

ACTIONS FOR DEVELOPMENT PROGRAMS - MBOZI

(ADP-MBOZI)



ANNUAL PLAN 2023

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LIST OF ABBREVIATIONS

ADP	Action for Development Programmers.
ART	Anti-Retroviral Therapy
AESA	Agro-Ecological System Analysis
ACHIEVE	Adolescent and Children HIV Incidence reduction, Empowered and Virus Elimination.
AGM	Annual General Meeting.
AGYW	Adolescent Girls and Young Women.
CBHSP	Community Base Health Service Provider.
CC	City Council
CCWS	Community Case Workers.
CDO	Community Development Officer.
CHW	Community Health Worker
CHMT	Council Health Management Team
CLHIV	Children Living With HIV.
CMC	Case Management Coordinator.
CMO	Case Management Officer.
CTC	Counseling and Testing Center.
DACC	Data Analysis Coordinating Centre.
DBS	Dried Blood Spot
DC	District Council
DCDO	District Community Development Officer.
DMO	District Medical Officer.
DSWO	District Social Welfare Officer.
DREAMS	Determined, Resilient, Empowered, AIDS free, Mentored and Safe
ED	Executive Director.
ESLO	Economic Strengthening Live Hood Officer.
FFS	Farmers' Field School
FO	Field Officer

FSC	Farmers' School Centre
FSW	Female Sex Worker
GBV	Gender Based Violence
HEI	HIV Exposed Infant
HHO	Health and HIV Officer.
HIV/AIDS	Human Immunodeficiency /Acquire Immunodeficiency Syndrome.
HIVST	HIV Self-Testing
HVL	HIV Viral Load
HRAQM	HIV Rate Assessment Quarterly Monitoring.
HTC	HIV Testing Counseling.
HTS	HIV Testing Service.
ICHF/TIKA	Improved Community Hearth Fund.
IIT	Interruption In Treatment
IEC	Information Education and Communication
IT	Information Technology.
KIBOWAVI	Kilimo cha Mboga na Matunda kwa Wanawake na Vijana
KP	Key Population.
KVP	Key Vulnerable Population.
LCW	Lead Case Worker
LFO	Lead Field Officer
LGA	Local Government Authority.
LV	Livelihood Volunteer
LCW	Lead Case Worker
LSP	Local Service Provider
M&E	Monitoring and Evaluation
MISSAP	Missed Appointment
NGO	Non- Government Organization.
NICMS	National Integrated Case Management System.
MVC	Most Vulnerable Children
OVC	Orphans Vulnerable Children.

PC	Program Coordinator.
PO	Program Officer.
PP	Priority Population.
QDS	Quality Declared Seeds
RCH	Reproductive and Child Health
TB	Tuberculosis.
TC	Town Council

INTRODUCTION.

This is an annual work plan prepared by Actions for Development Programmes(ADP) Mbozi for January to December 2022 financial year. The plan outlines projects/programmes and organization development activities to be implemented based on the implementation of the new five years' strategic plan (2022-2026).

The plan is built on the commitment already made between ADP-Mbozi and development partners to implement activities that address the needs of target group in the respective area where ADP-Mbozi is working.

Therefore the work plan embeds and reflects the key purpose of the organization of contributing towards improving the life of marginalized families in Tanzania through increased households' food security, improved household nutrition, income and livelihood assets.

The document (plan) is divided into four main parts as follows: -

The first part focuses more on the introduction, current external environmental issues surrounding the organization, brief history and setup of the organization and working area.

The second part provides information on ADP-Mbozi strategic direction, highlighting on the vision, mission and values, the focus areas of the organization as stated in the five years' strategic plan (2022 to 2026) including the approaches used by ADP Mbozi.

The third part is the main body of this document showing the main and strategic objectives, as well as the projects to be implemented under each focus area. The activities, targets and milestones are detailed in this section.

The fourth part shows the estimated budget that will facilitate the implementation of the planned activities.

PART ONE: GENERAL BACKGROUND INFORMATION.

1. EXTERNAL ENVIRONMENT EXPERIENCED IN 2022 ANNUAL WORKPLAN

1.1. National census

Tanzania conducts census after every ten years for the purpose of obtaining basic demographic information including the number of people in the country age, sex, births/deaths, and status of

education, economic activities, housing and disabilities. The census enable the government and stakeholders to understanding the trend of population growth and needs and hence a foundation of planning for integrated and sustainable development in various sectors. Last year, 2022 the country conducted census to determine the current population which the country hosts. According to National Bureau of Statistics, Tanzania has a total population of 61,741,130 (Male 30,053,130 and Female 31,687,990). This is a great opportunity for the organisation in planning and implementing the projects.

1.1. Fertilizer subsidies to farmers

As part to ensure that farmers in the country increase productivity, and hence meet the market demand, the government of Tanzania in 2022 supported farmers with fertilizer subsidies. Each farmer was supported with fertilizer(s) according to the number of acreage possessed. It has been an opportunity for the organisation to increase extension service delivery to farmers/beneficiaries and market demand creation as it is expected that there will be high yield productivity.

1.2. Increased energy prices

Energy prices has constantly been increasing as time goes on. The energy, including fuel, gas, and electricity has been skyrocketing in the country causing increased prices of other commodities particularly food products. The instability of prices has also caused the planned budgets for projects to become unrealistic.

1.3.COVID-19

The organization continued to experience the outbreak of COVID-19 which in one way or another affected project implementation especially activities that involve mass gathering. However, the organisation has been in front line to continue educating and sensitized its beneficiaries and communities at large on importance of being vaccinated.

1.4. HISTORICAL BACKGROUND

Agricultural Development Project in Mbozi came into being in 1986 to solve the problem of hunger that had occurred in Mbozi and Momba districts. The project continued to operate in different phases until 1995 and because of its good performance it was gradually expanding in terms of geographical coverage as well as number of interventions. By 1995 the project was

operating in almost all divisions of Mbozi and Momba districts and new interventions of group organizations, Savings and Credits, irrigation, HIV/AIDS and gender were added.

As this project was coming to an end in 1995 stakeholders considered what would be the way forward as the target communities were still in need of project services. Therefore through the institutionalization process, an option of registering the project as a Trust Fund was chosen and actual registration was effected on 29 November, 1995.

Following the changes in law governing the establishment of Non Governmental Organizations in Tanzania [section 11(3) of Non Governmental Act No. 24, of 2002], ADP Mbozi was re-registered as NGO on 10th October 2005, with a registration number 1639. One of the important developments resulting from re-registration is that the organization can now operate throughout the country. At the same time the organization changed its name from Agricultural Development Programmes Mbozi Trust Fund to **Actions for Development Programmes – Mbozi** because currently the interventions are more than agricultural production.

1.5. ORGANIZATIONAL SET UP

The supreme organ of the organization is the General Meeting currently composed of five founder members and eight ordinary members. The Management and Control of the affairs of ADP Mbozi is entrusted to the Board of Directors which is responsible to the General Meeting.

The management team of the organization on the other hand guides the execution of the day to day implementation of the programmes and organizational processes. The management team is composed of heads of departments. Other key members of staff may be co-opted. The current departments of the organization include Sustainable Food and Nutrition development, Entrepreneurship and Market Development, Community Empowerment, Environment and Climate change management and Finance, Administration and Organizational Development. Heads of departments report to the executive director.

1.6. WORKING AREA

Currently the organization implements projects in 19 District councils, 6 townships in Southern Highlands of Tanzania in Njombe, Rukwa, Katavi, Songwe and Mbeya regions. In all districts, the organization has sub offices and/or has established contact persons.

PART TWO: ADP MBOZI STRATEGIC DIRECTION

This section elaborates on the strategic direction of ADP Mbozi for 5 years starting on the 1st January 2022 to 31st December 2026 and it is a first year of implementing the new strategic plan. Therefore in this section the vision and mission of the organization are well stated including the core values. The priority focus areas for this period are listed and the strategies for achieving the objectives of each area of focus are listed down.

2.1: VISION, MISSION AND VALUES OF ADP MBOZI.

2.1.1 Vision

ADP Mbozi envisions rural and urban communities of Tanzania attaining livelihood security and sustainably managing their resources.

2.1.2 Mission

ADP Mbozi is a leader in facilitating socio-economic empowerment of marginalized¹ rural and urban communities in Tanzania Mainland through promotion of agriculture production in the context of climate change and improved nutrition, entrepreneurship and market development, community empowerment on gender, HIV/AIDS, Children, good governance and environment. Moreover, the organization will take into consideration of the pandemic diseases in the course of programme implementation and also strive to strengthen its internal capacity in order to successfully implement the above-mentioned focus areas.

2.1.3 Values

- i. Commitment: we believe commitment to our work shall lead to realization of significant positive changes in our organization and the community we work with.
- ii. Sharing out: we believe that development is brought about through combining efforts of different stakeholders therefore the communities we work with have a significant contribution towards their own development.
- iii. Transparency: we commit ourselves to be transparent in our organization and we shall inspire the same to the communities we work with.

¹ *Marginalized communities* are defined as all the people (smallholder farmers, Orphans and Vulnerable Children and low income women) who because of their position in the society are exploited and are unconscious of their abilities to bring about their development and hence subjected to poverty.

- iv. Trustworthy: we believe that trustworthy can help us to work as a team and therefore achieve our goals much more efficiently. We are also convinced that trustworthy, in case of farmers, is a pre-requisite for successful collective selling of their produce.

2.2: STRATEGIC FOCUS AREAS AND STRATEGIES

The strategic plan 2022 – 2026 has four focus areas as listed; -

- i. Food security and nutrition in the context of climate change.
- ii. Entrepreneurship and market development for crop and livestock producers
- iii. Community Empowerment on HIV/AIDS, children, gender, environment and good governance.(Epidemics include COVID-19)
- iv. ADP-Mbozi internal capacity strengthening

From the above focus areas four strategic objective and strategies thereof were developed as follows;-

2.2.1: Food security in the context of climate change and nutrition improved.

1. To increase crop and livestock production
2. To strengthen post-harvest practices.
3. To improve nutrition status at household level.
4. To promote appropriate farming technologies with adoption to climate change.
5. To improve food budgeting at household level.
6. To promote Horticulture and aquaculture at household level.
7. Enhance climate change and variability management

2.2.2: Entrepreneurship and market accessibility enhanced.

1. To strengthen producers' marketing groups and associations.
2. To promote business development skills.
3. To promote access to markets and market information.
4. To enhance producers' and traders' linkage.
5. To enhance access to financial services

2.2.3: Enhanced community empowerment in dealing with children, gender, HIV/AIDS, and Good Governance

1. To address and support HIV/AIDS prevention and impact mitigation at community level including OVC/MVC.
2. To advocate for development issues related with youth and AGYW empowerment support.
3. To promote children rights and safeguarding.
4. To promote environmental issues in community level.
5. Promote good governance.
6. To promote gender equality and equity.

2.2.4. Governance and management capacity of ADP Mbozi strengthened in order to operate efficiently and effectively.

1. To enhance financial and human capacities of ADP-Mbozi
2. To improve structure, policies, systems and procedures
3. To improve and operationalize monitoring and evaluation plan/System.
4. To improve networking and collaboration.
5. To improve Publicity of ADP-Mbozi and its Products.
6. To develop quality standards of ADP-Mbozi services provision.

2.3. THE APPROACHES

For the five years 2022-2026 Strategic Plan, ADP Mbozi will operate by using the following approaches:

- a) Working with target beneficiaries through groups.
- b) Use of community volunteers.
- c) Farmers field schools.
- d) Value chain development.
- e) Networking and Outsourcing.
- f) Bi-directional referrals and linkages.
- g) Learning centers.
- h) Integration within the organization and between organizations.

PART THREE: ANNUAL WORK PLAN FOR 2023.

The work plan for year 2023 focuses on the obligation the organisation and other development partners has committed to ensure that the communities served by ADP Mbozi, in areas reached, obtain quality services and thereafter sustain the general community's wellbeing.

In this regard, much appreciation is extended to all development partners who have joined hands with ADP Mbozi in bringing about much needed development to the marginalized communities.

All planned activities reflect the focus areas of the organization as stated in the 2022 to 2026 strategic plan.

3.1 GENERAL OBJECTIVE.

The main objective of the organization is to contribute towards improving the quality of life of marginalized communities in Tanzania mainland through increased households' food, nutrition security, and income and livelihood assets.

3.2. CURRENT PROJECTS UNDER EACH STRATEGIC OBJECTIVE.

In order to meet the above strategic and main objective, the organization will implement the programmes and projects as presented below; -

No.	Name of project	Objective	Where implemented	Funder
	Strategic Objective 1: Sustainable food security and nutrition status in communities improved.			
1.	Integrated Food Security and nutrition at household level in Songwe District Council	Improved food security, nutrition and gender equality to 640 households level in 9 wards of Songwe district, Tanzania by December 2026	13 villages (9 wards) in Songwe district. (2019-2022)	Horizont3000
2.	Empowering Women and Youth in Horticulture Production and Marketing (KIBOWAVI = Kilimo Bora cha Mbogamboga na Matunda kwa	Improve livelihood of 75,000 rural people with focus to women and youth in Songwe, Mbeya and Katavi regions by 2024.	10 district councils in Songwe, Mbeya and Katavi regions, South Highland of Tanzania.	European Union Through HELVETAS

No.	Name of project	Objective	Where implemented	Funder
	Wanawake na Vijana) in three regions of Southern Highlands.		(2020-2024)	
Strategic Objective 2: Entrepreneurship and Market accessibility enhanced.				
-	-	-	-	-
Strategic objective 3: Enhanced community empowerment in dealing with children, gender, HIV/AIDS, and Good Governance				
3	Comprehensive HIV prevention, care and treatment services to KP and PP in Chunya and Songwe district.	To increase comprehensive HIV prevention, care and treatment services to KP and PP in Chunya and Songwe districts so as to reduce the incidence of new HIV transmission as well as increase and retain client in ART services by September 2022	Chunya district (October 2022-September 2023)	Walter Reed Mbeya.
4	USAID Afya Yangu Southern Program	To deliver high quality integrated HIV&TB prevention care and treatment services that will improve health outcomes particularly for youth and children.	Councils of Wanging'ombe, Makambako and Njombe rural. (October 2022-September 2023)	USAID under DELOITTE CONSULTING LIMITED
7-12-	ACHIEVE/DREAMS project	To deliver high quality OVC services and DREAMS interventions for AGYW aged	Mbozi, Mbeya CC, Kyela DC, Mbalari DC, Momba DC	Pact Tanzania.

No.	Name of project	Objective	Where implemented	Funder
		10-14 years.	and Tunduma TC. (2022-2023)	
<i>Governance and management capacity of ADP Mbozi strengthened.</i>				
No.	Name of project	Objective	Where implemented	Funder
9	Strengthen an internal capacity of the organization	To improve the ability in leading and governing the organization so as to operate efficiently and effectively by December 2023.	Within the organization	Internal funds

3.3. SUSTAINABLE FOOD SECURITY AND NUTRITION STATUS IN COMMUNITIES IMPROVED.

3.1.1: PROJECT TITLE: Integrated food security and nutrition at household level in Songwe District Council

3.3.1 Strategic Objective 1: Sustainable food security and nutrition status in communities improved.																
a. Annual work plan (January to December 2023): Strengthening food security, nutrition and gender equality in Songwe District of Tanzania.																
No .	ACTIVITY	ACTIVITY TARGET	MEANS OF VERIFICATION	TIME FRAME												RESPONSIBLE
				J	F	M	A	M	J	J	A	S	O	N	D	
Result 1: Improved Crops and livestock (Chicken) promotion to 640 smallholder farmers by December 2026																
1	Sensitization meeting on FFS to 13 villages	13 villages	Field and financial reports													FO
2	Conduct Agro-Ecological System Analysis (AESAs)	13 villages	Field and financial reports													FO
3	Conduct training on improved crop management to 640 farmers	640 farmers	Training and financial reports													FO/PC
4	Conduct training on field and yield measurement to 640 famers	640 farmers	Training and financial reports													FO/PC
5	Training of 26 seed producers (QDS) from 13 villages	26 seed producer	Training and financial report													FO/PC
6	Support farmers with 260 kg of foundation seeds to seed producers, transport of seeds,	26 seed	Procurement and financial report													FO/PC

Result 2: Improved good post-harvest management to 70% of the target smallholder farmers by December 2026																
1	Conduct awareness meeting on available GHPP technologies to 640 farmers	640 farmers	Field and financial reports													FO
2	Promotion of affordable storage structure to 640 farmers.	640 farmers	Field and financial reports													FO
3	Conduct training to 640 farmers on improved storage management	640 farmers	Training and financial report													PC
4	Support 65 farmers on farm based post-harvest handling techniques	65 farmers	Procurement and financial report													PC
5	Conduct sensitization meetings on food budgeting to 640 farmers	640 farmers	Field and financial reports													FO
6	Conduct practical training on food budgeting at household level to 640 farmers	640 farmers	Training and financial report													PC
7	Conduct activities follow up and monitoring	Once per month	Monitoring and financial report													M & E /PC
Result 3: Improved household nutrition to target smallholder farmers focusing to 192 under five children by December 2026																
1	Identify household with under five children to 640 farmers	640 farmers	Field and financial reports													FO

2	Training of local available food and its utilization to 640 farmers	640 farmers	Training and financial report														FO
3	Demonstration of cooking and wash	640 farmers	Field and financial report														FO
4	Demonstration on vegetable preservation	640 farmers	Field and financial report														CDO
5	Demonstration on nutritive flour	640 farmers	Field and financial report														CDO
6	Sensitization on 1000 days window opportunities	640 farmers	Field and financial report														CDO
7	Facilitate farmers to attend the breastfeeding week to 150 participants	150 participants	Field and financial report														CDO
8	Facilitate farmers to attend world food day- 300 participants	300 participants	Field and financial report														CDO
9	Facilitate farmers to attend World AIDS days	300 participants	Field and account reports														CDO
10	Support community educators in implementation of activities 13 bicycles and various training materials	13 community educators	Procurement and financial report														CDO

[illegible]

Output 5: Enhanced organisation internal capacity development															
1	Conduct gender training to 12 project staff	12 project staff	Training and financial report												PC
2	Conduct re-fresher training to 12 project staff on financial literacy skill	12 project staff	Training and financial report												PC
3	Purchase of office equipment, furniture and motorcycles (3 computers, 1 printer, 3 motorcycle, generator.														Accountant

3.3.2: PROJECT TITLE: EMPOWERING WOMEN AND YOUTH IN HORTICULTURE PRODUCTION AND MARKETING IN MBEYA, SONGWE AND KATAVI REGION – TANZANIA (KIBOWAVI).

No	ACTIVITY	ACTIVITY TARGET	MEANS OF VERIFICATION	TIME FRAME												RESPONSIBLE
				J	F	M	A	M	J	J	A	S	O	N	D	
Result 1: Skills and knowledge on GHP, nutritious and safe food, and quality value addition																
1	Strengthening of 600 producer groups on nutrition sensitive practices	600	Field and account reports													POs

	practice (including gender and HIV aspects)																
10	Conducting refresher training to Government extension officers (at community level) in nutrition sensitive agriculture practices.	100	Field and account reports														POs & DNuOs
11	Cascading nutrition sensitive practice to producer groups (Including kitchen/home gardens)	600	Field and account reports														POs & LSPs
12	Selecting and development IEC materials	1000	Field and account reports														POs & DNuOs
Result 2: Market development and linkages																	
13	Tracking, follow up and documentation of input supply financing model	5	Field and account reports														POs
14	Developing of input distribution modal using LSPs	10	Field and account reports														POs

15	Conduct linkage between innovative services suppliers (Simusolar, Drip irrigation equipment and installation, SUGECO) and producers	15	Field and account reports														POs
Result 3: Engagement and partnership for inclusive growth																	
16	Setting a demonstration of modern small animal keeping at ward level and Promotion of Kikapu cha maajabu (Local hotpot)	50	Field and account reports														POs/LSPs/ CHWs
17	Conduct assessment on Nutrition status and food diversification	2	Field and account reports														POs
18	Tracking, follow up and documentation of malnutrition cases and small animal rearing	15	Field and account reports														POs
19	Participation in events to disseminate best practices (World Breastfeeding Week, National Nutrition Day, Child Nutrition Month, World Food Day, World	5	Field and account reports														POs

	HIV Day)																	
20	Conducting Cooking and WASH demonstration for Nutrition purposes	50	Field and account reports															POs & CHWs
21	Dissemination of good nutrition and hygiene practices messages through Media (radio, TV)	10	Field and account reports															POs
22	Monitoring, evaluation and learning		Field and account reports															POs

3.4: ENHANCED COMMUNITY EMPOWERMENT IN DEALING WITH CHILDREN, GENDER, HIV/AIDS, AND GOOD GOVERNANCE

3.4.1: USAID ACHIEVE PROJECT ANNUAL WORK PLAN-(MBEYA CC, MBARALI, KYELA, MBOZI,TUNDUMA AND MOMBA)-2022/2023

	ACTIVITY	TARGET	MEANS OF VERIFICATION	TIMEFRAME												RESPONSIBLE
S/N				O	N	D	J	F	M	A	M	J	J	A	S	
2.2.1: a	Introduce and conduct change management training to TPPs to increase and drive better performance in all organizational and program aspects to behaviors and practices among leadership, management, and staff	5 ADP – Mbozi staff effectively attended the trained.	Training report													Capacity development team
2.2.2	Provide CD funding for TTPs to address OVC/DREAMS program implementation CAPs as a component of service delivery subgrants issues under	1 seed fund availed to ADP Mbozi	Report													Capacity development team, Grants team, Finance team, ADP Executive Director, Finance Manager, Human resources Officer

	SO3															
2.2.4	Support experiential training/ placement to ACHIEVE staff and other local CD providers gain experience to areas related to organizational and programmatic sustainability, such as business and sustainability planning; advocacy and community engagement; and leadership, management, and governance.	2 staff from ADP-MBOZI	Training report													ADP MBOZI, Capacity development team
3.1.1a	ACHIEVE will oversee the provision of medical insurance (iCHF/NHIF cards) to the families of C/ALHIV and HEI to enhance access to	640 C/ALHIV and HEI families received iCHF cards from the project.														HHO, CMO,M&E, LCWs/CCWs

	health services.	[Kyela (116), Mbarali (143) Mbeya CC (200) Mbozi DC (106) Momba DC (31) Tunduma (43)]														
3.1.1.1a	HIV Integration Advisor will work with ADP-Mbozi support high volume CTCs to track clients with interruption in treatment using the ACHIEVE sticker model.	C/ALHIV with interruption in treatment traced and referred to care														HHO, CCWs
3.1.1.1b	HHO with support from ACHIEVE will collaborate with health facilities and clinical partners and conduct data triangulation of RCH clients who are also ACHIEVE	39 High volume CTCs [Kyela (8), Mbarali (12)														HHO, OVCLO, M&Es

	beneficiaries monthly to build on strengths and address gaps including HEI enrolment into ACHIEVE and ensuring that HEI served under ACHIEVE are not missing their scheduled clinics or DBS tests.	Mbeya CC (5) Mbozi DC (8) Momba DC(4) Tunduma (2)]															
3.1.1.1c	HHO and OVC Linkage Officers with support from ACHIEVE will collaborate with clinical partners and Health facilities to conduct in-service trainings for LCWs/CCWs during monthly meetings to strengthen their capacity in areas of Pediatric and Adolescent HIV to	798 LCW/CCW from 170 wards capacitated on pediatric and adolescent HIV through in-service trainings conducted during LCW/CCWs monthly meetings															HHO and OVC Linkage Officers, CCWs/LCWs

	better support caregivers of C/ALHIV, using the simplified facilitation guide.																
3.1.1.1d	HHO will collaborate with health facilities and clinical partners and conduct data triangulation of RCH clients and CTC clients who are also ACHIEVE beneficiaries monthly to build on strengths and address gaps including C/ALHIV and HEI enrolment into ACHIEVE and ensuring that C/ALHIV and HEI served under ACHIEVE are not missing their scheduled clinics or DBS tests (Communication	78 health facilities focal persons received communication allowance. (2 from each high-volume CTC) 39 high volume CTCs															HHO, OVCLO, M&Es

	allowance)																
3.1.1.1e	HHO/OVCLO who are placed or linked with the high-volume health facilities will coordinate with LCWs/CCWs to identify children of index clients, facilitate access to testing in a timely manner including escorted referral upon consent, and monitor them to ensure HIV testing services completion	All eligible beneficiaries for index testing referred and results documented															HHO/OVCLO , LCWs/CCWs
3.1.1.1f	HHO/OVCLO will coordinate with clinical IPs and health facilities to generate a list of HEI eligible for DBS collection for easy tracking by CCWs and timely referral for Early Infant Diagnosis	All HEI eligible for DBS out of 3,772 (HEI target)															HHO/OVCLO , M&E Officer

3.1.1.1g	LCWs/CCWs will use the HIV screening tool to capture high risk contacts of enrolled C/ALHIV such as biological mothers and siblings under 18 years with unknown HIV status and refer them for HTS	All beneficiaries tested HIV positive through index testing followed up.															HHO, L/CCWs
3.1.1.1h	LCWs/CCWs will develop care plans with mothers of HEI during routine case management household visits addressing challenges around ART uptake, clinical attendance and scheduling all dates for DBS testing for HEI and maternal HVL monitoring.	Care plans developed and followed up to improve OVC ART uptake outcome															HHOs, CMO,CMC,L/CCWs
3.1.1.1i	LCWs/CCWs will utilize the appointment logs/calendars	3,395 ART calendars received and															CMO,CMC,L/CCWs

	including use of telephone reminder to ensure that all HEI attends clinics and receives HIV testing services as scheduled and the HIV status is captured using HRAQM tool	distributed to HEI caregivers [Kyela (535), Mbarali (862) Mbeya CC (986) Mbozi DC-(477) Momba DC-(191) Tunduma (345)]																
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3.1.1.1j	For Mothers who need peer support, LCWs/CCWs with support from HHO and health facility will invite competent peer mother to visit the household upon consent, to discuss issues related to stigma, proactively address challenges in attending visits, and coping with ART adherence.	170 home visits conducted to address stigma, and other related challenges visited [Kyela (27), Mbarali (43) Mbeya CC (49) Mbozi DC (24) Momba DC (10) Tunduma (7)]														HHO, CMO,CMC,L/CCWs
3.1.1.1k	LCWs/CCWs will make use of the ART Uptake tracking calendars for monitoring of ART daily uptake for C/ALHIV who are on ART during household	7,265 ART uptake tracking calendas [Kyela (1,401), Mbarali (1,517) Mbeya CC (,)]														HHO, CMOs, CMCs, LCWs/CCWs

	visits	Mbozi DC (1,289) Momba DC (325) Tunduma (380)]															
3.1.1.11	Strengthen the capacity of LCWs/CCWs in Pediatric and Adolescent HIV care and TB screening through In-service training during monthly meetings	798 LCWs/CCWs from 170 wards															HHO, LCWs/CCWs
3.1.1.2a1	HHO will organize semi-annual Council Health Management Team (CHMT) meetings to address issues around ART initiation, HEI	42 CHMT members attended semiannual meetings (7 from															HHO, M&E

	cascade, and retention into HIV care and treatment services.	each council)															
3.1.1.2a2	HHOs will hold Quarterly priority CTC Meetings to address issues around ART initiation, HEI cascade, and retention into HIV care and treatment services	4 quarterly meetings with 39 CTC focal persons conducted															HHO and OVCLO
3.1.1.2b	HHO will support LCWs/CCWs to invite peer C/ALHIV to visit the OVC at their home upon their caregiver's consent. In such cases, clinical partners will select a competent peer educator to visit the C/ALHIV to discuss issues related to stigma, peer	40 home visits conducted [Kyela (8), Mbarali (8) Mbeya CC (13) Mbozi DC (7) Momba DC (2) Tunduma (2)]															HHO, LCWs/CCWs

	pressure, coping with ART adherence, and other topics.																
3.1.1.2c	HHO and OVC Linkage Officers with support from ACHIEVE will collaborate with clinical partners and Health facilities in promoting family-centered approach to MMD by synchronizing MMD schedules and drug pick-ups for caregiver-child pairs, and caregiver-grandparent/auntie/uncle pairs. Trained LCWs/CCWs will educate beneficiaries on MMD and refer them to health facilities for MMD when eligible.	All beneficiaries oriented on MMD															HHO, L/CCWs

3.1.1.2d	HHO Linkage Officers with support from ACHIEVE will collaborate with health facilities and clinical partners to conduct monthly data triangulation of CTC clients who are also ACHIEVE beneficiaries, to build on strengths and address gaps including enrolment into ACHIEVE ensuring that C/ALHIV served under ACHIEVE are on optimal ARV regimens and monitor the HVL cascade of C/ALHIV enrolled in OVC programs	All CLHIV and HEI eligible for enrolment															HHO
3.1.1.2e	HHO with support from ACHIEVE will support a sustainable HIV Viral Load suppression (HVLS)	C/ALHIV referred to health facilities and PLHIV for further adherence															HHO, L/CCWs

	by creating demand among C/ALHIV and their caregivers for HVL testing and attaining HVLS, provision of HVL literacy through case management, linking those with high HVL to ART adherence community groups, escorting them to facility based EAC session and other person-cantered services.	support															
3.1.1.2f	HHO and OVC Linkage Officers will work with high-volume CTCs to identify C/ALHIV with poor adherence and track those who have interrupted treatment, enroll them in ACHIEVE, and link	C/ALHIV with poor adherence and with interruption in treatment referred to care.															HHO and OVC Linkage Officers

	them back to CTCs																
3.1.1.2g	HHO and OVC Linkage Officers will coordinate with clinical partners and health facilities in tracking of A/YLHIV for appointment reminders/missed appointments using A/YLHIV peer navigators.	A/YLHIV tracked for appointment reminders/missed appointments using A/YLHIV peer navigators.															HHO, LCWs/ CCWs
3.1.1.2h	HHO and OVCLO staff placed at the CTCs to work with facilities and care and treatment partners to identify CTC clients who are also ACHIEVE's beneficiaries eligible for community ART refill, and upon their consent link them with group leaders in their localities to enhance	All CLHIV eligible for ART refill and linked to groups for continuation of treatment															HHO and OVC Linkage Officers , HHO, LCWs/ CCWs

	continuation of treatment.																
3.1.1.2i	HHO and OVC Linkage Officers work in collaboration with community ART dispensing group leaders to inform eligible and consented C/ALHIV on appointment dates and location.	Number of C/ALHIV informed on community ART dispensing															HHO and OVC Linkage Officers
3.1.1.2j	Using the ACHIEVE facility level Supportive Supervision Checklist refined in FY22, ADP-MBOZIs' HHOs will visit high volume CTCs at least once a month to enhance coordination between the ADP-MBOZIs and CTCs.	12 monthly visits conducted. 39 supportive supervision checklist administered															HHO
3.1.1.2k	LCWs/CCWs will assess and monitor	58,263 OVC assessed HRAA															HHOs, CMOs, CMCs,

	OVC and caregivers on their HIV risk, services and adherence using the screening tools to monitor risks and adherence, to improve continuity of treatment, to identify beneficiaries in need of additional HIV services and facilitate access to those services through referrals and linkages or case conferencing.	[Kyela (11,265), Mbarali (14,292) Mbeya CC (19,138) Mbozi DC (7,054) Momba DC (2,060) Tunduma (4,454)]														L/CCWs
3.1.1.2l	LCWs/CCWs will issue referrals for HIV-positive OVC and caregivers to age-appropriate clinics or PLHIV support groups so C/ALHIV receive continuous	Number of C/ALHIV linked to age-appropriate clinic														HHOs, CMOs, CMCs, L/CCWs

	psychosocial support.															
3.1.1.2m	For Adolescent and Youth Living with HIV A/YLHIV who need peer support, LCWs/CCWs with support from HHO will invite peer A/YLHIV to visit OVC households with caregiver consent, to discuss stigma, peer pressure, and coping with ART adherence.	40 peer home visit conducted [Kyela (8), Mbarali (8) Mbeya CC (13) Mbozi DC (7) Momba DC (2) Tunduma (2)]														HHO, L/CCWs
3.1.1.2n	LCWs/CCWs will link A/YLHIV to peer-led service delivery models to provide peer support and motivation, build resilience, strengthen problem-solving skills, and overcome	3,469 C/ALHIV linked to support services [Kyela (709), Mbarali (860) Mbeya CC (925) Mbozi DC (586)]														HHO, L/CCWs, LVs

	adherence challenges e.g., quality A/YLHIV support programs such as Teen Clubs.	Momba DC (169) Tunduma (220)]														
3.1.1.2o	LCWs/CCWs will provide support and follow up through household case management visits to their beneficiaries who attend CTCs to attend their clinic as scheduled and prevent defaulting from care and treatment services.	81 C/ALHIV with poor ART adherence supported [Kyela (16), Mbarali (17) Mbeya CC (26) Mbozi DC (14) Momba DC (4) Tunduma (4)]														HHOs, LCWs/CCWs
3.1.1.2p	LCWs/CCWs will provide escorted referrals to CTCs for adherence counselling for C/ALHIV with	1,056 escorted referrals issued and completed [Kyela (192),														HHOs, LCWs/CCWs

	poor ART adherence.	Mbarali (233) Mbeya CC (380) Mbozi DC (180) Momba DC (22) Tunduma (49)]														
3.1.1.2q	For families who refuse to allow their HIV-positive child to take or access ART, CMCs with support from CMO, will deploy a nurse trained in pediatric HIV counselling to the home and/or use social welfare officers if signs of neglect/abuse are identified	101 Clinical/Social welfare home visit conducted [Kyela (19), Mbarali (21) Mbeya CC (33) Mbozi DC (18) Momba DC (5) Tunduma (5)]														HHOs, CMOs, CMCC,

3.1.1.2r	LCWs/CCWs will monitor clinic attendance by reviewing CTC1 cards and use the HRAQM tool to document clinic visits during the previous three months and for those on MMD previous nine months.	8,072 C/ALHIV monitored their clinical attendance														HHOs OVCLO, LWs/CCWs
3.1.1.2s	LCWs/CCWs will work with high volume CTCs to track and escort back to care C/ALHIV reported to have Interruption in Treatment.	All CLHIV who have treatment interruption														HHOs OVCLO, LWs/CCWs
3.1.1.2t	For C/ALHIVs with high viral loads, HHO	81 C/ALHIV with high HVL														HHOs, LWs/CCWs

	will liaise with the clinic and clinical IPs to support LCWs/CCWs to attend the ‘Enhanced Adherence and Counselling Sessions’ along with the caregiver and HIV-positive child. This will enable LCWs/CCWs to provide more tailored HIV related support during monthly home visits.	supported to attend EAC sessions [Kyela (16), Mbarali (17) Mbeya CC (26) Mbozi DC (147) Momba DC (4) Tunduma (4)]															
3.1.1.2u	LCWs/CCWs will assess disclosure status of all C/ALHIV who aged 8 are+ years old and document this using the HRAQM tool.	29,270 C/ALHIV to be assessed for disclosure support															HHOs, LWs/CCWs
3.1.1.2v	For CLHIV who are aged 8+ years old and have not yet been	All C/ALHIV not disclosed their HIV status															HHOs, LWs/CCWs

	disclosed their HIV status, LCWs/CCWs will link them and their caregivers to disclosure support.	linked/referred for disclosure support															
3.1.1.2w	For CLHIV who are aged 8+ years old, have not yet been disclosed their HIV status, and have been identified to have high viral load, HHO will support LCWs/CCWs to provide escorted referrals to facility disclosure support or invite a trained nurse to conduct a clinical home visit to provide this service.	All C/ALHIV not disclosed their HIV status provided with escorted referrals for disclosure support Number of home visit conducted for disclosure															HHOs
3.1.1.2x	LCWs/CCWs will provide escorted referrals for all emergencies and critical medical care needs for C/ALHIV	1,056 escorted referrals issued and completed															HHOs, LCWs/CCWs

	and HEI															
3.1.1.2y	LCWs/CCWs will assess if all C/ALHIV attend age-appropriate clinics or PLHIV support groups and document this through the HRAQM tool and will provide referrals and link C/ALHIV and their caregivers to age-appropriate clinics or PLHIV support groups so C/ALHIV receive continuous psychosocial support.	3,469 C/ALHIV linked to age-appropriate groups services [Kyela (709), Mbarali (860) Mbeya CC (925) Mbozi DC (586) Momba DC (169) Tunduma (220)]														HHOs, OVCLO, CMOs, CMCs, LCWs/CCWs
3.1.1.2z	HHO, in collaboration with CMO, will organize MNCH workers or other locally available nutrition experts to provide in-service training for	798 CCWs/LCWs received nutritional assessment and counseling support.														HHOs, CMOs, CMCs

	CCWs/LCWs on nutrition counseling, including NACS, the use of MUAC for nutrition assessment, and referral pathways for malnourished children during CCWs monthly meetings.	[Kyela (145), Mbarali (178) Mbeya CC (250) Mbozi DC (132) Momba DC (39) Tunduma (54)]															
3.1.2a	Conduct regular supportive supervision visits to CCWs/CHWs, beneficiaries' households and wards with beneficiaries' casefiles to assess progress and provide recommendations to address identified challenges.	10 days for CMOs and 15 days for CMCs supportive supervision visit in a monthly basis															CMOs and CMCs
3.1.2b	Conduct quarterly Joint supportive supervision visits with	3 joint supportive supervision visit															ADP-Mbozi staff, Cluster staff, LGAs

	ADP-MBOZIs, LGA and cluster teams to CCWs/CHWs, beneficiaries' households and wards with beneficiaries' casefiles to assess progress and provide recommendations to address identified challenges.															
3.1.2c	Engage ADP-MBOZIs in the LGA-level budgeting process through CCSWOP to ensure their budgets are incorporated.	ADP Mbozi budget and workplan integrated into council plans.														PMs & M&E Officer
3.1.2d	Conduct regular household visits to provide direct services and monitor the implementation of the care plan by families.	10 days for CMOs and 15 days for CMCs supportive supervision visit in a monthly basis														CMO, CMCs

		29,270 OVC care plans updated															
3.1.2e1	Conduct Family and Child Asset Assessment (FCAA) to assess and identify needs and strengths of households.	Eligible households assessed and FCAA administered.															CMO, CMCs
3.1.2.e2	Conduct FCAA to assess households against the PEPFAR graduation benchmarks after the household has received services continuously for one year.	Eligible households assessed and FCAA administered. 17,942 OVC graduated															CMOs, CMCs, LCWs/CCWs
3.1.2f	Issue and track all referrals to health and social services using the established paper-based referral and linkage system in all councils.	26,913 referrals issued and completed [Kyela (5,763), Mbarali (7,574) Mbeya CC															CMOs, CMCs, LCWs/CCWs

		(9,574) Mbozi DC (2,116) Momba DC (618) Tunduma (1,336)]															
3.1.2g	HHOs will arrange with ACHIEVE's facility focal persons at a nearby facility to come and address bottlenecks and challenges of the system on the bi-directional referral and linkage system during LCWs/CCWs monthly meetings.	170 facility focal persons attended LCWs/CCWs monthly meeting															HHOs, OVCLOs, CMOs, CMCs, LCWs/CCWs
3.1.2h	HHOs will continue to collaborate with CHMTs and Care and	Monitored use of available referral															HHOs, OVCLOs, CMOs, CMCs,

	Treatment to oversee the use of referral boxes in CTCs.	boxes															LCWs/CCWs
3.1.2i	HHOs will conduct supportive supervision visits with LCWs/CCWs and health and social service providers on the bi-directional referral and linkage system, as stipulated in the SOP (including visits to randomly sampled beneficiaries).	10 days supportive supervision visits conducted															HHOs, OVCLOs, CMOs, CMCs, LCWs/CCWs
3.1.2j	Oversee the implementation of the escorted referral guide in their respective clusters to ensure HHOs support CCWs to escort beneficiaries to referred services for urgent/necessary cases (e.g., EID, C/ALHIV	1,056 escorted referrals issued and completed															HHOs, OVCLOs, CMOs, CMCs, LCWs/CCWs

	not on ART, IIT, poor adherence; sexual abuse; cases where a caregiver cannot accompany the child; and malnourished children).																
3.1.2k	LCWs/CCWs will accompany and provide transport support to beneficiaries for urgent/necessary cases, as described in the project's escorted referral guide	1,056 escorted referrals issued and completed [Kyela (192), Mbarali (233) Mbeya CC (380) Mbozi DC (180) Momba DC (22) Tunduma (49)]															HHOs, OVCLOs, CMOs, CMCs, LCWs/CCWs
3.1.2l	HHOs will arrange with ACHIEVE's facility focal persons at a nearby facility to come and address bottlenecks and challenges of the	39 high volume CTCs															HHOs, OVCLOs, CMOs, CMCs, LCWs/CCWs

	system on the bi-directional referral and linkage system during LCWs/CCWs monthly meetings.																
3.1.2m	Provide iCHF cards to subpopulation beneficiaries who will be identified after care plan development.	640 C/ALHIV and HEI families received iCHF cards from the project [Kyela (116), Mbarali (143) Mbeya CC (200) Mbozi DC (106) Momba DC (31) Tunduma (43)]															HHO, CMO,M&E
3.1.2n	Support CCW/CHWs monthly meetings as forums for in-service training, experience sharing, and problem solving.	798 CCWs received in service training during monthly meeting															CMOs, CMCs

3.1.2o	ACHIEVE will Pay Stipends to CCWs who submitted monthly reports	798 CCWs received monthly stipends.															CMOs, CMCs
3.1.2p	ACHIEVE will Pay Stipends to LCWs who submitted monthly reports	19 LCWs received monthly stipends [Kyela (3), Mbarali (4) Mbeya CC (6) Mbozi DC (4) Momba DC (1) Tunduma (1)]															CMOs, CMCs
3.1.2q	ACHIEVE will Pay Stipends to LVs who submitted monthly reports	119 LVs received monthly stipends [Kyela (22), Mbarali (26)															CMOs, CMCs, ESLO

		Mbeya CC (39) Mbozi DC (20) Momba DC (5) Tunduma (7)]															
3.1.2r	ASWOs support CCW/CHWs monthly meetings as forums for in-service training, experience sharing, and problem solving.	170 ASWOs attended monthly meetings [Kyela (36), Mbarali (21) Mbeya CC (40) Mbozi DC (38) Momba DC (17) Tunduma (18)]															CMOs, CMCs
3.1.2s	Train ADP-MBOZIs staff on CoFSW identification, enrolment, conducting FDGs to understand	8 (2 staff from each council, 1 DSWO, 1 DCDO)															CMO, HHOs, CMC

	their vulnerability and service provision. Familiarization Meeting	Tunduma MC and Mbeya CC														
3.1.2t	Identify and train community cadre from the FSW groups (CCWs/CHWs and LVs) to support OVC service delivery and formation of FSW WORTH Yetu Groups.	50 peer CCWs identified and recruited (5 from each ward _ 5 wards) [Mbeya CC (25), Tunduma (25)] -10 LVs (5 from each council)														CMO, HHOs, CMC
3.1.2u	Support business start-up kits to FSW (caregivers) to support their households economically.	36 of caregivers received														CMO
3.1.2v	Support CoFSW who are in school with education materials while children out of school will receive	59 C/ALHIV and CoFSW received vocational scholarship														CMO

	vocational scholarships.																
3.1.2w	Support CoFSWs household visits by social welfare officers to provide psychosocial support to children and caregivers to help them adjust to the realities of life.	Eligible CoFSWs households visited															CMOs, CMC
3.1.3a	Orient relevant new ACHIEVE and ADP-MBOZIs staff on child protection SOPs, job aid and tools, who will train new CCWs/CHWs to identify, track, monitor, follow up and refer those in need for further services.	17 staff (CMC, CMO and M&EO) oriented on child protection SOPs															ACHIEVE staff
3.1.3b	Identify cases of abuse, and supporting survivors to utilize relevant services,	426 abuse cases reported and followed up															CMOs, CMC,LCWs/CCWs

	including emergency post-rape care (e.g., post-exposure prophylaxis) for sexual abuse cases.	[Kyela (77), Mbarali (95) Mbeya CC (133) Mbozi DC (21) Momba DC (29) Tunduma (7)]															
3.1.3c	Continue to follow up completion of services through the GBV/VAC service register to all abused children.	426 abuse cases reported and followed up [Kyela (77), Mbarali (95) Mbeya CC (133) Mbozi DC (21) Momba DC (29) Tunduma (7)]															CMOs, CMC,LCWs/CCWs

3.1.3d	Deliver positive parenting education and COVID-19 prevention and vaccine knowledge to OVC caregivers during routine household case management visits and in WORTH Yetu groups through ACHIEVE job aids.	10,650 OVC caregivers received positive parenting messages [Kyela (1,934), Mbarali (2,348) Mbeya CC (3,335) Mbozi DC (1,764) Momba DC (515) Tunduma (724)]															CMOs. CMCs, LCWs, CCWs
3.1.3e	Review child protection referrals and register data monthly, targeting ADP-MBOZIs with low number of referrals or reported	426 abuse cases reported and followed up															CMOs. CMCs, LCWs, CCWs

	cases that have not received appropriate services.																
3.1.3f	Update the child protection service directory and encourage CCWs/CHWs to raise community awareness on the use of the National Child Helpline (116).	6 updated child protection service directories (1 from each council)															CMOs. CMCs, LCWs, CCWs
3.1.3g	Participate in council stakeholders semi-annually VAWC_PC meeting to discuss challenges, share best practices and strategies on collective and coordinated response.	2 VAWC - VAWC_PC meeting for each council															CMOs. CMCs, LCWs, CCWs
3.1.3h	Collaborate with C-SEMA to raise community awareness on the utilization of the National Child	1 meeting attended															CMOs. CMCs, LCWs, CCWs

	Help Line Free toll (116).	13,313 caregivers reached awareness messages during home visits															
3.1.3i	Participate in the commemoration of the day of African Child at the council and national level.	1 DAC event conducted															CMOs. CMCs, LCWs, CCWs
3.1.3j	Utilize CCWs/CHWs monthly meeting to continue reminding CCWs/CHWs on their role to ensure children are safeguarded and appropriate measure are taken to prevent harm to children.	798 CCWs reminded on their role to ensure children are safeguarded and appropriate measure are taken to prevent harm to children.															CMOs. CMCs, LCWs, CCWs
3.1.4a	ACHIEVE, will work together to develop criteria, and conduct analysis on eligible OVC to benefit from the education support	Guide developed and shared															ACHIEVE staff, ADP-MBOZI

	provided.																
3.1.4b	ACHIEVE will work together to guide the delivery of the comprehensive economic strengthening interventions for out of school youth aged 15 – 17.	32 staff (CMC, CMOs, ESLOs, PM and M&EO) oriented															ACHIEVE staff, ADP-MBOZI
3.1.4c	ACHIEVE will communicate with ADP-Mbozi on the list of eligible OVC to benefit from the education support provided.	Eligible OVC for educational subsidies supported															ACHIEVE staff, ADP-MBOZI
3.1.4d	ACHIEVE will closely monitor provision of the tailored education services to OVC and ensure data tracking in the system.	17,663 OVC monitored school progress and retention															ACHIEVE staff, ADP-MBOZI

3.1.4e	ACHIEVE will evaluate the outcome of education services provided to OVC in FY22 and FY23 towards mitigating HIV related vulnerabilities.	Eligible OVC provided with education support															ACHIEVE staff, ADP-MBOZI
3.1.4f	Support LCWS/CCWS to monitor school attendance and progression of school aged girls and boys (6-17 years) during case management home visits. LCWs/CCWs will discuss school attendance and performance with caregivers and OVC; any agreed upon actions will be included in children's individual care plans.	17,663 OVC (6-17 years) monitored their school attendance and progression [Kyela (3,264), Mbarali (3,855) Mbeya CC (5,680) Mbozi DC (3,109) Momba DC (755) Tunduma (100)]															CMOs, CMCs, LCWs/CCWs

3.1.4g	Support LCWS/CCWS to ensure closer monitoring to OVC re-enrolled back to school in FY22 to prevent risk of dropping out again.	453 OVC enrolled back to school [Kyela (84), Mbarali (99) Mbeya CC (145) Mbozi DC (80) Momba DC (19) Tunduma (26)]														CMOs, CMCs, LCWs/CCWs
3.1.4h	Support LCWS/CCWS to work with WEOs and/or heads of COBET centers to re-enroll out of school OVC aged 6-17 back to primary school or link with Complementary Basic Education for	28 OVC enrolled to COBET [Kyela (5), Mbarali (6) Mbeya CC (9) Mbozi DC (5)														CMOs, CMCs, LCWs/CCWs

	Tanzania (COBET).	Momba DC (1) Tunduma (2)]															
3.1.4i	Support LCWS/CCWS to work closely with LVs to link out of school OVC aged 15-17 to Worth Yetu groups to strengthen youth economic resilience through provision of financial literacy and technical business skills training, linkage to external economic opportunities and support with group-based business start-up kits.	2,262 youth linked to WORTH Yetu groups and other economic strengthening support [Kyela (418), Mbarali (494) Mbeya CC (727) Mbozi DC (398) Momba DC (97) Tunduma (128)]															CMOs, CMCs, LCWs/CCWs
3.1.4j	ACHIEVE will oversee provision of vocational training sponsorship and start-	28 provided with Vocational Scholarship [Kyela (5),															PMs, HHO, CMOs

	up kits to CoFSW and out of school C/ALHIV (age 15-17) to promote household economic resilience for sustainable ART adherence and C/ALHIV empowerment.	Mbarali (6) Mbeya CC (9) Mbozi DC (5) Momba DC (1) Tunduma (2)]														
3.1.4k	Support from ACHIEVE will oversee the delivery of comprehensive economic strengthening interventions for out of school youth aged 15 – 17.	2,262 youth linked to WORTH Yetu groups and other economic strengthening														HHO, CMOs
3.1.4l	Work with clinical partners and health facility to identify peer educators who will provide sessions to support continuity of	2 peer educators identified and engaged														HHO, CMOs

	treatment, ART adherence, HIV viral load suppression and SRH to C/ALHIV supported with vocational scholarships during the course of the three (3) months vocational courses.																
3.1.4m	ACHIEVE will oversee provision of educational subsidies (i.e., backpacks, notebooks, pens, and mathematical sets) for CoFSW and C/ALHIV age 6-14 years old	1695 OVC received educational subsidies [Kyela (327), Mbarali (354) Mbeya CC (549) Mbozi DC (301) Momba DC (76) Tunduma (89)]															HHOs, CMOs, LCWs/CCWs

3.1.4n	ACHIEVE through ADP-Mbozi will oversee provision of economic and social support including transport subsidies or school assistance based on in school C/ALHIV needs	86 OVC received economic and social support [Kyela (17), Mbarali (18) Mbeya CC (28) Mbozi DC (15) Momba DC (46) Tunduma (5)]															HHOs, CMOs, LCWs/CCWs
3.1.4o	Ensure data entry of forms tracking education services provided to different age groups.	All forms entered in the system tracking education services															HHOs, CMOs, LCWs/CCWs, M&Es, Data clerks

3.1.5.1a	ACHIEVE will use FCAA data to identify new destitute households in Provision category and link them with immediate basic consumption support and determine movement of households across livelihood pathways for households enrolled in year FY22.	Number of new destitute households.															ESLOs, CMOs, LCWs/CCWs,
3.1.5.1b	Deliver 2 days social inclusion training to new LVs in new councils who will then cascade to Worth Yetu groups to facilitate enrolment of OVC households using a social-inclusion awareness approach.	10 FSW LVs															ESLOs
3.1.5.1c	Facilitate election of community resource	Number of groups formed															ESLOs

	mobilization (CRMC) committees in new councils and engage them in mapping of resources available in communities to meet basic needs of OVC from destitute households.															
3.1.5.1d	Support from ACHIEVE will monitor activities of the CRMC, and track fund growth and utilization of resources raised through CRMC, Social and OVC funds.	3,196 CRMC [Kyela (580), Mbarali (714) Mbeya CC (1001) Mbozi DC (530) Momba DC (154) Tunduma (218)]														ESLOs
3.1.5.1e	Facilitate bi-annual meetings with LVs	119 LVs attend bi-annual														ESLO, ILVs

	and CCWs to prioritize needs and determine destitute households to be linked to Worth Yetu groups for consumption support while ensuring no duplication of service and that support reaches the neediest OVC households.	meeting with CCWs [Kyela (22), Mbarali (26) Mbeya CC (39) Mbozi DC (20) Momba DC (5) Tunduma (7)]															
3.1.5.1f	Facilitate linkage of FSW caregivers into Worth Yetu groups for consumption support (i.e., food support, transport support, etc.), in line with guidance that will ensure confidentiality and privacy for C/ALHIV and their	10 FSW LVs (5 from each council)															ESLO, LVs

	families.															
3.1.5.2a	Facilitate monthly LV/ILV stipends.	119 LVs receive monthly stipends [Kyela (22), Mbarali (26) Mbeya CC (39) Mbozi DC (20) Momba DC (5) Tunduma (7)]														ESLOs, M&EOs
3.1.5.2b	Recruitment of LVs in new geographical areas including LVs who will facilitate formation of FSW Worth Yetu groups.	10 new LVs														ESLOs, LCWs/CCWs
3.1.5.2c	Facilitate establishment of new Worth Yetu groups for	48 Worth Yetu groups formed														ESLOs, LVs

	OVC caregivers and older youth and monitor their progress.	[Mbarali (6), Mbeya CC (2) Tunduma TC (21)]															
3.1.5.2d	ADP-Mbozi will procure and distribute women in series books literacy baseline survey forms to new Worth Yetu groups (new and old councils).	432 Women in business series books printed and distributed. [Mbarali-6 groups Mbeya CC-2 groups Tunduma-21 groups]															ESLOs
3.1.5.2e	ACHIEVE will facilitate training of trainers to ADP Mbozi ESLOs (virtual) on social inclusion and CRMCs who will	3 ESLOs trained on social inclusion and CRMC															ESLOs

	cascade to LVs and Worth Yetu groups' management committee.															
3.1.5.2f	ACHIEVE will facilitate 5 days refresher Train of trainers to ADP-MBOZI (ESLOs) on Worth Yetu Methodology, Women in series curriculum financial literacy, employability curriculum and business planning training to LVs and Worth Yetu groups' management committee.	3 ESLOs														ESLOs
3.1.5.2g	Cascade the training to LVs on 5 days training on Worth Yetu Methodology, Women in series curriculum financial literacy,	119 ILVs received refresher training														ESLOs

	employability curriculum and business planning training to LVs and Worth Yetu groups' management committee (council level) who will cascade the training to WORTH Yetu group members.	[Kyela (22), Mbarali (26) Mbeya CC (39) Mbozi DC (20) Momba DC (5) Tunduma (7)]														
3.1.5.2h	Conduct literacy survey to new Worth group members to identify and train literacy champions (LVs) to support illiterate group members.	48 WORTH yetu groups formed. [Mbarali (6), Mbeya CC (21) Tunduma TC (21)]														ESLOs
3.1.5.2i	Facilitate monthly meetings and refresher trainings for LVs.	119 ILV received refresher training [Kyela (22),														ESLOs

		Mbarali (26) Mbeya CC (39) Mbozi DC (20) Momba DC (5) Tunduma (7)]															
3.1.5.2j	Collaboration with ACHIEVE will facilitate linkage of associations and individual enterprises with financial service providers to access loans to scale their enterprises.	Number of groups linked to enterprises and potential stakeholders for accessibility of loans.															ESLOs, PM, LVs/,ILVs
3.1.5.2k	ADP-Mbozi with support from ACHIEVE will conduct self-management readiness assessment to Worth Yetu groups reached 3 banking cycle	380 Worth Yetu groups will conduct self-management readiness assessment.															ESLOs, PM

	(18month of operation) to determine their graduation status.	[Kyela (78), Mbarali (29) Mbeya CC (102) Mbozi DC (142) Momba DC (25) Tunduma 4)]														
3.1.5.3a	ADP-Mbozi with support from ACHIEVE will conduct training need assessment to identify OVC caregivers determine the existing technical skills gap and engage trainers to deliver specialized need-based business skills training preferred engaging SIDO to deliver Industrial technical skill package to	474 Worth Yetu groups. [Kyela (86), Mbarali (106) Mbeya CC (155) Mbozi DC (79) Momba DC (19) Tunduma (29)]														ESLOs

	Caregivers and older OVC.															
3.1.5.3b	ADP-Mbozi with support from ACHIEVE will work closely with ADP-Mbozi to facilitate registration of Worth Yetu groups into Local Government Authorities.	<p>6 DCDOs provide guidance on registration requirements as well as other existing opportunities.</p> <p>[Kyela (1), Mbarali (1) Mbeya CC (1) Mbozi DC (1) Momba DC (1) Tunduma (1)]</p>														ESLOs
3.1.5.3c	ACHIEVE on behalf of ADP-Mbozi will facilitate procurement and distribution of	36 business start-up kits for CLHIV caregivers.														ESLOs, PM

	business start-up kits to caregivers of CLHIV their sibling and/or Children of elderly PLHIV who are in the household economic status categories of <i>provision</i> and have never received start-up kits from the project.	[Kyela (7), Mbarali (8) Mbeya CC (11) Mbozi DC (6) Momba DC (2) Tunduma (2)]														
3.1.5.3d	ADP-MBOZI with support from ACHIEVE will facilitate agribusiness business plan competition to OVC caregivers and older youth in agriculture value chain preferred food production or processing and provide awards to improve household nutrition and food	4 Winners OVC caregivers will receive awards to improve household nutrition and food security [Mbarali (2) Mbozi DC (2)]														ESLOs, PM

	security (9 councils).																
3.1.5.3e	Identify and publicize entrepreneurs of the quarter and facilitate their participation in networking and business exhibition events.	10 entrepreneurs of the quarter will be selected [Kyela (2), Mbarali (2) Mbeya CC (3) Mbozi DC (2) Momba DC (1) Tunduma (1)]															ESLOs
3.1.5.4a	ACHIEVE will develop criteria for selection of youth 15-17 years and facilitate their linkage to youth Worth Yetu groups.	2,262 Youth will be identified and linked to Worth Yetu groups. [Kyela (418), Mbarali (494) Mbeya CC (727) Mbozi DC (398)															ESLOs,

		Momba DC (97) Tunduma (128)]															
3.1.5.4b	ADP-MBOZI with support from ACHIEVE will identify existing technical skills gap and link with local, national, or international technical institutions or trainers to deliver specialized need based technical skills training for youth 15-17years and provide them with business start-up kits to start business. (Youth groups not in VETA)	59 youth will be supported with vocational trainings. [Kyela (11), Mbarali (12) Mbeya CC (19) Mbozi DC (10) Momba DC (3) Tunduma (3)]															ESLOs, PM
3.1.5.4c	Facilitate apprenticeship placements and provide monthly visits to youth in both wage and self-employment	59 youth will be supported with vocational trainings															ESLOs, HHO

	to determine their needs and facilitate linkage to services.	[Kyela (11), Mbarali (12) Mbeya CC (19) Mbozi DC (10) Momba DC (3) Tunduma (3)]														
3.1.5.4d	Pay technical service fee for identified economic strengthening service providers to enhance linkage of youth graduates from vocational scholarship program into internship	59 youth will be linked to internship. [Kyela (11), Mbarali (12) Mbeya CC (19) Mbozi DC (10) Momba DC (3) Tunduma (3)]														ESLOs, HHOs

3.1.5.4e	Pay for youth's membership to local or international professional social and business networks where applicable and monitor their progress,	59 youth will be linked to business networks. [Kyela (11), Mbarali (12) Mbeya CC (19) Mbozi DC (10) Momba DC (3) Tunduma (3)]														ESLOs
3.1.5.4f	Facilitate establishment of WORTH Yetu savings and lending groups for youth aged 15-17 with income flow and monitor their progress and train them on Worth Yetu	12 Youth Worth Yetu groups will be established [Kyela (2), Mbarali (2)														ESLOs

	Methodology, financial literacy, and employability curriculum.	Mbeya CC (2) Mbozi DC (2) Momba DC (2) Tunduma (2)]														
3.1.5.4g	ADP-MBOZI with support from ACHIEVE will conduct 5 days training youth graduates from vocational scholarship program during bi-weekly meeting on business management and employability skills using Fursa Zangu, Selling made simple and money management curriculums.	6 Youth supported with Vocation will be trained on Fursa Zangu, Selling made simple and money management curriculums. [Kyela (1), Mbarali (1) Mbeya CC (1) Mbozi DC (1) Momba DC (1)														ESLOs, HHOs

		Tunduma (12)]															
3.1.5.4h	ADP-MBOZIs will establish and strengthening WORTH Yetu groups for youth aged 15-17 graduated from vocational scholarship programs to enable them access financial support and skills to start their new business.	18 Youth Worth Yetu groups will be established and strengthened. [Kyela (3), Mbarali (3) Mbeya CC (3) Mbozi DC (3) Momba DC (3) Tunduma (3)]															ESLOs
3.1.5.4i	ADP-Mbozi will facilitate engagement with the public/ private sector especially those with Corporate social responsibility that aligns with our	Number of public/ private sector engaged in															ESLOs, PM

	Economic Strengthen (ES) outcomes (Financial Institutions such as National Microfinance Bank (NMB), KCB, TIGO etc.															
3.2.1a	ACHIEVE will build on the FY22 implementation feedback provided by FWV, Master Trainers, TOTs and coaches and work closely with Future without Violence in FY23 to (1) Evaluate the CBIM approach implemented in FY22 to identify lesson learned, best practices and inform best approach that will continue to ensure program fidelity (2) Provide technical support to certified	CBIM key lesson learned, and best practices documented														Youth Intervention Officers (YIO)

	TOT during CBIM coaches trainings and (3) Oversee CBIM sessions delivery across the 10 councils to ensure the program is implemented with high fidelity.																
3.2.1b	ACHIEVE will provide regular mentorship, supportive supervision, ensure close monitoring of services and data entry.	Monthly and quarterly supportive supervision visits conducted															Youth Intervention officers
3.2.1c	ACHIEVE will conduct analysis of pre/post questionnaires to assess program outcome to adolescent boys towards improving bystander behaviors and address GBV/VAC risks.	31,446 athletes/boys administered pre and post season questionnaires (<i>Kyela 7,944, Mbarali 10,727, Mbeya CC 12,775</i>)															Youth Intervention Officer, CBIM coaches
3.2.1d:	ADP-Mbozi will conduct meetings with	3 feedback /introductory															Project Manager, Youth Interventions

	<p>LGA officials at the council level to discuss CBIM intervention progress and use the agreed criteria to select the schools to implement CBIM intervention in FY23. Also, work with school management of selected schools to select CBIM coaches based on set criteria.</p>	<p>meeting conducted (<i>1 per council</i>)</p> <p>45 CHMT/LGAs attended feedback/introductory meeting. (<i>15 per council</i>)</p> <p>210 primary schools selected to implement CBIM interventions</p>														Officers and M&EO
3.2.1e:	<p>ACHIEVE on behalf of ADP-Mbozi will procure CBIM sports materials for new schools to be used by CBIM coaches and athletes during</p>	<p>Procured sports materials distributed to schools</p>														Youth Intervention officer

	sessions delivery.															
3.2.1f:	ADP-Mbozi will print M&E tools to be used during enrolment and sessions delivery and box files to be used for storing CBIM enrollment forms (Budgeted 3.2.1h and j)	<p>Enrolment tools for 31,446 athletes/boys printed.</p> <p>1,260 service delivery forms printed (attendance registers and verification forms)</p> <p>1,050 box files procured</p>														Project Manager, Youth Intervention Officer and Project accountant
3.2.1g:	ADP-Mbozi will conduct one day orientation meeting to CBIM coaches on CBIM enrollment exercise, referral system and forms	210 CBIM coaches oriented on enrolment exercise, bidirectional referral and filling.														Youth Interventions Officer

	filling.																
3.2.1.h:	ADP-Mbozi will work with the selected CBIM coaches to conduct enrolment of adolescent boys aged 10-14. Enrolment will ensure inclusion of adolescent boys with special needs such as physically disabled, deaf are few to mention and teachers with such knowledge and skills to support them.	31,446 athletes aged 10-14 enrolled in CBIM intervention															Youth Intervention officers
3.2.1i:	ADP-Mbozi will use the available CBIM TOTs to conduct three days CBIM training to new CBIM coaches from newly selected schools.	60 new CBIM coaches trained on CBIM curriculum 60 CBIM cards series and 120															Youth Intervention Officers

		COVID-19 posters procured and distributed to new CBIM schools															
3.2.1j:	ADP-Mbozi will conduct one day CBIM orientation meeting with previously trained CBIM coaches from existing schools to discuss CBIM implementation plan, lesson learned and areas of improvements.	150 CBIM coaches attended feedback meeting. 1,260 service delivery forms printed (attendance registers and verification forms) 1,050 box files procured															M&EO, YIO
3.2.1k	ADP-Mbozi will facilitate and support trained CBIM coaches to run CBIM sessions	210 delivered CBIM sessions and COVID-19 awareness															Youth Interventions Officers

	and COVID 19 posters for adolescent boys aged 10-14.	messages to adolescent boys. 31,466 adolescents boys attended and completed CBIM sessions														
3.2.1l	ADP-Mbozi with support from CBIM TOTs will monitor CBIM coaches during sessions delivery to ensure quality delivery.	60 new CBIM coaches were monitored by CCF 150 old CBIM coaches received mentoring and coaching during supportive supervision by CCF/TOTs														Youth Interventions Officers, CCF/CBIM TOTs
3.2.1m	ADP-Mbozi with support from CBIM	210 CBIM coaches attended														Youth Intervention Officers, M&EO and

	TOTs will conduct CBIM quarterly meetings with coaches to discuss CBIM implementation progress, challenges, and best practices.	CBIM quarterly meetings															Project Manager
3.2.1n:	ADP-Mbozi will monitor and compile M&E data, including best practices and lessons learned.	2 success stories documented on quarterly basis, 3 lesson learned and best practices were documented.															Youth Intervention Officers, M&EO and Project Manager
3.3.1a:	ACHIEVE will design an electronic system that will automate enrolment and service delivery for DREAMS.	Designed automated system enrolment and service delivery.															Youth Intervention Officer/Assistant Youth Interventions Officer, M&EO
3.3.1b:	ACHIEVE will conduct virtual orientation to ADP-	13 staff (AYIO, YIO and M&EO attended virtual															ACHIEVE Cluster/Dar team

	Mbozi on electronic system and tools to be used during DREAMS enrolment and service delivery, quality checks and data entry process.	orientation meeting on electronic system														
3.3.1c:	ACHIEVE will provide final list of enrolled DREAMS AGYW age 10-14 years for service delivery and list of DREAMS AGYW identified as vulnerable to follow up on referrals services including those to be enrolled into OVC comprehensive program for further case management services.	15,680 AGYW enrolled into DREAMS intervention Eligible AGYW linked and enrolled into OVC comprehensive for case management services (direct and referrals services)														YIO & M&E CMO & CMC and HHOs
3.3.1d:	Conduct a one-day	1 introductory meeting conducted														Youth Intervention

	strategic meeting at LGA level to identify schools with high HIV vulnerabilities (e.g., schools with higher reported rates of dropouts, truancy, pregnancies, and cases of abuse.) and share the list of selected schools. This budget is for two councils i.e., Tunduma TC and Bukoba MC	20 primary schools selected to implement DREAMS															Officers, Project Manager
3.3.1e:	Conduct one- day orientation meeting to ADP-Mbozi data clerks on electronic system and tools to be used during DREAMS enrolment and service delivery, quality checks and data entry process. This meeting will be at council level.	48 oriented on electronic system of DREAMS and service delivery [Kyela (14), Mbarali (16), Mbeya CC (13) Tunduma (5)]															YIO, M&E

3.3.1f:	Print M&E tools to be used during DREAMS enrolment and box files to be used for storing DREAMS enrollment and service delivery forms	Enrolment tools for 15,680 AGYW printed and distributed. 806 box files procured [Kyela (178), Mbarali (239), Mbeya CC (290) Tunduma (100)]															Project Manager, Project accountant and YIO
3.3.1g:	Conduct two-days orientation meeting with Head teachers, selected primary school teachers to discuss DREAMS vulnerability criteria, DREAMS enrollment exercise, screening process, referral system and electronic system and tools to be used. This orientation will emphasize that	483 school headteachers and HURU teachers attended orientation meeting [Kyela (105), Mbarali (144) Mbeya CC (174), Tunduma MC 60)]															YIO, M&EO, project Manager

	most vulnerable AGYW are prioritized for DREAMS support based on criteria set.															
3.3.1h:	Support oriented schoolteachers to conduct DREAMS enrollment exercise to enroll 15,680 DREAMS AGYW age 10-14 in schools. Enrolment will ensure inclusion of adolescent girls with special needs such as deaf and teachers with such knowledge and skills to support them.	Enrolment vulnerability assessment tools printed and distributed to all DREAMS schools. 15,680 (100%) of FY23 target enrolled														YIO, M&E
3.3.1i:	Oversee data clerks to monitor collection of all DREAMS enrollment and service delivery forms and ensure data entry of the forms into the project database.	48 data clerks monitored DREAMS enrolment exercise and sessions [Kyela (14), Mbarali (16), Mbeya CC														YIO, M&E

		(13) Tunduma (5)]															
3.3.2a:	ACHIEVE will analyze DREAMS enrolment data and provide list of eligible AGYW aged 10-14 to receive Huru ASRH and Primary Prevention of Sexual Violence and HIV and re-usable sanitary kits.	15,680 AGYW enrolled [Kyela (3,531), Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]															YIO, M&EO, AYIO
3.3.2b:	Conduct regularly monitor of sessions delivery and tracking of data entry to ensure service completed to targeted AGYW.	322 HURU teachers monitored during sessions delivery															AYIO, YIO,M&E
3.3.2c:	ACHIEVE will conduct analysis of HURU pre/post questionnaires to evaluate outcome of	15,680 AGYW administered pre and post test questionnaires [Kyela (3,531),															YIO,M&E

	HURU program and draw from best practices and lesson learned of the program.	Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]														
3.3.2d:	Procure Huru ASRH and Primary Prevention of Sexual Violence and HIV training materials and COVID 19 posters for new primary school teachers, and pre/post-tests to be administered to DREAMS beneficiaries and SRH booklets for DREAMS beneficiaries.	80 HURU ASRH manuals, 80 HURU lesson books and 80 HIV Prevention curriculum printed [Kyela (18), Mbarali (14) Mbeya CC (8) Tunduma (40)] 160 COVID-19 posters printed (for 40 new schools, 2 per school														YIO,M&EO, Project accountant, Project Manager

		31,360 pre and post test questionnaires for AGYW printed and distributed.														
3.3.2e:	ACHIEVE on behalf of ADP-Mbozi will procure reusable sanitary kits for 15,680 DREAMS beneficiaries from 4 DREAMS councils.	15,680 reusable sanitary kits procured and distributed [Kyela (3,531), Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]														ACHIEVE Dar office
3.3.2f:	Print Huru ASRH and Primary Prevention of Sexual Violence and HIV Attendance and	483 HURU ASRH and PP attendance sessions and														YIO,M&EO, Project accountant

	Verification books which will have pre-populated list of enrolled DREAMS adolescent girls (Budgeted 3.3.2g)	verification forms printed [Kyela (105), Mbarali DC (144), Mbeya CC (174), Tunduma (60)]														
3.3.2g:	Conduct two days orientation on Huru ASRH and Primary Prevention of Sexual Violence and HIV curriculum to previously trained schoolteachers from existing schools.	242 DREAMS teachers attended HURU and PP curriculum orientation meeting [Kyela (52), Mbarali (82) Mbeya CC (108)]														HURU ASRH and PP curriculum TOTs (AYIO and YIO)
3.3.2h:	Conduct a six-day training on Huru ASRH and Primary Prevention of Sexual Violence and HIV curriculum to newly selected primary schoolteachers in new schools.	80 DREAMS teachers trained on HURU ASRH and PP curriculum [Kyela (18), Mbarali (14)														HURU ASRH and PP curriculum TOTs (AYIO and YIO)

		Mbeya CC (8) Tunduma (40)]														
3.3.2i:	Support teachers to administer HURU pre-test and deliver Huru ASRH and Primary Prevention of Sexual Violence and HIV sessions and COVID 19 posters to 83,274 DREAMS girls aged 10-14.	15,680 HURU ASRH pre test questionnaires administered by AGYW. 15,680 AGYW attended and completed 11 HURU ASRH and PP sessions														YIO,M&EO, AYIO
3.3.2j:	Upon completion of the sessions, ADP-MBOZIs', with the support of teachers, will distribute reusable menstrual hygiene kits to all DREAMS girls who completed the	15,680 AGYW received menstrual hygiene kits sessions [Kyela (3,531),														YIO,M&E, LCWs/CCWs

	curricula. These kits will be distributed at the schools and at the same time as when the education subsidies are being distributed.	Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]													
3.3.2k:	ADP-Mbozi will support teachers to administer Huru and Primary Prevention of Sexual Violence and HIV post-tests three months after the completion of the Huru sessions and receiving menstrual hygiene kits, share success stories and analyze the pre- and post-tests to measure the outcomes of the interventions.	15,680 HURU ASRH post test questionnaires administered by AGYW. 322 HURU teachers supported AGYW to administer post test questionnaires [Kyela (70), Mbarali (96), Mbeya CC (116),													YIO,M&E

		Tunduma (40)]														
3.3.3a:	Procure financial literacy curriculum package for new schoolteachers who will be trained on the curricula and pre/post-tests to be administered to DREAMS beneficiaries.	31,360 pre and post test questionnaires for AGYW printed and distributed. 160 financial literacy curriculums and manuals [Manuals 80, Curriculums 80]														YIO,M&EO, Project accountant, Project Manager
3.3.3b:	ACHIEVE will conduct regularly monitoring of sessions delivery and tracking of data entry to ensure service completed to targeted AGYW.	322 HURU teachers monitored during sessions delivery 15 days supportive supervisions allocated for AYIO and 10 days supportive														AYIO, YIO,M&E

		supervision allocated for YIO														
3.3.3c:	Conduct analysis of financial literacy pre/post questionnaires to evaluate outcome of Financial Literacy program and draw from best practices and lesson learned of the program.	15,680 AGYW administered pre and post test questionnaires [Kyela (3,531), Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]														YIO,M&E
3.3.3d:	Print Financial Literacy Attendance and Verification books which will have pre-populated list of enrolled DREAMS adolescent girls (Budgeted 3.3.3e)	161 distribution books printed [Kyela (35), Mbarali DC (48), Mbeya CC (58), Tunduma (20)]														YIO,M&EO, Project manager
3.3.3e:	Use available Financial Literacy	80 DREAMS teachers attended	Training report													Financial literacy TOTs

	TOT to conduct three days training to new schoolteachers/facilitators from new schools.	and completed financial literacy training [Kyela (18), Mbarali (14) Mbeya CC (8) Tunduma (40)]														(AYIO and YIO)
3.3.3f:	Conduct one day financial literacy orientation to previously trained schoolteachers from existing schools to discuss financial literacy implementation plan, lesson learned and areas of improvements.	242 DREAMS teachers attended financial literacy feedback meeting/orientation [Kyela (52), Mbarali (82) Mbeya CC (108)]	Training report													YIO,M&E
3.3.3g:	Support teachers to deliver financial literacy session to 15,680 DREAMS adolescent girls aged	322 HURU teachers monitored during financial literacy sessions delivery.	Field report													YIO,M&E

	10-14.	15,680 AGYW completed sessions [Kyela (3,531), Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]														
3.3.3h:	Monitor and compile M&E data, including sharing success stories, best practices and lessons learned.	4 AGYW success stories documented 3 key DREAMS lesson learned and best practices documented	Field report													YIO,M&E, AYIO, Project Manager
3.3.4a:	ADP-Mbozi will procure the education subsidies (comprised	15,680 AGYW receive education kits comprised of	Procurement report													Finance Manager, Procurement Unit, Executive Director,

	of 10 exercise books, 5 Pens, 5 pencil and 1 Mathematical set and a small bag) for 15,680 DREAMS beneficiaries from 4 DREAMS councils.	10 exercise books, 5 Pens, 5 pencil and 1 Mathematical set and a small bag (Mbeya CC- 5,803 AGYW, Kyela DC- 3,531 AGYW, Mbarali DC- 4,786 AGYW and Tunduma TC- 1,560 AGYW).															M&EO, Project Manager, Youth Intervention Officers
3.3.4b	ACHIEVE will analyze AGYW that have completed Huru and Primary Prevention of Sexual Violence and HIV sessions and provide pre-populated list of eligible AGYW to receive education subsidies kits and menstrual hygiene	15,680 AGYW completed HURU and PP sessions [Kyela (3,531), Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]															YIO,M&EO, Project manager

	kits.	161 distribution books printed [Kyela (35), Mbarali DC (48), Mbeya CC (58), Tunduma (20)]														
3.3.4c	ACHIEVE will conduct close monitoring of education subsidies distribution and tracking of data entry to ensure service completed to targeted AGYW.	15,680 AGYW received complete package of DREAMS items. [Kyela (3,531), Mbarali (4,786) Mbeya CC (5,803) Tunduma (1,560)]														YIO,M&E, LCWs/CCWs
3.3.4d:	ADP-Mbozi will ensure availability of proper storage facilities for all DREAMS procured items (Budgeted	3 warehouses identified and engaged to store DREAMS consignments														PM, YIO, M&E, project accountant

	3.3.2j)	[Kyela (1), Mbarali DC (1), Mbeya CC (1), Tunduma (1)]														
3.3.4e:	ADP-Mbozi will receive from ACHIEVE staff an artwork and specifications for printing the Education subsidies and Sanitary kits distribution books which will have pre-populated list of enrolled DREAMS adolescent girls eligible to receive education subsidies and menstrual hygiene kits	161 educational subsidies and sanitary kits distribution books printed [Kyela (35), Mbarali DC (48), Mbeya CC (58), Tunduma (20)]														YIO,M&EO
4.0	ACHIEVE to conduct M&E cascade training to 1 M&E and 1 Program staff (1 M&E and 1 CMO/HHO) at ADP-Mbozi for 5 days. M&E cascade	12 program staff trained on system, data management & reporting)														M&EOs CMOs/HHOs

	training will be done at zonal level.	[Kyela (2), Mbozi DC (2) and Tunduma (2) covering all 6 councils														
4.1	ACHIEVE in collaboration with ADP-Mbozi staff (ESLO and M&E) to conduct LVs refresher training on VSLG app and Job Aid to LVs for 2 days. LV refresher training will be conducted at council level.	119 LVs trained on VSLG app and Job Aid. [Kyela (22), Mbarali DC (26), Mbeya CC, (39), Mbozi DC (20), Momba DC (5) Tunduma (7)]														PM, M&EOs and ESLOs
4.2	Conduct 2 days semi-annual data summit meeting, data management, dissemination and use, conference.	ADP MBOZI staff, 4 CSO representatives from CEELs, PASADA, ZAMWASO and TCSO, 3 RHMT														PM, M&EOs

		members from each region (Songwe and Mbeya). 2 representatives from LGs: DMOs and DSWOs. 2 Clinical Implementing Partners.														
4.3	Conduct 2 days quarterly data review meeting at council level. Involving clinical partners, representatives from LGAs, clinical implementing partners, and focal person representatives from high volume CTC facilities and ADP-Mbozi staff.	24 LGAs staff (4 from each council) 2 ADP Mbozi staff. 2 Clinical partners from each council 1 facility focal person														M&EOs, CMOs/HHOs/OVCLOS
4.4	ADP-MBOZIM&E officer to print beneficiary list, SOP,	Number of M&E tools printed and distributed to														M&EOs

	quarterly reports and QR code	volunteers for reporting														
4.5	ADP-MBOZIM&E officer to print Worth Yetu monthly forms. ESLO to print Worth Yetu monthly forms and distribute to LVs on monthly basis.	Number of Worth Yetu monthly reporting tools printed and distributed to LVs for reporting.														M&EOs, ESLOs
4.6	ADP-MBOZIM&E officer to procure case files for the newly enrolled beneficiaries.	6,883 case files procured. [Kyela (124), Mbarali DC (153), Mbeya CC, (223), Mbozi DC (114), Momba DC (27) Tunduma (42)]														M&EOs, Finance, PM, Procurement team
4.7	ADP-MBOZIM&E officer to procure internet subscriptions for data clerks on	40 tablets internet bundle recharged for data entry.														MM&E O, finance officer

	monthly basis. Internet Bundle to be procured for reporting forms submitted in DHIS2/ Commcare system.	[Kyela (4), Mbarali DC (6), Mbeya CC, (7), Mbozi DC (16), Momba DC (4) Tunduma (3)]														
4.8	ACHIEVE in collaboration with ADP-MBOZIM&E staff to conduct USSD training to CCWs in 15 new councils	40 data clerks engaged in data entry [Kyela (4), Mbarali DC (6), Mbeya CC, (7), Mbozi DC (16), Momba DC (4) Tunduma (3)]														M&E officer
4.9	ACHIEVE to conduct 2 days data quality assessment (DQA) at council level. Data quality assessment will be implemented once per quarter in	4 RDQAs conducted in each council Mbarali DC, Kyela DC, Mbeya CC and Mbozi DC. 2 RDQAs														M&EOs, HHO/CMO, PM

	councils with high target and once per semi-annual basis in councils with low target.	conducted Momba DC and Tunduma TC.														
5.0	M&E Officer to conduct routine M&E supportive supervision on monthly basis.	10 days for M&EOs, CMOs and 15 days for CMCs														M&EOs, CMOs, CMCs, HHOs
5.1	M&E Officer to conduct 2 days Joint Supportive Supervision with DSWO on quarterly basis.	2 days joint supportive supervisions conducted per quarter.														M&EOs, CMOs, CMCs, HHOs

3.5.1. COMPREHENSIVE HIV AND AIDS PREVENTION, CARE AND TREATMENT PROJECT- CHUNYA DISTRICT

S/N	ACTIVITY	ACTIVITY TARGET	MEANS OF VERIFICATION	TIME FRAME												Responsible
				J	F	M	A	M	J	J	A	S	O	N	D	
1	Conduct monthly comprehensive technical assistance and mentorship to Peer educators on quality service delivery, Documentation, and data verification in targeted Hotspot sites and GBV facility sites of Chunya DC	To reach 20 peer educators every month	-Reports of conducted TA													Prevention Focal person
2	Conduct community dialogue on Monthly basis with community leaders and influential people and religious leaders at ward level to raise awareness on harmful gender norms and GBV/VAC (using SASA Model)	Discuss with 18 members each month	-Minutes of conducted dialogues -List of participants													Prevention focal person, Program coordinator

3	Conduct physical /phone tracing of MISSAPs and Interruption in treatment (IIT) clients to improve retention of clients in ART and attain Viral suppression in Chunya DC	Trace back 1247 client with Interruption in treatment	-list of IIT and MISSAP clients generated from facilities -Reported number of clients traced back to care														CBHS Focal person and Community services providers
4	Conduct monthly comprehensive technical assistance to CBHS Providers on quality service delivery to PLHIV clients, Documentation of Data sources and data verification in targeted tier 1 to 4 and tier sites of Chunya DC	Reach 20 CBHS-P with technical assistance	- Reports of TA conducted -Number of CBHSP reached														CBHS Focal person
5	Conduct Quarterly meetings with CBHSPs sharing program progress, challenges and develop action plan towards performance improvement	Hold four meetings with 20 CBHS-Providers	-Meeting's Minutes			x			x			x			x		Community services providers and program staff

6	Provide mobile HIV testing, index testing and provision of HIVST services to KVP in identified hotspot in Chunya DC	443 individuals reached with HIV testing services and receive results	-Reported numbers of individuals received HIV testing services and received results	x	x	x	x	x	x	x	x	x	x	x	x	Community counsellors
7	Conduct testing to SNS, FSW and their sexual clients, AGYW and their sexual partners, bodaboda riders and small-scale miners at identified hotspots areas (in order to reach Men)	1003 FSW and 1876 AGYW with their sexual partners receive testing services	-Reported number of individuals reached with testing services through SNS (Social Networking Strategy)													Community counsellors
8	Conduct moonlight HIV Testing and Counseling to KVP at identified hotspots areas	Moonlight conducted in hotspot areas	Reported number of individuals reached through moonlight testing													Community counsellors
9	Provide Technical assistance to peer health educators on combination prevention Intervention During secessions provided to AGYW, Female sex workers, small scale	20 peer educators receive technical assistance	- Reports of TA conducted													Prevention focal person

	miners, bodaboda riders and discordant couples in identified hotspots and around high-volume sites in Chunya DC																
10	Conduct Quarterly meeting with Peer Educators to discuss program progress, share success, challenges and develop action plan for program improvement	Hold four meetings with 20 peer educators	-Minutes of meetings														Community services providers and program staff
11	Conduct Quarterly meetings with council health management team (CHMTs) in Chunya DC to discussion program ownership, challenges and develop action plan towards improvement	Four meeting conducted with CHMT and LGA	-Minutes of meetings														Program coordinator and program staff

3.5.2. GOVERNANCE AND MANAGEMENT CAPACITY OF ADP MBOZI STRENGTHENED IN ORDER TO OPERATE EFFICIENTLY AND EFFECTIVELY.

NO	Description	Target	J	F	M	A	M	J	J	A	S	O	N	D	Responsible
1: Resource Mobilization Strengthened															
1.1 Internal resource mobilization enhanced.															
1.1.1	Register ADP-Mbozi investment to BRELA	One													M&E
1.1.2	Harvest and sell timber trees	Iyula FSC													Accountant
1.1.3	Plant fruits and wooden trees around farm service	100 seedlings													
1.1.4	Review procedures and modalities of hiring ADP-Mbozi (Human and Physical) assets and present to the Board for Approval	2 assets													Accountant
1.1.5	Conduct study visit to other NGO's that have experience of charging services they provide.	2 staff to visit at least one organization.													ED

1.2: External resource Mobilization strengthened.														
1.2.1	Attend virtual and physical donor's conference.	4 meetings one in each quarter												ED
1.2.2	Write concept /project proposals.	6 concept/proposals												Resource Mobilization Focal Person
1.2.3	Invite potential supporters to visit the Organization.	2 potential supporters												ED
1.2.4	Communicate with donors at least once every month.	12 months												ED
2. Human capacities of the organization improved (members, board, staff and management).														
2.1	Conduct training need assessment on an annual basis as basis for staff training.	4 Departments												Administrator/Heads of department
2.2	Conduct in house training on subject of common interest including resource mobilization skills to staff.	40 staff												Resource Mobilization Focal
2.3	Organize staff meetings. -Organize virtual meetings.	2 virtual meetings												ED

2.4	Support staff to update their profiles	80 staff															Administrator
2.5	Conduct annual staff appraisal and develop annual staff capacity plans.	81 staff and 1 compiled action plan.															Administrator
2.6	Recruit new board members	2 members															Board chairperson
2.7	Train board members on governance and leadership	5 members															ED
2.8	Conduct board meetings.	2 meetings															ED
2.9	Conduct board field visits.	One visit															ED
2.10	Conduct management meetings.	12 meetings.															ED
2.11	Conduct AGM.	1 meeting.															ED
3.0 Improve structure, policies, system and procedures as well as set quality standards of ADP-Mbozi services provision.																	
3.1	Facilitate staff to prepare project management	One document.															Focal person for

	manual																	Organization Capacity growth
3.2	update and prepare relevant policies that are missing	3 policies																Focal person for Organization Capacity growth
3.3	In house orientation on policies, procedure and Contracts/ agreements to staff.	60 staff oriented																Focal person for Organization Capacity growth
3.4	Conduct end of year evaluation	One workshop																ED
3.5	Prepare annual plans	One document																M&E
3.6	Compile annual report of the organization	One document																ED
4.0: Promote networking and collaboration.																		
4.1	Make inventory of development partners in the Southern Highlands.	One document																ED

4.2	Join and maintain good relationship with relevant networks	One network													ED
4.3	Make regular communications with current donors	Each month													ED
4.4	Invite potential supporters to visit ADP Mbozi.														ED
5.0: Strengthen Publicity of ADP-Mbozi and its Products.															
5.1	Prepare and distribute publicity material such as brochures, business cards, SP& 2 wheel covers.	200 brochures,50 Strategic Plan,100 business cards,20 wheel covers													ED
5.2	Update and link website of the organization	4 times													IT focal
5.3	Conduct quarterly, half and annual back up of organization's documents	4 times													IT focal
5.4	Conduct in house training on products identification, Pack and dissemination of ADP-Mbozi products	12 staff													M&E

PART FOUR: PROPOSED BUDGET.

	ANNUAL BUDGET 2023		
	<i>Budgetary Items</i>	<i>Budget 2023</i>	<i>Total</i>
	Personnel and Administration cost		
	Full time staff	1,048,082,968.12	
	Part time staff	228,790,906.08	
	Administration cost	187,683,239.51	
	Equipment	15,269,500.00	
	Sub-Total	1,479,826,613.71	1,479,826,613.71
1	SUSTANABLE FOOD SECURITY AND NUTRITION STATUS IN COMMUNITY IMPROVED		
1.1	Integrated food security, nutrition at household level in Songwe District Council		
	Project activities		
	Activity cost	141,797,485.00	
	Sub-Total	141,797,485.00	141,797,485.00
1.2	KIBOWAVI		
	Project activities		
	Activity cost	89,810,345.75	
	Sub-Total	89,810,345.75	89,810,345.75
2	ENTREPRENEUSHIP AND MARKERT ACCECIBILITY IMPROVED		
	Project activities		
	Activity cost		

	<i>Sub-Total</i>		
3	ENHANCED COMMUNITY EMPOWERMENT IN DEALING WITH CHILDREN, GENDER HIV/AIDS AND GOOD GOVERNANCE		
3.1	ACHIEVE Project - Mboz DC		
	Project activities		
	Activity cost	325,729,487.42	
	Sub-Total	325,729,487.42	325,729,487.42
3.2	ACHIEVE Project - Momba DC		
	Project activities		
	Activity cost	91,412,799.02	
	Sub-Total	91,412,799.02	91,412,799.02
3.3	ACHIEVE Project - Tunduma TC		
	Project activities		
	Activity cost	133,177,615.00	
	Sub-Total	133,177,615.00	133,177,615.00
3.3	ACHIEVE Project - Tunduma TC-DREAM		
	Project activities		
	Activity cost	113,965,756.00	
	Sub-Total	113,965,756.00	113,965,756.00
3.4	ACHIEVE Project - Mbeya CC		
	Project activities		
	Activity cost	506,319,438.00	
	Sub-Total	506,319,438.00	506,319,438.00
3.5	ACHIEVE Project - Mbeya CC DREAM		

	Project activities		
	Activity cost	473,910,871.00	
	Sub-Total	473,910,871.00	473,910,871.00
3.6	ACHIEVE Project -Kyela		
	Project activities		
	Activity cost	306,588,076.00	
	Sub-Total	306,588,076.00	306,588,076.00
3.7	ACHIEVE Project -Kyela DREAMS		
	Project activities		
	Activity cost	305,798,093.00	
	Sub-Total	305,798,093.00	305,798,093.00
3.8	ACHIEVE Project -Mbarali		
	Project activities		
	Activity cost	362,813,735.00	
	Sub-Total	362,813,735.00	362,813,735.00
3.9	ACHIEVE Project -Mbarali DREAMS		
	Project activities		
	Activity cost	400,416,672.00	
	Sub-Total	400,416,672.00	400,416,672.00
3.10	Comprehensive HIV prevention -Chunya DC		
	Project activities		
	Activity cost	94,421,257.08	
	Sub-Total	94,421,257.08	94,421,257.08
3.11	Afya yangu		
	Project activities		
	Activity cost		
	Sub-Total	-	-
	GRAND TOTAL	4,807,628,858.98	4,807,628,858.98

