg during the late 1980s to 173 kg during late 1990s; net imports increased from 161,000 tons to 249,000 tons over the same period. The cereal import requirements for 2001–2002 are estimated at 268,000 tons (FAO/Global Information and Early Warning System (GIEWS), 2001). There has been a sharp decline in per capita consumption of maize, from 153.2 kg in the early 1990s to 123.3 kg in 1996–1997.
47. Food insecurity problems in Zambia are caused by a combination of elements. Recurrent droughts and floods affected 1.3 million people in the 2000–2001 season). Other problems are lack of access to agricultural inputs, poor infrastructure, particularly feeder and community-access roads, low levels of technology and investment, and low incomes, which have contributed to slow growth in agriculture and food production, especially in drought-prone areas of the western, southern and eastern provinces. At household and community level, food security is constrained by poor access roads, low levels of sustainable farming skills, degraded soil and environment, poor food preservation and management, dependency on handouts and the slow pace of change in attitudes towards crop and livelihood diversification. The situation has been exacerbated by factors such as food price increases caused by the removal of subsidies and reduced household incomes resulting from unemployment and HIV/AIDS.
48. Poverty in Zambia is widespread, deep rooted and gender-biased. In the late 1990s, 32 percent of households headed by women had to resort to extraordinary coping measures; the figure for households headed by men was 26 percent. despite positive legal reforms and measures undertaken by the Government in favour of women, customary laws and practices continue to place women in a subordinate status to men with respect to property inheritance rights, land ownership, income levels, civic participation, literacy and control over their fertility. As a consequence of their poverty and lack of rights, some are reduced to engaging in commercial sex work, which further exposes them to HIV/AIDS. Yet despite their limited access to land, women provide up to 70 percent of labour on subsistence farms and are increasingly involved in cash crop production.
49. In 1999, the illiteracy rate among women in Zambia was 30 percent; the rate for men was 15 percent (World Bank). Women's participation in the overall labour force in 1998 was 12 percent below that for men (CCA, 2000). Women are largely excluded from formal decision-making positions; 10 percent hold key political positions, which is less than most Southern African Development Community countries. Unequal gender relations give many women less control over their fertility. Although awareness and knowledge of modern contraceptive methods is high, the contraceptive prevalence rate remains low; it was estimated at only 26 percent in 1996. Maternal mortality rates have risen, which can largely be associated with low female education, early age at first pregnancy, poor pregnancy management, micronutrient-deficiency malnutrition, TB and HIV/AIDS.
50. Target communities are often constrained by low capacity to assume responsibility for management of created assets in times of disaster. Hungry poor people are usually unable



to create and maintain such structures because they lack formal training and are unable to interrupt the daily quest for basic needs.

#### Objectives and Intended Outcomes

51. The long-term objectives are to:

- create and preserve assets that directly address household food insecurity, disaster preparedness and response of vulnerable households;
- promote sustainable livelihood skills of vulnerable households, particularly those living with HIV/AIDS headed by women, children and the elderly; and
- increase the capacity of community-based leadership structures, with strong women's representation in the targeted communities to manage and sustain assets.

52. The intended outcomes of this basic activity are:

- an increased number of food-secure households;
- increased created assets, with 60 percent of community assets created directly addressing household food security and disaster preparedness and response;
- increased coping abilities to deal with HIV/AIDS and recurring natural disasters;
- gained capacities for households to improve their income, particularly those living with HIV/AIDS headed by women, children and the elderly; and
- a 50-percent increase in women's access to and ownership of assets relevant to their needs and capacity.

#### The Role and Modalities of Food Aid

53. Food aid will be used as an incentive for urban and rural hungry poor households to invest time and resources in asset creation and rehabilitation and to mitigate short-term hunger and contribute to meeting the minimum daily energy requirements.

#### Implementation Strategy

54. The activity will be implemented by NGOs in collaboration with district councils and community-based managers under the general supervision of the MCDSS. To facilitate beneficiary participation and ensure proper maintenance of the assets created, institutional mechanisms such as community development management teams (CDMTs) will be established and trained, in which women will be encouraged to take up lead roles. The ASC will be chaired by MCDSS and will include implementing NGOs and line ministries. Capacity development for implementing partners and men and women beneficiaries will be provided through technical assistance schemes run by United Nations agencies with funding from donors and WFP. Activities, especially in rural areas, will be carried out during the lean season, ensuring that participation does not interfere with the normal agricultural calendar. To ensure that activities do not overburden women, there will be an analysis to establish that women's coping levels are as recommended by the evaluation.

#### Beneficiaries and Intended Benefits

55. The project will benefit 65,278 hungry poor households, or 326,390 beneficiaries, who will receive a family ration in rural and urban areas. At least 60 percent of beneficiaries will be women and 50 percent of the assets created will be for their direct benefit and under their control. This will be pursued by ensuring that women take up lead roles and are



adequately represented at all levels of decision-making on food and created asset management, in line with circular ED2001/10 on women's access to assets, including land. Communities and district technical and administrative personnel will receive appropriate training.

#### Support, Coordination and Partnerships

56. The ASC will review the standard FFA programmes to adapt them to the national context. MCDSS will coordinate FFA activities with implementing partners. Technical assistance will be sought from United Nations specialized agencies and technical ministries.

#### Monitoring Arrangements

57. M&E indicators have been established through the logical framework approach and will be refined at the activity appraisal level for results-based monitoring and evaluation. MCDSS will ensure that implementing partners monitor activities and submit quarterly progress reports and project implementation reports to MCDSS, MOFNP and WFP. A mid-term review will be undertaken; a terminal review will be carried out in the final year of the CP.

#### Cost Estimate

58. The activity will require 20,093 tons of food at an estimated direct operational cost of US\$8,335,788. The Government contribution to this activity is estimated at US\$833,580.

#### Emergency Operations (EMOPs), Protracted Relief and Recovery Operations (PRROs) and Special Operations (SOs)

59. Zambia is a disaster-prone country with a substantial and increasing presence of refugees from neighbouring countries currently estimated at 260,000. There are also large numbers of internally displaced persons (IDPs), who place increasing pressure on overstretched natural, social and economic resources. These factors contribute to the deterioration of national security, food insecurity, limited access to basic social services and land for Zambians and disruption of cross-border trade in most areas. WFP supports approximately 117,000 refugees through PRRO 10071, approved in 2001. This PRRO will address the food needs of refugees who have entered the country since 1999 and the needs of the most vulnerable groups—widows, the elderly and those infected with HIV/AIDS and TB—among the existing caseload of refugees. Contingency planning is undertaken annually with the Government and partners to provide a link for transition between development and emergency operations.

#### CP Support Activities

60. The following support activities are planned during the CP:
- contingency planning to support government and WFP activities that foresee and swiftly react to emergencies; funding for this task is estimated at US\$200,000; and
  - advocacy on hunger with the aim of increasing food resources and NFIs to match WFP's food support; the cost is estimated at US\$100,000.

#### Key Issues, Assumptions and Risks

61. Important assumptions are the following:





- that the process of decentralization and community empowerment will be implemented quickly, allowing the transition of responsibility to local governments for implementing food-aided activities and coordinating development packages, which are central to community-based development support;
- that the Government and WFP will strengthen the institutional framework for CP management and oversight that facilitates effective integration and linkages among CP and development activities; and
- that the Government and donors will secure matching resources and NFIs to complement WFP's food support.

## PROGRAMME MANAGEMENT PROCESS

### Appraisal

62. Appraisals will be carried out for each activity to assess technical, social, economic and logistical feasibility, to ensure coherence, sustainability and linkages and to prepare activity summaries. Technical assistance will be sought from United Nations specialized agencies. As a new activity, ABE will be appraised in collaboration with UNICEF, FAO and UNESCO. Appraisals will pay particular attention to questions of counterpart capacity for implementation, monitoring, HIV/AIDS and gender mainstreaming. The process will include the Government, FAO, UNAIDS, UNFPA, UNESCO, UNICEF, WHO and donors with similar activities. They will be carried out immediately after the CP is approved. The reviews will define implementation benchmarks for monitoring and evaluation (M&E) of the activities.
63. WFP will institute a local activity review committee (ARC) to review each activity summary. The minutes of the ARC and the revised activity summary will be submitted through the CP technical committee to the national country programme management committee chaired by MOFNP and composed of members drawn from the resident United Nations agencies, donors, line ministries and selected NGOs. Following clearance by the CP management committee, WFP will submit the direct operational cost (DOC) budget component to Headquarters.

### Programme Implementation

#### 📁 **Country Office Staffing Capacity**

64. The CP will maintain the 1, 2, 3 structure for the programme support administrative budget. In view of the expansion of the FFA and ABE activities, the increased scale of activities, the distances involved and the difficulty of access, each activity will require an officer and support staff. The country office will also seek the services of the United Nations volunteer (UNVs) and junior professional officer (JPO) programmes. Programme training will be required in M&E, logical framework analysis, gender, HIV/AIDS, participatory methods, administration and finance procedures, systems applications and procedures and basic emergency management.

#### 📁 **National CP Management**

65. Following approval of the CP by the Executive Board, WFP will prepare a CP agreement for 2002–2006 to be signed with MOFNP. After each activity document is



completed, approved and signed by the country director, WFP will prepare an operational contract for each activity that will define the obligations of each party. The ministries responsible for each activity and MOFNP will sign the contract on behalf of the Government, and the WFP representative will sign for WFP. Partners will be contractually obliged to adhere to WFP Commitments to Women.

66. MCDSS will be in charge of national coordination and will chair the CP management committee (CPMC), which will be responsible for general oversight of the CP and establishment and reassessment of linkages and synergy with other national development programmes; it will meet twice yearly. Under CPMC, the CP technical committee (CPTC) composed of technical officers from ministries, NGOs and partners and co-chaired by MCDSS and WFP, will have responsibility for design, implementation arrangements, monitoring and evaluation of CP activities and their integration in national development programmes. ASC, chaired by the executing ministry, will be the structure for coordination and management.

### **Facilitating the Involvement of Beneficiaries**

67. Programme activities will be planned and executed with a high degree of community involvement. In NPVG, major emphasis will be placed on community-based supplementary feeding and development of IGAs. The broad-based participation of mothers, primary health care workers and volunteers and traditional birth attendants will help to improve feeding practices. School feeding will also require a high degree of community commitment and willingness to co-manage the IGAs at community schools.
68. Activity committees and asset-maintenance committees will be elected by the communities and will be responsible for activity planning at community level. These committees and DDCC in the beneficiary communities will help to mobilize people, including women, and will assist in the formation of CMCs and AMCs for participatory decisions on the activities.

### **Complementary Inputs from Government and Other Partners**

69. For each CP activity, the government contribution will be in the form of staff salaries and operational costs. WFP and the Government will mobilize NFIs from donors and partners. In the ABE activity, provision of adequate numbers of teachers, classroom blocks, water supply and sanitation facilities by the Government or other partners will be a condition for the expansion of WFP's support to basic education.

### **Food Procurement and Logistics**

70. WFP will deliver commodities to Lusaka and will adopt a flexible procurement strategy, procuring cereals locally when surpluses are available and importing in times of drought or scarcity. Commodities that are not available locally or at non-competitive prices will be procured from outside the country, with technical assistance from the Regional Procurement Office in Harare. Local procurement will be in line with WFP procurement guidelines and procedures. Periodic testing of food quality will continue. The executing unit will support the transportation of food. The Government will continue to arrange tax exemptions and waivers to ensure timely release of food commodities. Storage of food and NFIs will be provided by the Government. Since Zambia is classified as an LDC and low income, food deficit country (LIFDC), WFP will bear 100 percent of the cost of handling and inland transportation from Lusaka or local and regional procurements to project sites.



### ✧ *Preparation of Annual Work Plans and Budget*

71. The implementing partners, in consultation with WFP, will prepare annual work plans based on resource-availability figures and operational performance of the CP. Should it become necessary to reallocate resources among activities, the CPMC will decide on the matter, taking into consideration vulnerability analysis and mapping (VAM) information and commodity pipeline reports.

### Sustainability

72. Sustainability will be founded on community involvement in activity identification and implementation and partnerships with the Government. Capacity building for communities, especially with regard to women, will ensure that people in charge of managing and maintaining assets created with food support are indeed their creators and owners and possess the skills and means to preserve them. Government acceptance of improved delivery models for intervention in nutrition and education involving community participation will ensure sustainability.

### Programme Monitoring and Audit

73. WFP will introduce results-based management principles and methods for monitoring and evaluating activities, utilizing the CCA database, activity baseline data and the living conditions surveys and health and nutrition surveys. MCDSS will be responsible for overseeing M&E arrangements for the CP. Assessment of CP performance will be primarily the Government's responsibility, with the support of WFP. Annual CP reports will be prepared by the CPTC and reviewed by the CPMC. Major stakeholders will be fully involved in the mid-term review of the CP. Monitoring and reporting routines already exist for the FFA and NPVG activities and will be established for the ABE. The Government, through the MOFNP Auditor General Office, will furnish WFP with annual accounts.

### Supplementary Activities

74. If further resources become available, CP activities will be supplemented by expansion of the NPVG through home-based care, reaching an additional 5,000 households per year, or 125,000 beneficiaries over the CP period. This component will require 11,970 tons of food at a cost of US\$5,170,862. The expected government contribution is US\$517,086.

### Evaluation

75. Activity completion reports will be prepared for completed CP activities. About two years before the presentation of the succeeding CP, in late 2004, the CP will be evaluated to ensure that the programme is well focused and that its goals and objectives are still relevant and are being met. This timing will permit evaluation recommendations to be taken into account in the next CSO.

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## RECOMMENDATION

76. For the proposed Zambia CP (2002–2006), the Executive Director requests the Executive Board to approve, subject to the availability of resources, US\$24,896,953, representing basic direct operational costs, and to endorse US\$5,170,862 for supplementary activities.



## ANNEX I

### EXECUTIVE SUMMARY OF THE ZAMBIA CSO (WFP/EB.3/2001/7/4)

Zambia, classified as a least-developed country (LDC) with a per capita GDP of US\$300, is one of the world's poorest countries. Although it is a country with immense potential to achieve food production self-sufficiency, food insecurity at both the national and household levels continues to rise, as indicated by a decline both in per capita cereal production and in annual net imports. Despite an overall increase in the contribution of the agriculture sector to the national economy, that area remains particularly vulnerable owing to recurring natural disasters, animal epidemics, limited access to key inputs and the continued reluctance on the part of farmers to adopt crop-diversification practices. Poverty and food insecurity remain widespread in rural areas, but in recent years there has been a rise in both in urban areas.

This second-generation Country Strategy Outline (CSO) has been prepared within the context of the Country Common Assessment/United Nations Development Assistance Framework (CCA/UNDAF), the strategic priorities of the Government under its Poverty Reduction Strategy Paper (PRSP) framework and WFP's Enabling Development policy. It draws upon experiences from the current Country Programme (CP) formulation and takes account of recommendations from the CP evaluation.

The main strategic goals remain largely unaltered from the current CP, but the new CSO suggests a shift in CP activities to provide greater support for the education sector, and initiatives designed to help communities and households reconstitute their asset base and achieve sustainable livelihoods. The CP will focus on the main objectives of the UNDAF and, accordingly, will contribute to fulfilling the right for all Zambians to have an adequate standard of living. In line with WFP's Enabling Development policy (decision 1999/EB.A/2), WFP resources will be used towards the achievement of the following objectives:

- Enable young children and expectant and nursing mothers to meet their special nutritional and nutrition-related health needs;
- Enable poor households to invest in human capital through education and training;
- Make it possible for poor families to gain and preserve assets; and
- Mitigate the effects of natural disasters in areas vulnerable to recurring crises of this kind.

Future activities will focus exclusively on the poorest districts, which can be characterized by chronic food insecurity, high rates of malnutrition and a high prevalence of HIV/AIDS-infected beneficiaries. WFP food resources, combined with non-food resources, will go towards three basic activities: Food for Assets (FFA), under which will be subsumed continued support to the Government for disaster management and mitigation and to vulnerability analysis and mapping (VAM); Assistance to Primary Education (APE); and Supplementary Feeding (SF). In addition, natural and man-made disasters remain a key concern. In an area that is prone to the rapid onset of both natural disturbances and man-made emergencies, developing the capacity of the Government and the targeted households to respond to these contingencies will remain a priority for the country office.



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## HIGHLIGHTS OF THE DISCUSSION HELD DURING THE EXECUTIVE BOARD ON THE CSO FOR ZAMBIA (WFP/EB.3/2001/15)

The Board endorsed the CSO, noting that the strategy and objectives outlined in the document were in line with government priorities, and with WFP's Enabling Development policy. The Board noted with appreciation the efforts to address the challenges related to the HIV/AIDS pandemic, which had hit Zambia particularly hard. One member made reference to the World Bank/IMF Poverty Reduction Strategy Paper (PRSP) on Zambia, which the country office had been encouraged to take note of while preparing the CP. The Secretariat responded that the United Nations Country Team (UNCT) had been actively involved in the PRSP, and that WFP, as a member of the UNCT, would continue to follow the debates.

Several members emphasized the need to increase the involvement of local authorities and populations in order to achieve the objectives of the future CP. The Secretariat assured the Board that the CP would emphasize partnerships.

Several members reiterated the importance of the targeting and prioritization of activities, along with the necessity of VAM analysis for doing so. The Secretariat informed the Board that HIV/AIDS-affected households and orphans would be the main target groups for the future CP.

Some members pointed out that Zambia's agricultural potential was considerable and that food aid should therefore be used carefully in rural areas, while addressing underlying problems through appropriate agricultural and rural policy measures.

One member urged the country office to provide more details on monitoring and evaluation in its forthcoming CP. Another member commended the country office for its active relationship with donors in the country, noting that this relationship helped stimulate both ongoing policy discussions and the prioritization of operations.

The Board encouraged the Secretariat to use food aid to improve women's conditions, in collaboration with national authorities. The Secretariat responded that a national gender policy existed and that WFP would work with the Government to integrate gender aspects into the CP.



COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY

**Results Hierarchy**

**Performance Indicators**

**Assumptions and Risks**

**Goal at the national level**

The Government's central objective is a reduction of poverty levels in Zambia from 73 percent in 1998 to 50 percent by 2015, through measures that increase the capacities and opportunities for all Zambians, in particular the poor.

A reduction of population below the poverty line, from 73 percent to less than 50 percent in 2015.

Favourable political environment with peace and stability.

Government commitment to implementing poverty-reduction strategies and frameworks.

Reversal of the negative impacts of HIV/AIDS on the socio-economic status of Zambia.

**Goal of the Country Programme**

To enhance the capability of hungry poor households (particularly those headed by women, children and the elderly) to take charge of their own development on a sustainable basis and withstand natural disasters while addressing gender and the HIV/AIDS pandemic.

**Impact Indicators**

Chronic and short-term food insecurity of targeted vulnerable households reduced by 50 percent.

Progressive percentage increase in literacy levels among targeted groups, particularly girls, orphans and other vulnerable children.

Reduced prevalence of chronic malnutrition by 60 percent, low weight among children under 5 by 50 percent and malnutrition-related maternal mortality rates by 70 percent among the targeted population.

Reduced impact of HIV/AIDS/TB on the socio-economic status of the affected households.


Process of decentralization and community empowerment is implemented quickly enough for local governments to assume responsibility for implementing food-aided activities and coordinating the development packages central to community-based development support.

The Government and WFP will strengthen the institutional framework for CP management and oversight that facilitates integration and linkages among CP activities and with related development activities

The Government and donor commitment to CP basic activities is sustained.



COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY
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Purposes of the Country Programme (activity-level long-term objectives)	Country Programme Outcome Indicators	Assumptions and Risks
<p>1. To improve access to and completion of basic education for children, especially girls, orphans and other vulnerable children from hungry poor households.</p>	<p>Enrolment for girls and boys increased by 20 percent in targeted basic schools by 2006.</p> <p>School dropout rates decreased by 50 percent every year.</p> <p>80 percent attendance rate maintained in targeted schools.</p> <p>Percentage increase in completion rates particularly among girls, orphans and other vulnerable children.</p>	<p>Current national education strategies and priorities maintained during the next 10 years.</p>
 <p>2. Improve nutritional status and reduction in malnutrition-related mortality among chronically malnourished and underweight children under 5, expectant and nursing mothers and people living with TB/HIV/AIDS.</p>	<p>Malnutrition-related mortality rates among children under 5 reduced by 50 percent.</p> <p>Low-birth-weight rate reduced to below 5 percent by 2006.</p> <p>Reduced prevalence of chronic malnutrition, underweight and micronutrient malnutrition among children under-5 by 10 percent by 2006.</p> <p>Malnutrition-related maternal mortality rate reduced by 50 percent.</p> <p>More people applying learned livelihood skills and IGAs to reduce HIV/AIDS impact.</p>	<p>Government commitment to reduce malnutrition continues to be among national priorities.</p>

COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY

**Purposes of the Country Programme  
(activity-level long-term objectives)**

**Country Programme Outcome Indicators**

**Assumptions and Risks**

3. To improve food security and well-being of hungry poor households, particularly in areas vulnerable to recurring natural disasters.

80 percent of assets created and preserved directly address household food insecurity, disaster preparedness and response.

Well-developed decentralized structure is instituted to utilize available expertise at district level.

Percentage increase in the availability and access to food at household level for the hungry poor in rural and urban target community.

Food economy zoning is accelerated to help refine sub-district, community and household targeting.

Increase in participation of beneficiaries, particularly women, in programme processes and activities.

Increase in the use of learned livelihood and life skills.



**Purpose of each Country Programme  
Activity (Objectives for each Basic  
Activity)**

**Activity Outcome Indicators**

1.1 Increase enrolment, school attendance and completion rates at basic school level, with special attention to girls, orphans and other vulnerable children from HIV/AIDS affected households and communities.

20 percent annual increase in enrolment rate of girls and boys in comparison to initial baseline data.

Complementary resources from partners are available on a sustainable basis.

60 percent increase in the number of girls, orphans and other vulnerable children completing basic education.

Number of girls and vulnerable children who graduate from targeted basic schools.


1.2 Reduce the prevalence levels of intestinal worms and bilharzia among basic schoolchildren.

80 percent reduction in intestinal infestation and bilharzia cases.

Percentage increase in the use of improved hygiene and health-seeking practices among children and the school communities.



COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY
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Purpose of each Country Programme Activity (Objectives for each Basic Activity)	Activity Outcome Indicators	Assumptions and Risks
<p>1.3 Enhance parents' participation in school matters and improve parental and community attitudes towards education, particularly of girls, orphans and other vulnerable children.</p>	<p>Increased number of people participating in school matters.</p> <p>Percentage increase in number of parents and community members aware of the importance of educating and enrolling girls, orphans and other vulnerable children in school.</p>	<p>Other causes of low enrolment, retention, and high drop out rates are identified and addressed.</p>
 <p>2.1 Improve the nutritional status of vulnerable children under 5 who are acutely and chronically malnourished, stunted and underweight, expectant and nursing mothers and people living with TB/HIV/AIDS and affected households.</p>	<p>Percentage reduction in the prevalence of acute and chronic malnutrition and malnutrition-related mortality rates among targeted children under 5.</p> <p>Percentage increase in the use of improved nutrition and health practices.</p> <p>Reduced number of malnutrition-related maternal mortality cases among the targeted groups.</p> <p>Reduced number of low-birth-weight babies among the targeted population.</p>	<p>Government's commitment to reduced malnutrition and HIV/AIDS continues to be a priority.</p> <p>Other underlying causes of malnutrition are addressed.</p>
<p>2.2 Increase participation and capacity of beneficiaries, households, communities and service providers to initiate and implement community-based food and nutrition activities.</p>	<p>Number of community-based institutions and service providers effectively engaged in mobilizing the community to provide care and nutrition/health aid to vulnerable households.</p>	<p>Households, communities and service providers will apply acquired knowledge and skills to sustain the activities.</p>

COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY
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Purpose of each Country Programme Activity (Objectives for each Basic Activity)	Activity Outcome Indicators	Assumptions and Risks
2.3 Improve nutrition and hygiene/health practices among the targeted groups and communities.	Percentage increase in the number of targeted groups and communities practising improved hygiene and health-seeking practices among children and school communities.	Households, communities and service providers will apply acquired knowledge and skills to sustain the activities.
3.1 Create and preserve assets that directly address household food insecurity, disaster preparedness and response of vulnerable households.	<p>Increased number of food-secure households.</p> <p>Percentage increase in created assets that respond to food security and disaster preparedness.</p> <p>Increased coping abilities of affected households and communities to deal with HIV/AIDS and recurring natural disasters.</p> <p>Use frequency of created community assets.</p> <p>Percentage of household income gained from created assets.</p>	<p>Frequency and scale of major disasters will be within manageable levels, at least during the initial phase of activity.</p> <p>Key stakeholders will sustain commitment and collaboration to programme design, implementation, monitoring and evaluation.</p>
3.2 Promote sustainable livelihood skills of vulnerable households, particularly those living with HIV/AIDS headed by women, children and the elderly.	<p>Number of households utilizing gained capacities to improve their income, particularly those living with HIV/AIDS headed by women, children and the elderly.</p> <p>Percentage increase in the number of households with access to micro-savings and micro-financing.</p> <p>Increase in the number and type of sustainable income-generating activities among the targeted beneficiaries.</p> <p>Percentage increase in functional literacy levels among targeted households.</p>	<p>Conditions of the support service providers are favourable to the target beneficiaries or are pro-poor.</p> <p>Key stakeholders fulfil obligations and commitments.</p>



COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY
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Purpose of each Country Programme Activity (Objectives for each Basic Activity)	Activity Outcome Indicators	Assumptions and Risks
<p>3.3 Increase the capacity of CDMTs, with strong women's representation, in the targeted communities to manage and sustain their assets.</p>	<p>Percentage increase in beneficiaries, particularly women, participating in planning, implementation, management, monitoring and evaluation of programme activities.</p> <p>Placement of maintenance arrangements for created assets.</p> <p>Percentage of women among those taking up lead roles in the created teams and Residents Development Committees (RDCs).</p> <p>Women gain 50 percent access to and ownership of assets that are relevant to their strategic needs and capacity.</p> <p>Increased utilization of knowledge and skills in community mobilization, management, M&amp;E, HIV/AIDS and gender mainstreaming by CDMTs and RDCs.</p>	<p>Communities use the acquired knowledge and skills to sustain the assets created.</p>
<p><b>Major Activity Outputs</b></p> <p>1.1.1 60,000 basic school children receive a nutritious wet ration at school and 9,000 girls, orphans and other vulnerable children from HIV/AIDS affected households receive dry take-home rations.</p> <p>1.2.1 60,000 pupils per year are periodically tested for intestinal worms and dewormed and treated for bilharzia.</p>	<p><b>Activity Output Indicators</b></p> <p>Quantity of wet ration distributed to the targeted school children.</p> <p>Quantity of dry food ration handed over to targeted girls, orphans and other vulnerable children.</p> <p>Number of deworming kits and drugs procured.</p> <p>Number of targeted children dewormed and treated for bilharzia.</p>	<p>Government and partners sustain their commitment to the ABE activity.</p>



COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY
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Major Activity Outputs	Activity Output Indicators	Assumptions and Risks
<p>1.3.1 Targeted PTAs, AMCs and community groups are mobilized and trained on health and nutrition education.</p>	<p>Number of PTAs, AMCs and community groups trained in health and nutrition education.</p>	<p>Communities and schools take responsibility for the activity and their commitment is sustained.</p> <p>Parents and school authorities appreciate the importance of school feeding and deworming on children's school progress.</p>
<p>2.1.1 86,250 undernourished children under 5 attending community nutrition and health centres receive a daily family take-home ration.</p>	<p>Quantity of food distributed to all categories of targeted beneficiaries.</p>	<p>There is proper screening to ensure that deserving beneficiaries get assistance.</p>
<p>2.1.2 35,000 (7,000 yearly) undernourished expectant and nursing mothers receive individual dry rations during the lean season.</p>	<p>Number of beneficiaries who receive food per month.</p>	
<p>2.1.3 Approximately 32,253 HIV/AIDS/TB patients (6,451 per year) and their dependants (161,255 beneficiaries) receive dry family rations through home-based care for a period not exceeding one year.</p>	<p>Quantity of food distributed to all categories of targeted beneficiaries.</p>	<p>There is proper screening to ensure that deserving beneficiaries get assistance.</p>
<p>2.1.4 20,000 children under 5 hospitalized for illness or malnutrition (4,000 per year) receive three cooked meals daily as wet ration.</p>	<p>Number of beneficiaries per month who receive food.</p>	




COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY
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Major Activity Outputs	Activity Output Indicators	Assumptions and Risks
<p>2.1.5 Expectant and nursing mothers on the HIV prevention of mother to child transmission programme receive family take-home ration.</p>	<p>Number of expectant and nursing mothers who attend the PMTCT programme per month.</p> <p>Quantity of food distribution to targeted expectant and nursing mothers.</p>	
<p>2.2.1 Awareness and skills training provided to caregivers and targeted beneficiaries in areas of nutrition, health, HIV/AIDS and income-generation among targeted beneficiaries and service providers.</p>	<p>Number of caregivers trained in targeted communities participating in skills training sessions.</p> <p>Number and type of skills provided to target groups.</p> <p>Number of community-based institutions and service providers trained in mobilizing the community to provide care and nutrition/health/HIV/AIDS to vulnerable households.</p>	
<p>3.1.1 65,278 hungry poor households in rural and urban food-insecure and vulnerable areas access food per year during the programme.</p>	<p>Number of households that gain immediate food supply.</p> <p>Quantity of food rations distributed to targeted beneficiaries.</p> <p>Percentage of resources allocated to food-security and disaster-mitigation activities.</p>	



COUNTRY PROGRAMME—ZAMBIA (2002–2006) LOGICAL FRAMEWORK SUMMARY

Major Activity Outputs	Activity Output Indicators	Assumptions and Risks
<p>3.2.1 Assets that mitigate the impact of HIV/AIDS, natural disasters and food insecurity are created in the fields of agriculture, community infrastructure, agro-forestry, water and sanitation, environmental and natural resources conservation.</p>	<p>Number of orchards, vegetable gardens, dams, fish ponds, wood lots, conservation farming plots, irrigation canals, embankments and community roads.</p> <p>Number and type of training sessions conducted per year.</p> <p>Number of beneficiaries, individuals and groups linked to micro-financing and other support systems.</p> <p>Type and size of natural resources protected and reclaimed.</p> <p>Quantity of food given for asset creation.</p>	<p>Viable and appropriate support partners will be available and committed to assisting the beneficiaries.</p>
 <p>3.3.1 Women constitute 60 percent of beneficiaries.</p> <p>3.3.2 Women constitute 50 percent of leaders.</p> <p>3.3.3 Beneficiaries and targeted community leadership structures participate in programme planning, implementation and M&amp;E, of activities.</p>	<p>Number of women who gain access to and ownership of assets relevant to their strategic needs and capacity.</p> <p>Number of CDMTs and RDCs trained in community mobilization, management and M&amp;E, HIV/AIDS and gender awareness.</p> <p>Number of CDMTs and RDCs created and trained to manage and sustain created assets.</p> <p>Quantity of food distributed for skills training.</p>	<p>Constructive political participation in project management.</p> <p>Leadership roles are of strategic benefit to women.</p>

## ANNEX III

## BUDGET PLAN FOR ZAMBIA COUNTRY PROGRAMME (2002–2006)

## Basic Activities

	Activity I	Activity II	Activity III	Total
Food commodities (mt)	10 230	20 926	20 093	<b>51 249</b>
Food commodities (value US\$)	4 111 317	6 739 245	4 835 025	<b>15 685 587</b>
External transport	58 685	73 883	29 925	<b>162 493</b>
LTSH (total)	1 530 453	3 130 582	3 005 838	<b>7 666 873</b>
LTSH (cost per mt)	150	150	150	<b>150</b>
ODOC	325 500	591 500	465 000	<b>1 382 000</b>
<b>Total Direct Operational Costs</b>	<b>6 025 955</b>	<b>10 535 210</b>	<b>8 335 788</b>	<b>24 896 953</b>
DSC <sup>1</sup>				<b>2 487 250</b>
ISC <sup>2</sup>				<b>2 135 968</b>
<b>Total WFP costs</b>				<b>29 520 171</b>
<b>Government contribution</b>	<b>602 596</b>	<b>1 053 521</b>	<b>833 579</b>	<b>2 489 695</b>

## BUDGET PLAN FOR ZAMBIA COUNTRY PROGRAMME (2002–2006)

## Supplementary Activities

	Activity I	Total
Food commodities (mt)	11 970	<b>11 970</b>
Food commodities (value US\$)	3 087 000	<b>3 087 000</b>
External transport	3 150	<b>3 150</b>
LTSH (total)	1 790 712	<b>1 790 712</b>
LTSH (cost per mt)	150	<b>150</b>
ODOC	290 000	<b>290 000</b>
<b>Total Direct Operational Costs</b>	<b>5 170 862</b>	<b>5 170 862</b>
DSC <sup>1</sup>		<b>509 000</b>
ISC <sup>2</sup>		<b>443 029</b>
<b>Total WFP costs</b>		<b>6 122 891</b>
<b>Government contribution</b>	<b>517 086</b>	<b>517 086</b>

<sup>1</sup> The DSC amount is an indicative figure presented to the Executive Board for information purposes. The annual DSC allotment for a Country Programme is reviewed and set annually following an assessment of DSC requirements and resource availability.

<sup>2</sup> The ISC rate may be amended by the Executive Board during the period covered by the Country Programme.







## ACRONYMS USED IN THE DOCUMENT

ABE	Assistance to basic education
AIDS	Acquired immune deficiency syndrome
AMC	Activity Management Committee
ARC	Activity Review Committee
ASC	Activity Steering Committee
CBO	Community based organization
CCA	Common country assessment
CDMT	Community development management team
CP	Country programme
CPMC	Country programme management committee
CPTC	Country programme technical committee
CSO	Country strategy outline
DC	District council
DDCC	District Development Coordinating Committee
DHMB	District Health Management Board
DOC	Direct operational cost
DSC	Direct support cost
FAAD	Food Aid and Development
FAO	Food and Agriculture Organization of the United Nations
FFA	Food for assets
GDI	Gender-related development index
GDP	Gross domestic product
GIDD	Gender in Development Division
HIV	Human immunodeficiency virus
IGA	Income-generating activities
LDC	Least developed country
MAFF	Ministry of Agriculture, Food and Fisheries
MCDSS	Ministry of Community Development and Social Services
MOE	Ministry of Education
MOFNP	Ministry of Finance and National Planning
MOH	Ministry of Health
NGO	Non-governmental organization
NPVG	Nutrition Programme for Vulnerable Groups
PTA	Parent-teacher Association
RDC	Residents' Development Committee
TB	Tuberculosis
UNAIDS	United Nations Programme on HIV/AIDS



UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VAM	Vulnerability analysis and mapping
WHO	World Health Organization

