JOINT-ASSESSMENT BY THE NATIONAL MULTI-STAKEHOLDER PLATFORM, IN LINE WITH THE SUN MONITORING, EVALUATION, ACCOUNTABILITY AND LEARNING (MEAL) SYSTEM

2018 REPORTING TEMPLATE

(APRIL 2017-APRIL 2018)

TANZANIA

About the 2018 Joint-Assessment
We invite you to provide us with the following details, to help the SUN Movement Secretariat (SMS) better understand how inputs into the 2018 Joint-Assessment were compiled by stakeholders, and, to what extent this process is deemed useful.

Participants

1. Did the following stakeholder groups provide specific inputs to the Joint-Assessment in writing or verbally?

<table>
<thead>
<tr>
<th>Group</th>
<th>Yes (provide number)/No (= 0)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government</td>
<td>Yes (17)</td>
</tr>
<tr>
<td>Civil society</td>
<td>Yes (7)</td>
</tr>
<tr>
<td>Donors</td>
<td>Yes (4)</td>
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<tr>
<td>United Nations</td>
<td>Yes (5)</td>
</tr>
<tr>
<td>Business</td>
<td>Yes (1)</td>
</tr>
<tr>
<td>Science and academia</td>
<td>Yes (2)</td>
</tr>
<tr>
<td>Other</td>
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</tbody>
</table>

2. How many participated in the Joint-Assessment process? ______36_____

Of these, please indicate how many participants were female and how many were male 22 Females, 14 males
Process
3. Was the Joint-Assessment data gathered and/or reviewed during a face-to-face meeting or via email?

<table>
<thead>
<tr>
<th>Step</th>
<th>Format</th>
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<tbody>
<tr>
<td><strong>Collection</strong></td>
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<td></td>
<td>X      X</td>
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<tr>
<td><strong>Review and validation</strong></td>
<td>Meeting Email</td>
</tr>
<tr>
<td></td>
<td>X      X</td>
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</tbody>
</table>

4. If an information gathering or validation meeting took place, please attach a photo.

![Photo of participants](image)

Usefulness
5. If an information gathering or validation meeting took place, would you say that the meeting was deemed useful by participants, beyond the usual work of the multi-stakeholder platform (MSP)?

Yes

Why?
- The exercise was participatory through group work and plenary sessions provided opportunity for all stakeholders to share ideas, agree on the progress and common priorities for nutrition
- The involvement of multiple stakeholders from nutrition specific and nutrition sensitive sectors facilitated common understanding on SUN processes among all sectors

Use of information by the SUN Movement
Please note that this template will be featured on the SUN Movement website, unless the SMS is otherwise notified. Analysed results of this Joint-Assessment will also form the basis of the 2018 SUN Movement Progress Report.
### Scoring key

<table>
<thead>
<tr>
<th>N/A</th>
<th>Not applicable</th>
<th>Progress marker not applicable to current context</th>
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<tr>
<td>0</td>
<td>Not started</td>
<td>Nothing in place</td>
</tr>
<tr>
<td>1</td>
<td>Started</td>
<td>Planning has begun</td>
</tr>
<tr>
<td>2</td>
<td>On-going</td>
<td>Planning completed and implementation initiated</td>
</tr>
<tr>
<td>3</td>
<td>Nearly completed</td>
<td>Implementation complete with gradual steps to processes becoming operational</td>
</tr>
<tr>
<td>4</td>
<td>Completed</td>
<td>Fully operational/targets are achieved/on-going with continued monitoring/validated/evidence provided</td>
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</table>
PROCESS 1: Bringing people together in the same space for action

Coordination mechanisms or platforms enable stakeholders to better work for improved nutrition outcomes. These platforms can serve to bring together a specific stakeholder, or they can be multi-stakeholder and multi-sectoral platforms (MSP), with a broader membership, and may help to link stakeholder-specific platforms. Platforms can exist at both the national and sub-national level, with the two levels often being linked. MSPs are seen as operational when they enable the delivery of joint results, on issues relevant to nutrition. MSPs are also deemed functional they enable the mobilisation and engagement of relevant stakeholders, assist relevant national bodies in their decision-making, spur consensus around joint interests and recommendations, and foster dialogue, at the sub-national level.

Need some guidance? See the progress marker explanatory note.

Progress marker 1.1: Select/develop coordinating mechanisms at the country level

This progress marker looks at the presence of either stakeholder-specific and multi-stakeholder platforms or mechanisms, and how they are linked. The platforms that now focus on scaling up nutrition may have either been developed from existing mechanisms, or have created recently, and specifically, for this purpose.

FINAL SCORE

3

EXPLANATION OF THE FINAL SCORE

- The coordinating mechanisms have already been established and functional at national, regional and Local Government Authorities (LGAs) levels. The SUN conveners were nominated including; the SUN government focal point from Prime Minister’s Office, the UN network convener (UNICEF), Donor conveners (USAID and Irish Aid), Civil Society Organizations (CSOs) network convener (PANITA), business convener (GAIN), and Academic network led by Sokolne University of Agriculture.

- The currently executed 5 years National Multisectoral Nutrition Action Plan (NMNAP) 2016 – 2021 stipulated common set of priorities (Key result areas) that were agreed by all key stakeholders. For each key result area, a Thematic Working Group (TWG) responsible for its implementation and monitoring was established. Key results area include: 1) maternal, infant, young child and adolescent nutrition, 2) Prevention and control of micronutrients deficiencies, 3) Integrated management of acute malnutrition; 4) Nutrition-related non-communicable diseases; 5) Nutrition sensitive interventions; 6) Multisectoral Nutrition Governance; 7) Multisectoral Nutrition Information System; 8) Resources mobilization. The annual targets were set for each result area and implementation status are jointly reviewed annually through the Joint Multi-sectoral Nutrition Review (JMNR) - an annual event, which brings nutrition stakeholders to review the progress of implementation of nutrition actions in the country for the previous financial year. Stakeholders involved in the annual review include Government Ministries, departments and Agencies; development partners, Civil Society Organizations, Local Government Authorities and Private Sector.

- Multi-sectoral and multi-stakeholders platforms (MSP) exist at National, Regional Secretariats (RSs) and Local Government Authorities (LGAs). Terms of reference (ToR) for High Level Steering Committee on Nutrition (HLSCN), National Multi-sectoral Nutrition Technical Working Group (MNTWG), NMNAP Thematic Working Groups (TWG), Regional and Council Multisectoral Steering Committees on Nutrition (R&CMSCN) have been reviewed / developed and endorsed. ToR aimed to ensure a coordinated, transparent and accountable multi-
sectoral scaled-up response focusing on community-level actions. The committees put the Government authorities in the driving seat in the fight against malnutrition and define the roles of the different stakeholders to ensure adherence to the THREE ONES NMNAP guiding principles of ONE plan, ONE coordinating mechanism and ONE Monitoring and Evaluation framework.

- President’s Office – Regional Administration and Local Government (PO-RALG) strengthens capacity among members of steering committees at Regional and Council levels; up to March 2018, 6 regions have already been oriented on the reviewed ToR. The R&CMSCN convene on quarterly basis.

**Progress marker 1.2: Coordinate internally and expand membership/engage with other actors for broader influence**

This progress marker looks the internal coordination, among members, achieved by the multi-stakeholder platform. It also looks at efforts to increase collective influence by engaging new actors and stakeholders, resulting in expanded membership. This can encompass sub-national platforms or actors, grassroot-focused organisations, or the executive branch of government, for example.

**FINAL SCORE**

3

**EXPLANATION OF THE FINAL SCORE**

- Nutrition is decentralized with the PO-RALG linking actors at different administrative levels. A communication mechanism is institutionalized between national, RS and LGAs. The PO-RALG shares national reports while RSs and LGAs share quarterly implementation status reports with PO-RALG.
- PO-RALG convened the first Regional Nutrition Officers Annual meeting in December 2017 to discuss strategies to improve efficiency in implementation of nutrition interventions. The meeting brought together nutrition multiple stakeholders including government officials, UN network, Donors network, CSOs and Media.
- Nutrition cost centre has been incorporated into a web based redesigned planning and reporting (PlanRep II) tool to enhance planning and budgeting for nutrition at regional and council levels. The country’s Regional and District Nutrition Officers have been capacitated and have used the tool to plan for nutrition activities for 2018/2019 Financial Year (FY).
- The 4th Joint Multisectoral Nutrition Review meeting convened on September, 2017 brought together all nutrition stakeholders to review implementation status of the first year of the NMNAP 2016 -2021 and its Common Results and Accountability Framework (CRRAF). Over 300 stakeholders participated which include; key line Ministries; selected Members of Parliaments; Departments and Agencies; Regional and District Nutrition Officers; representatives from Zanzibar Ministry of Health – Department of Nutrition; Development partners; Civil Society Organizations; Private sector; Research and Academic institutions.
- The World Bank and the government are developing a partnership on improving early childhood development and nutrition.
- The Government has established a formalized Community Health Worker (CHW) cadre for delivery of comprehensive package of health services including nutrition to the community. The aim is to have a minimum of two full-time CHWs deployed per village and linked to a nearby dispensary/health centre to reach the community with health and nutrition services. Partners are working to support the Government on recruitment of the CHW cadre.
Progress marker 1.3: Engage within/contribute to the multi-stakeholder platform (MSP)
This progress marker looks at whether the MSP fosters collaboration among stakeholders, at the national level, on issues most relevant to the nutrition agenda, in addition to commitment and follow-through. When relevant, interactions at the sub-national level should also be addressed.

**FINAL SCORE**
3

**EXPLANATION OF THE FINAL SCORE**
- The HLSCN approved the NMNAP 2016 -2021 on 21st October 2016 with national priorities and indicators for five years that were set based on the nutrition situation in the country.
- Annual priorities are set and reviewed during Joint SUN assessment exercise and Multisectoral review meetings and approved by HLSCN. Priorities for 2017/2018 were agreed during the 2017 SUN Joint assessment that considered the situation at the moment.
- The MSP implementation is guided by the Food and Nutrition Policy, NMNAP 2016 - 2021, Common Results, Resource and Accountability Framework (CRRAF), LGAs (decentralized) Annual Work Plans (AWPs), and various guidelines for Thematic Working Groups.

Progress marker 1.4: Track, report and reflect on own contributions and accomplishments
This progress marker looks whether the MSP tracks and reports on implementation of agreed actions, by individual actors and stakeholders, and their contribution to the MSP’s collective progress towards agreed priorities. The MSP’s ability to foster accountability is also considered.

**FINAL SCORE**
3

**EXPLANATION OF THE FINAL SCORE**
- Members of Thematic Working Groups meet quarterly to review implementation status of the agreed work plans; the Multi-sectoral Nutrition Technical Working Groups and the High Level Steering Committee on Nutrition are scheduled to meet twice per year.
- Nutrition implementation status is tracked through bi-annual Bottleneck Analysis (BNA) for nutrition specific interventions, Regional and Councils Annual Work Plan (AWP) reviews and multi-sectoral nutrition scorecards.
- The CRRAF, the monitoring and evaluation tool of the NMNAP 2016- 2021 monitors annual implementation of the NMNAP 2016 -2021 in terms of targets/ outputs met and financial commitments.
- The 4th JMNR meeting convened on September, 2017 brought together all nutrition stakeholders to review implementation status of the first year of the NMNAP 2016 -2021 and its CRRAF. Progress was tracked towards agreed indicators in terms of results for nutrition, as well as against spending vs planned budget.
- The Development Partners’ Group on Nutrition (DPGN) shares periodic updates on the NMNAP 2016 -2021 implementation.

Progress marker 1.5: Sustain the political impact of the multi-stakeholder platform
This progress marker looks at the extent to which a multi-sectoral, multi-stakeholder approach to nutrition is accepted as a national priority and institutionalised by all stakeholders.

**FINAL SCORE**
3

**EXPLANATION OF THE FINAL SCORE**
Tanzania Food and Nutrition Centre (TFNC) has done advocacy session on nutrition situation and the NMNAP 2016 -2021 to Parliamentary Group on Nutrition Food Security and Children Rights (PGNFSRC).

The NMNAP 2016 -2021 priorities are integrated in the national and sub-national planning and budgeting structures whereby nutrition cost centre has been incorporated into redesigned PlanRep tool.

Nutrition was added for the first time in the National Five Years Development Plan 2016/1 – 2020/21 (FYDP II), as a Strategic Intervention for Human Development, with a five years budget for nutrition specific interventions as well as nutrition coordination and information system.

The United Nations Development Assistance Plan (UNDAP, 2016 – 2021) has integrated nutrition outcomes such as Maternal Infant Young Child Adolescent Nutrition (MIYCAN), Iron Folic Acid (IFA) supplementation, Vitamin A supplementations and Integrated Management of Acute Malnutrition (IMAM) which align with the NMNAP. (Key donors country cooperation agreement exists).

Key contribution of each stakeholder to Process 1

As of this year (2018), the Secretariats of the SUN Global Networks (UN, Donor, Business and Civil Society) will use the Joint-Assessment to examine their contributions, in a bid to reduce the reporting burden. If a stakeholder is not involved in the MSP, please write not applicable (N/A).

<table>
<thead>
<tr>
<th>Stakeholders</th>
<th>Please provide examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>UN</td>
<td>- Technical and financial assistance in tracking implementation NMNAP and strengthening Regional secretaries and Local government Authorities capacities to implement NMNAP</td>
</tr>
<tr>
<td>Donor</td>
<td>- Technical and financial assistance in tracking implementation NMNAP and strengthening Regional secretaries and Local government Authorities capacities to implement NMNAP</td>
</tr>
<tr>
<td>Business</td>
<td>- GAIN supported orientation of R&amp;CMSCN members on the new ToRs</td>
</tr>
<tr>
<td></td>
<td>- Mobilize members of the business sector</td>
</tr>
<tr>
<td>CSO</td>
<td>- Partnership for Nutrition in Tanzania (PANITA) is coordinating representation of CSOs in Councils Multi-sectoral Steering Committees for Nutrition (CMSCN)</td>
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OVERALL SUMMARY OF PROGRESS ACHIEVED OVER THE PAST YEAR (April 2017 to April 2018)

FOR PROCESS 1: Bringing people together in the same space (i.e. overall achievements/positive changes/ key challenges and suggestions for improvements/ other relevant activities in the context of scaling up nutrition efforts in-country)

The progress has been made in bringing together different stakeholders at national and subnational to jointly plan, review and evaluate priority actions aimed to scale-up nutrition interventions. The major successes include; HLSCN convened the 4th JMNR meeting to review implementation of the first year of the NMNAP 2016 - 2021, PO-RALG organised the first Regional Nutrition officers Annual Meeting and improvement in conducting R&CMSCN meeting. Despite the mentioned achievement at RSs and LGAs there is still poor engagement of key sectoral members in steering committees which slow the progress towards attainment of common nutrition results. There is need to continue strengthen the multisectoral coordination at national and sub-national levels in order to speed up the scaling-up of nutrition interventions at all levels.
PROCESS 2: Ensuring a coherent policy and legal framework

The existence of a coherent policy and legal framework should inform and guide how in-country stakeholders work together, for improved nutrition outcomes. Updated policies, strategies and legislations are fundamental to prevent conflict of interest among the wide range of actors involved in a complex societal topic such as nutrition. This process focuses on the enabling policy and legal environment.

Need some guidance? See the progress marker explanatory note.

Progress marker 2.1: Continuously analyse existing nutrition-relevant policies and legislation

This progress marker looks at the extent to which existing nutrition-relevant (specific and sensitive) policies and legislation are analysed using multi-sectoral consultative processes, with inputs from various stakeholders, and civil society in particular. It denotes the availability of stock-taking documents and continuous context analysis to inform and guide policy-making.

FINAL SCORE

3

EXPLANATION OF THE FINAL SCORE

- In response to Cabinet Secretariat recommendations, National Food and Nutrition Policy of 1992 has been evaluated to assess achievements, challenges and gaps in implementation of the policy from 1992 to 2017. The evaluation exercise was led by a Consultant with multi-stakeholders at National, RS and LGA levels.
- Nutrition component has been incorporated into the revised National Health Policy 2018
- National social security policy (2003) including its nutrition component is being revised.
- Eight regulations have been developed for implementation of the Tanzania Food and Nutrition Act of 1973 (CAP109). Currently, it is on the process of receiving comments from stakeholders including (Parliamentary law steering committee) before submitted to the Minister of Health for endorsement.
- The medium scale industries is incorporated into the food fortification regulation and is waiting for approval by Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC).
- National micronutrient guideline of 2018 is being developed; so far it is in the stage of validation. The development is done by a Consultant through various technical working groups comprised of multi-stakeholders.
- Guidelines for the preparation of plans and budget for 2017/2018 was developed, with the specific guidance on nutrition.

Progress marker 2.2: Continuously engage in advocacy to influence the development, updating and dissemination of relevant policy and legal frameworks

This progress marker looks at the extent to which in-country stakeholders work together and contribute, influence and advocate for the development of updated or new improved nutrition policy and legal frameworks for and their dissemination (i.e. advocacy and communication strategies in place to support the dissemination of relevant policies). It focuses on how countries ascertain policy and legal coherence across different ministries and try to broaden political support, by encouraging parliamentarian engagement.
It also focuses on the efforts of in-country stakeholders to influence decision-makers for legislation and evidence-based policies that empower women and girls through equity-based approaches.

**FINAL SCORE**

3

**EXPLANATION OF THE FINAL SCORE**

- The Prime Minister, officially launched the NMNAP 2016-2021 and its CRRAF in September 2017 during the 4th JMNR meeting. The launching event was considered as a way to advocate and disseminate the plan to all key sectors stakeholders at national, regional and council levels.
- The Minister responsible for Health, Community Development, Gender, Elderly and Children officially launched the mobile nutrition (m-nutrition) messages during the commemoration of the World Breastfeeding Week 2017. The launching of m-nutrition is a joint initiative of multi-stakeholders intended to raise awareness and create demand for nutrition services among women of reproductive age.
- Multi-stakeholders have been using social media to amplify key nutrition messages and create awareness among beneficiaries in the country. Radio, television programs, social media, social gathering continued to be used to raise public awareness on various nutrition issues in the country.
- There has been continuing reinforcement of Universal Salt Iodation (USI) among salt producers to ensure that salt produced in the country is adequately iodized.
- The strategic plan 2018-2023 of the Members of Parliament Nutrition Champion Group has been revised.
- The National Nutrition Social and Behavior Change Communication (NNSBCC) kit has been scaled-up at RS and LGAs levels and is being implemented by various stakeholders in the country. There has been continuous advocacy of the kit among multi-stakeholders whereby 7 regions have been reached. Scaling up is still ongoing so as to reach more regions and ensure uniformity and consistency in implementation of the kit.
- Orientation of the Regional and Council multi-sectoral nutrition steering committee on the new ToR is ongoing.
- SUN business network members were oriented on fortification regulations and food standards.

**Progress marker 2.3: Develop or update coherent policies and legal frameworks through coordinated and harmonised in-country stakeholder efforts**

This progress marker looks at the extent to which in-country stakeholders – the government (i.e. line ministries) and non-state partners – coordinate their inputs to ensure the development of coherent policy and legislative frameworks.

**FINAL SCORE**

3

**EXPLANATION OF THE FINAL SCORE**

- Multiple stakeholders including UN family, Donor community, CSOs, business network and academia provided technical and financial supports in evaluation of the 1992 food and nutrition policy. They also contributed in the review of the Food Fortification Regulations, Regulations for implementation of the Tanzania food and nutrition Act of 1973 (CAP109), National micronutrient guideline of 2018, National Health Policy, and National social security policy (2003).

**Progress marker 2.4: Operationalise/enforce legal framework**
This progress marker looks at the availability of mechanisms to operationalise and enforce legislation, such as the International Code of Marketing of Breast-milk Substitutes, maternity protection and paternity and parental leave laws, food fortification legislation, they right to food, among others.

**FINAL SCORE**

3

**EXPLANATION OF THE FINAL SCORE**

- In December 2017, the COMPACT agreement was signed between the Minister responsible for Regional Administration and Local Government Authorities (on behalf of the Vice President) and Regional Authorities on scaling up implementation of nutrition activities at Regional and LGAs. The compact clearly indicates the roles of regions and councils towards nutrition indicators such as minimum resource allocation per child for nutrition, recruitment of nutrition officers, multi-sectoral nutrition scorecard, R&CMSC committees, nutrition sensitive interventions across sectors, regions strategic plans for nutrition etc. The compact will run through 2021 as per NMNAP timeline. There will be annual assessment and reviewing of implementation of the compact.
- The existence of eight regulations will enforce the implementation of Tanzania Food and Nutrition Act
- Existence of one plan for salt iodization program, however, enforcement is still weak, including documentation of defaulters
- Data Centralization System (DCS) developed to track fortification data as mechanism to ensure that Food Processors abide with legislation.
- Mapping and segmentation of business to identify gaps in aligning to food fortification regulations and standards

**Progress marker 2.5: Track and report for learning and sustaining the policy and legislative impact**

This progress marker looks at the extent to which existing policies and legislation have been reviewed and evaluated to document good practices, and the extent to which available lessons are shared by different constituencies within the multi-stakeholder platforms.

**FINAL SCORE**

2

**EXPLANATION OF THE FINAL SCORE**

- The evaluation of 1992 National Food and Nutrition policy was carried out to inform and document on the achievement and lessons in the implementation of the policy since 1992 up to date. The lessons drawn will inform the review of this policy and other legal frameworks.
- The 4th JMNR meeting created a platform for stakeholders to share knowledge and experiences in implementing nutrition interventions, and document lessons and good practices from nutrition implementing partners. The lesson drawn inform various policies, guidelines and strategies.
- The findings from the Bottleneck analysis (BNA), multisectoral nutrition scorecard provide insight of the situation in the country and used to guide decision and priorities at national, RSs and LGAs level.
**Key contributions of each stakeholder to Process 2**

As of this year (2018), the Secretariats of the SUN Global Networks (UN, Donor, Business and Civil Society) will use the Joint-Assessment to examine their contributions, in a bid to reduce the reporting burden. If a stakeholder is not involved in the MSP, please write not applicable (N/A).

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<thead>
<tr>
<th>Stakeholders</th>
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<tbody>
<tr>
<td>UN</td>
<td>- Technical and financial support in development of various policies and guidelines</td>
</tr>
<tr>
<td>Donor</td>
<td>- Technical and financial support in development of policies and guidelines</td>
</tr>
<tr>
<td>Business</td>
<td>- Advocate and Support implementation of regulations e.g. food fortification</td>
</tr>
<tr>
<td>CSO</td>
<td>- support on implementation of regulations</td>
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**OVERALL SUMMARY OF PROGRESS ACHIEVED OVER THE PAST YEAR (April 2017 to April 2018) FOR PROCESS 2: Coherent policy and legal framework**

The overall achievement in this process was the establishment and strengthening of various mechanisms at national and subnational level to ensure operationalisation and enforcement of legislations. The development of the Nutrition Compact agreement represents a major achievement as it holds regional commissioners in all regions of Tanzania mainland accountable to achievement of nutrition results stipulated in the NMNAP and its CRRAF as well as towards execution of the minimum budget allocations for nutrition in each council of Tanzania mainland. However, the delayed approval of the revised National Food and Nutrition Policy (NFNP), and weak enforcement of legislations are the key challenges toward improving nutrition outcomes. Advocacy and capacity building to regulation enforcers is recommended to raise awareness hence improve nutrition outcomes.

**PROCESS 3: Aligning actions around common results**

The alignment of actions across sectors that significantly contribute to improvements in nutrition demonstrates the extent to which multiple sectors and stakeholders are effectively working together, and the extent to which the policies and legislations are operationalised to ensure that everyone, women and children in particular, benefit from improved nutrition. This process delves into the operational side of policy and legal frameworks and how they translate into action. The term ‘Common Results Framework’ is used to describe a set of expected results agreed upon across different sectors of government and among key stakeholders, through a negotiated process. The existence of agreed common results would enable stakeholders to make their actions more nutrition driven through increased coordination or integration. In practice, a CRF may result in a set of documents that are recognised as a reference point for all sectors and stakeholders that work together for scaling up nutrition.

Need some guidance? See the progress marker explanatory note.

**Progress marker 3.1: Align existing actions around national nutrition targets/policies**

This progress marker looks at the extent to which in-country stakeholder groups take stock of what exists and align their own plans and programming for nutrition to reflect the national policies and priorities. It focuses on the alignment of actions across sectors and among relevant stakeholders that significantly contribute towards improved nutrition.
Please note: While progress marker 2.1 looks at the review of policies and legislation, progress marker 3.1 focuses on the review of programmes and implementation capacities.

### FINAL SCORE
3

#### EXPLANATION OF THE FINAL SCORE

- The recently updated nutrition situation analysis is well captured in the NMNAP 2016 document explaining the nutrition situation trends, pattern and major causes of malnutrition in Tanzania as per Tanzania Demographic Health Survey (TDHS) and the conceptual framework of malnutrition.
- The 4th JMNR was conducted in September, 2017 to review implementation of the first year of the NMNAP. The CRRAF was used to monitor the annual progress in terms of targets met and financial commitments. Also challenges encountered were discussed and setting of recommendations to guide implementation in the next years.
- Stakeholder and Nutrition Action Mapping 2017/2018 was conducted by PO-RALG (Nutrition section) which indicated presence of nutrition stakeholders and their activities at council level. The information was collected by the nutrition officers in their respective councils showing nutrition stakeholders, activities implemented, geographical coverage and targeted population in line with the NMNAP key result areas. The Final report is compiled at PO-RALG.
- The Development Partners Group Nutrition (DPGN) also have DPGN Projects Information Database which complements stakeholders and nutrition action mapping. This document clearly captures DPG Nutrition members’ presence in various districts/ regions, their intervention, coverage and duration of the project. This information is intended to promote partnership and collaboration among development partners in nutrition.

### Progress marker 3.2: Translate policy and legal frameworks into an actionable Common Results Framework (CRF) for scaling up nutrition at the national and sub-national level

This progress marker looks at the extent to which in-country stakeholders agree on a Common Results Framework to effectively align interventions for improved nutrition. The CRF is recognised as the guidance for medium to long-term implementation of actions, with clearly identified nutrition targets. Ideally, the CRF should identify coordination mechanisms (and related capacity) and define the roles and responsibilities for each stakeholder. It should encompass an implementation matrix, an M&E Framework and costed interventions, including costs estimates for advocacy, coordination and M&E.

#### FINAL SCORE
4

#### EXPLANATION OF THE FINAL SCORE

- The NMNAP (2016-2021) has clearly indicated the country long and short term nutrition objectives and the roles of each stakeholder in implementing the plan.
- The existence of CRRAF, the monitoring, evaluation and accountability tool of the NMNAP 2016-2021 provides guidance on the implementation of the national nutrition plan at national, RSs and LGAs levels. The CRRAF translated the NMNAP priorities into actionable and measurable annual targets for each key result area with indicators clearly stated and financial commitment for execution of each output. The CRRAF includes results for each nutrition specific, nutrition sensitive and enabling environment results area, as well as a detailed activity...
level budget to achieve those results. Progress towards implementation of the NMNAP is tracked through the CRRAF every year during the JMNR.

**Progress marker 3.3: Organise and implement annual priorities as per the Common Results Framework**

*This progress marker looks at the sequencing and implementation of priority actions at the national and sub-national level. This requires, on the one hand, a clear understanding of gaps in terms of delivery capacity and, on the other hand, a willingness from in-country and global stakeholders to mobilise technical expertise to timely respond to the identified needs, in a coordinated manner.*

**FINAL SCORE** 3

**EXPLANATION OF THE FINAL SCORE**

- Implementation capacity of nutrition interventions at RSs and LGASs level is assessed using Annual Work Plan (AWP) reviews and Bottleneck Analysis (BNA). The 2017 Annual Work Plan (AWP) reviews provided details on the budget set to execute nutrition plans at the council level. The 2017 BNA was carried out to assess the capacity of councils to deliver nutrition specific interventions in terms of availability of commodities, human resources, geographical reach, utilization, quality and continuity. The interventions include Infant and Young Child Feeding (IYCF), Iron Folic Acid supplementation (IFA), Vitamin A Supplementation (VAS) and Integrated Management of Acute Malnutrition (IMAM).
- The 2017 AWP and BNA findings served as the basis for planning and budgeting for 2018/2019. The council plans and priorities reflect gaps identified in the previous year.
- The NMNAP 2016-2021 stands as a guide to annual work plans for all stakeholders at national and sub-national level, as it depicts annual targets for each key result area. The dynamic nature of the NMNAP allows stakeholders at all level to contextualize and develop their own council plans in line with their Medium Term Expenditure Framework (MTEF).
- All councils in the country were capacitated on annual country priorities prior to planning and budgeting to ensure alignment of their plans with country priorities. PO-RALG provided supportive supervision to low performing councils to strengthen performance and coordination capacity.
- Regular training and supportive supervisions are conducted to strengthen capacity of nutrition officers to plan, budget and implement nutrition interventions.

**Progress marker 3.4: Jointly monitor priority actions as per the Common Results Framework**

*This progress marker looks at how information systems are used to monitor the implementation of priority actions for good nutrition. It looks at the availability of joint progress reports that can meaningfully inform and guide the refinement of interventions and contribute towards harmonised targeting and coordinated service delivery among in-country stakeholders.*

**FINAL SCORE** 4

**EXPLANATION OF THE FINAL SCORE**

- The current existing information system for data collection and analysis to measure implementation coverage and performance include; Multi-sectoral Nutrition scorecard which collects data on quarterly basis, semi-annual Bottleneck analysis and annual JMNR. Periodic surveys which include; Public Expenditure Review on Nutrition (PER-N) takes place after every two years, National Nutrition Survey and Tanzania Demographic health survey.
• PO-RALG collects quarterly reports on the implementation of nutrition interventions at Regional and Council levels. This process started since July 2017, where the collected reports are analysed and guide PO-RALG to strengthen capacity of councils in the implementation of nutrition interventions and provide supportive supervision in low performing councils.

• Annual JMNR meeting was conducted in September 2017 to review implementation status of the first year of NMNAP 2016-2021 and the recommendations made were used to improve annual work plans at national and sub national levels.

Progress marker 3.5: Evaluate the implementation of actions to understand, achieve and sustain nutrition impact

This progress marker looks at how results and success is being evaluated to inform implementation decision-making and building the evidence base for improved nutrition.

**FINAL SCORE**

3

**EXPLANATION OF THE FINAL SCORE**

• The 4th 2017 JMNR meeting provided platform for various stakeholders to share implemented activities, delivery approaches, innovations and disseminate research findings. Through this platform, lessons learnt and good practices were drawn which guided the recommendations and priorities agreed for improving nutrition programmes and implementation capacity.

• Findings from the BNA and Multisectoral Scorecard of 2017 were shared to MSP to improve implementation plans for nutrition activities.

Key contributions of each stakeholder to Process 3

As of this year (2018), the Secretariats of the SUN Global Networks (UN, Donor, Business and Civil Society) will use the Joint-Assessment to examine their contributions, in a bid to reduce the reporting burden. If a stakeholder is not involved in the MSP, please write **not applicable** (N/A).

<table>
<thead>
<tr>
<th>Stakeholders</th>
<th>Please provide examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>UN</td>
<td>- Technical and Financial support in dissemination of NMNAP to nutrition stakeholders.</td>
</tr>
<tr>
<td>Donor</td>
<td>- Technical, Financial and coordination</td>
</tr>
<tr>
<td>Business</td>
<td>- Advocacy to private sectors</td>
</tr>
<tr>
<td>CSO</td>
<td>- Advocacy and Implementations of nutrition actions in line with the national plan</td>
</tr>
</tbody>
</table>

OVERALL SUMMARY OF PROGRESS ACHIEVED OVER THE PAST YEAR (April 2017 to April 2018) FOR PROCESS 3: Common Results Framework for National Nutrition Plan (aligned programming)

(i.e. Overall achievements/positive changes/ key challenges and suggestions for improvements/ other relevant activities in the context of scaling up nutrition efforts in-country)

The presence of the NMNAP 2016 -2021 and its CRRAF has contributed to increased alignment of stakeholders’ plans with the national priorities. All council plans are in line with the NMNAP outcomes and outputs which facilitate the monitoring and evaluation process using the CRRAF. Alignment of nutrition sensitive sectors (Agriculture,
Health, WASH, Education, Social protection etc.) according to NMNAP is still a major challenge, hence the need for deliberate efforts to ensure alignment and engagement of these key sectors.

**PROCESS 4: Financial tracking and resource mobilisation**

Assessing the financial feasibility of national plans to implement actions for improved nutrition is essential to determine funding requirements. The latter is based on the capability to track planned and actual spending on nutrition across relevant government ministries and from external partners. The existence of plans, with clearly costed actions, helps government authorities and key stakeholders (e.g. UN, donors, business, civil society) align and contribute resources to national priorities, estimate the required budget for implementation and identify financial gaps.

Need some guidance? See the progress marker explanatory note.

**Progress marker 4.1: Cost and assess the financial feasibility of the CRF**

This progress marker looks at the extent to which the government and all other in-country stakeholders provide inputs for the costing of nutrition-specific and nutrition-sensitive actions across relevant sectors (costing exercises can be performed in various ways, including reviewing current spending or estimating unit costs).

**FINAL SCORE**

3

**EXPLANATION OF THE FINAL SCORE**

- Costed plans exist for implementing nutrition interventions at national and sub-national levels. Current existing plans include: a Five Years National Development Plan II (2016/21), Council Comprehensive Health Plan (CCHP 2011), Health Sector Strategic Plan IV (2015/20) and the NMNAP 2016-2021.

**Progress marker 4.2: Track and report on financing for nutrition**

This progress marker looks at the extent to which the government and all other in-country stakeholders are able to track their allocations and expenditures (if available) for nutrition-specific and nutrition-sensitive actions in relevant sectors and report on finance data, in a transparent manner, with other partners of the MSP, including the government.

**FINAL SCORE**

3

**EXPLANATION OF THE FINAL SCORE**

- The PER-N started in July 2017 and was carried out for several months. The PER Nutrition exercise intended to; assess level and composition of public expenditure on nutrition over the past three fiscal years (2013/14, 2014/15 and 2015/16), Review overall spending against the National Nutrition Strategy 2011-16 and assess the allocative and technical efficiency and equity of spending. Also to assess the institutional mechanisms for the
management of nutrition budgets and provide specific and targeted recommendations to improve nutrition expenditures and budget management performance. The report is on the final stage.

• The 2017 AWP was used to track and report on Regional Secretariats (RSs) and Local Government Authorities (LGAs) budget for nutrition in line with the NMNAP results. The average spending on nutrition for each LGAs and RS is presented in terms of funding sources, funded interventions etc. Results for the analysis of the AWP were disseminated during the 4th JMNR meeting. The CSO convener PANITA collects information on resources contributed by CSOs and NGOs in the implementation of the NMNAP (on progress).

• Inclusion of nutrition cost centre in the redesigned PlanRep II ensures transparency, accountability and efficiency in planning, budgeting and also tracking of funds received, actual spending on implementation and financial reporting. This tool has been used for planning and budgeting of the nutrition activities for the financial year 2018/19.

Progress marker 4.3: Scale up and align resources including addressing financial shortfalls

This progress marker looks at whether the government and other in-country stakeholders identify financial gaps and mobilise additional funds, through increased alignment and allocation of budgets, advocacy, and setting-up of specific mechanisms.

FINAL SCORE
3

EXPLANATION OF THE FINAL SCORE

• The financial gaps on implementation of nutrition interventions for the first year of NMNAP are known by multi-stakeholders. Government partners align their allocations towards identified nutrition priorities by using a monitoring tool - CRRAF. However, the budget spent on nutrition by the Regions is not correlated with the number of malnourished children.

• The Vice President gave directive to Regional Commissioners of all councils to include nutrition as their permanent agenda in their monthly meeting to ensure that nutrition interventions are funded according to the plans. However, there is still inadequate adherence of councils to allocate minimum budget spending on nutrition per child using domestic resources at council levels.

• Government has mobilized additional funds through partners whereby there is an increase of 4 billion in nutrition budget for the fiscal year 2017/18.

• Resource mobilization Technical Working Group met with potential donors to advocate for additional funds for nutrition.

Progress marker 4.4: Turn pledges into disbursements

This progress marker looks at how governments and other in-country stakeholders turn pledges into disbursements. It includes the ability of donors to look at how their disbursements are timely and in line with the scheduled fiscal year.

FINAL SCORE
2

EXPLANATION OF THE FINAL SCORE

• Development partners disburse funds in a timely manner and most of the nutrition budgets for RS and LGAs are highly depending on partner’s contribution. However, Government disbursements delayed and seemed to be low compared to pledge.
Progress marker 4.5: Ensure predictability of multi-year funding to sustain implementation results and nutrition impact

This progress marker looks at how the government and in-country stakeholders collectively ensure predictable and long-term funding for better results and impact. It looks at important changes such as the continuum between short-term humanitarian and long-term development funding, the establishment of flexible but predictable funding mechanisms and the sustainable addressing of funding gaps.

**FINAL SCORE**
2

**EXPLANATION OF THE FINAL SCORE**

- PO-RALG issued a directive to all District Executive Directors to allocate about USD 2.7 million for nutrition specific interventions in the budget for 2016/17 financial year, equivalent to at least USD 0.23 per child under five years. This amount will be increased every year to reach at least 8.5 USD per child under five years by 2030. However, only 2 out of 185 Districts spent over USD 0.23 per child on nutrition specific interventions using domestic resources.
- PO-RALG issued a new directive to allocate about USD 5.4 million for nutrition specific interventions in the budget for 2017/18 financial year, equivalent to at least USD 0.46 per child under five years. The Regional Administration Secretaries have also been asked to allocate at least USD 2,300 per district to support supervision activities by Regional Nutrition Officers.
- However, minimum budget allocations are still very low compared to the actual needs and are not complied by most of the councils. Additionally, some key intervention such as IMAM and IFA supplementation especially among adolescent girls are chronically underfunded.
- To support this effort towards increasing domestic funding for nutrition, a Nutrition Compact was signed between the Honourable Minister of State PO-RALG and all Regional Commissioners, stipulating the commitment of all regions of Tanzania to implement the minimum budget allocations for nutrition and achieve the nutrition results that were agreed in the National Multisectoral Nutrition Action Plan (NMNAP) 2016-21.
- The Government of Tanzania is developing a programme with the World Bank on Investing in Yearly Years, which will cover over half of the regions of the country.
- Resource mobilization Working Group has been formed and is led by SUN National focal person. Resource mobilization strategy is not yet in place. However, there are series of ad-hoc high level meetings advocating for resources to support nutrition.

**Key contributions of each stakeholder to Process 4**

As of this year (2018), the Secretariats of the SUN Global Networks (UN, Donor, Business and Civil Society) will use the Joint-Assessment to examine their contributions, in a bid to reduce the reporting burden. If a stakeholder is not involved in the MSP, please write not applicable (N/A).

<table>
<thead>
<tr>
<th>Stakeholders</th>
<th>Please provide examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>UN</td>
<td>- Technical and financial assistance in planning and budgeting,</td>
</tr>
<tr>
<td>Donor</td>
<td>- Technical and financial assistance in planning and budgeting, functionality of the coordination structures,</td>
</tr>
<tr>
<td>Business</td>
<td>- Technical and financial assistance for involvement of the business sector in implementing NMNAP</td>
</tr>
</tbody>
</table>
The government financial commitment on nutrition has increased over time as the result of continued advocacy which reflected by increased annual budget for nutrition by 4 billion in 2017/18. Inclusion of nutrition cost centre in the redesigned PlanRep is one of the most promising achievement towards ensuring financial tracking, accountability and transparency at RSs and LGAs level. With the increased budget allocation for nutrition, the challenge remains with actual disbursement of funds for implementation of the planned activities. Inadequate and untimely disbursement has been observed with government funds, whereby with donor funds the disbursement is more predictable and timely. Only 19% of the planned financial targets were met in the past fiscal year 2016/2017. Therefore, there is still a need to mobilise more resources (domestic and donors) to support implementation of nutrition interventions in the country. Similarly, harmonized long-term resource mobilization strategy and strategic advocacy are needed to ensure timely and adequate disbursement of pledge funds.
NEW OUTCOME MARKER: Review of progress in scaling up nutrition-specific and nutrition-sensitive interventions over the past 12 months

In line with the SUN Movement MEAL system, this outcome marker looks at how processes put in place are effectively contributing to scaling up nutrition-specific and nutrition-sensitive interventions. In compliance with principles of equity, equality and non-discrimination for all, participants are asked to reflect on their implementation progress, considering geographical reach and targeting of children, adolescent girls and women as well as delivery approaches that promote a convergence of interventions (e.g. same village, same household or same individual) or integration of nutrition interventions in sector programmes (e.g. nutrition education in farmer field schools or provision of fortified complementary foods for young children as part of food aid).

<table>
<thead>
<tr>
<th>FINAL SCORE</th>
<th>Scaling up nutrition-specific actions</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>FINAL SCORE</td>
<td>Scaling up nutrition-sensitive actions</td>
<td>3</td>
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</tbody>
</table>

EXPLANATION OF THE FINAL SCORE

**Progress in scaling up nutrition-specific interventions**

**Promotion of Maternal, Infant, Young Child and Adolescent Nutrition (MIYCAN):** Tanzania has been promoting maternal nutrition and optimal infant feeding practices countrywide through various approaches such as counselling (individual/group), mass media, peer support group, Communication for Development (C4D) materials, mobile nutrition services, etc. Recently, there is intensive financial and technical support from UN family, donor networks, academia, CSOs and Business networks in implementation of activities that promote optimal nutrition behaviours at National and sub-national levels. MIYCAN interventions are targeted to women of reproductive age, adolescent girls and young children of 0-23 months. Almost half the regions of Tanzania are currently covered by donors-supported large scale nutrition programmes, while the Government plan to cover the remaining regions though the Investing in Early Years programme that is being developed with the World Bank.

**Integrated Management of Acute Malnutrition (IMAM):** IMAM is implemented at both community and facility levels. At community level, trained CHWs are involved in screening of malnutrition for early detection and referral of cases to health facilities. Inpatient and outpatient care for acute malnutrition is done at health facility levels. Currently IMAM is implemented in 19 out of 26 regions of Tanzania mainland targeting children under five years. However not all councils of these regions have been covered, a major challenge being weak support on scaling up this intervention. Results from the BNA 2016/17 revealed that only 26% of health facilities in Tanzania provide IMA services and only 14% of expected SAM cases are treated every year. IMAM was the poorly funded intervention for fiscal year 2016/2017. Therefore, long term resource mobilization to support this intervention is highly recommended.

**Micronutrient supplementation**

**Vitamin A Supplementation (VAS):** Tanzania adopted a comprehensive approach to deliver twice yearly (June and December) vitamin A supplementation through Child Health and Nutrition Month (CHNM). VAS program targets children aged 6-59 months country wide. During CHNM VAS, de-worming and screening of acute malnutrition are
done by the health service providers at facility and community levels. VAS intervention performs better than other micronutrient interventions in the country; in 2017 the coverage was 92%. However, the operational costs for VAS campaigns are too high for the government to sustain hence a need to integrate VAS into existing health structures for routine services.

**Iron Folic Acid supplementation (IFA):** IFA is delivered through routine health services targeting pregnant and lactating mothers. Inadequate supplies and poor enabling environment has contributed widely to the low coverage which is 26% for 2017. Weekly Iron Folic Acid Supplementation (WIFAS) has been initiated in one region targeting adolescent girls aged 10-19 years, with the plan to scale up in other regions.

**Food Fortification:** Tanzania has continued to promote food fortification through large and medium scale industries. The foods that are fortified include wheat and maize flour, cooking oil and salt. The fortified foods are intended for general population to increase intake hence combat micronutrient deficiencies.

**Nutrition Education:** Nutritional education is delivered countrywide through mass media, mobile nutrition messages, training, C4D materials, peer support groups and campaigns. Nutrition stakeholders continued to provide technical support, develop policies and programs that increase public awareness on nutrition. Efforts have been made to build the capacities of individuals and institutions to adopt food and nutrition practices that promote good health.

**Progress in scaling up nutrition-sensitive interventions**

**Agriculture, Livestock and Fisheries sectors:** These sectors ensure availability of diverse range of nutritious foods in the country through various nutrition sensitive interventions including; promotion of production and multiplication of high nutritive value crops such as Pro-vitamin A (PVA) maize, Vitamin A rich bananas, Orange flesched sweet potatoes, and High iron beans, small animal keeping and fish farming. Research Institutes provide support in the production of bio-fortified crops while extension officers build capacity of farmers on adopting these nutrition sensitive interventions.

**Health sector:** Nutrition components such as Maternal nutrition, IYCF and caring practices have been incorporated in the learning curriculum and manuals for Community Development Officers, to capacitate them on nutrition sensitive interventions to be implemented at community level.

**Education Sector:** The Ministry responsible for Education is in the early stages of formulating the guideline for school feeding programme. The programme aims to provide food to primary school pupils in order to reduce dropouts and improve performance status. The programme will be implemented in six regions and later on scale-up to other regions.

**Social Protection:** Productive Social Safety Net Programme (PSSN) is a National wide programme currently operating aiming at improving nutrition and wellbeing of children, elderly people, unemployed able-bodied citizens, poor and vulnerable households through cash transfer. The programme takes into account agreed modalities for the operationalization of Synergies between TASAF III/PSSN and the large scale nutrition programmes in Tanzania.
### Annex 1: Identified priorities

Please describe the status of the priorities identified in your most recent Joint-Assessment (for instance 2016-2017)

<table>
<thead>
<tr>
<th>Priorities identified in most recent JAA?</th>
<th>Has this priority been met?</th>
<th>What actions took place to ensure the priority could be met?</th>
<th>Did you receive external technical assistance to meet this priority?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Enter priority</strong></td>
<td>Yes or No</td>
<td><em>Please outline stakeholders’ contributions (government, UN, CSOs, donors, etc.)</em></td>
<td><em>If yes, please explain</em></td>
</tr>
<tr>
<td><strong>PROCESS 1</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 1. Organize the 2017 and 4th Joint Multisectoral Review in September 2017 and disseminate report | Yes | • Conducted kick off stakeholders meeting to share ideas on the review meeting  
  • Formulated multi-stakeholders’ organising committee which worked on all the meeting logistics including concept note development, agenda and abstracts  
  • Conducted a 3 days review meeting  
  • The organising committee compiled report and disseminated to all stakeholders | No external assistance required |
| 2. Finalize development of the NMNAP multisectoral coordinating structures, ensure composition of all key actors, and institutionalize them in Government systems | Yes |                                                             | No external assistance required |
| **PROCESS 2**                            |                            |                                                             |                                                                  |
| 3. Follow up on approval by Cabinet of the revised Food and Nutrition Policy and disseminate | Yes | • Recommendations from cabinet received, and the evaluation of 1992 FNP was conducted as recommended with the support from stakeholders | No external assistance required |
| 5. Strengthen implementation and document enforcement of nutrition relevant legislation e.g. salt iodation, BMS | Yes | • Capacity building to various implementers at regional and council levels on legislation  
  • Advocacy and social mobilisation to raise awareness on the legislations in place | No external assistance required |
| 6. Initiate and support the development of a strategy linking nutrition with environment and climate change | No |                                                             |                                                                  |
## PROCESS 3

### 7. Operationalize the NMNAP’s Monitoring, Evaluation, Accountability and Learning (MEAL) approach using the CRRAF as reporting framework starting with the September 2017 JMNR

<table>
<thead>
<tr>
<th>Status</th>
<th>Details</th>
</tr>
</thead>
</table>
| Yes    | - Data from all Thematic Working Groups of the NMNAP were collected and analysed based on the output indicators set  
- The results were shared during the 4th JMNR meeting |

No external assistance required

### 8. Scale up and report on use of the Nutrition Scorecard at the 2017 September JMNR

<table>
<thead>
<tr>
<th>Status</th>
<th>Details</th>
</tr>
</thead>
</table>
| Yes    | - Training of Regional and District Nutrition Officers in all regions.  
- Roll out of Multisectoral Nutrition Scorecards in all regions of Tanzania |

No external assistance required

### 9. Review and harmonize supervision tools for Multisectoral nutrition activities for RSs and LGAs

<table>
<thead>
<tr>
<th>Status</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>- PO-RALG organised a multi-stakeholders’ working session to develop supportive supervision tool kit</td>
</tr>
</tbody>
</table>

No external assistance required

### 10. Support the 2017 BNA and review of NMNAP implementation by MDAs and LGAs

<table>
<thead>
<tr>
<th>Status</th>
<th>Details</th>
</tr>
</thead>
</table>
| Yes    | - Orientation of Regional Nutrition Officers on how to fill in the template/data  
- Templates were sent to Regional and Districts Nutrition Officers for data collection.  
- Data scrutinization and analysis was done at national level coordinated by TFNC  
- Stakeholders involved: UNICEF, PANITA, IMA World Health, PACT, Save the Children, PO-RALG, MoHCDGEC, CUAMM and Zanzibar Ministry of Health |

No external assistance required

### 11. Review and strengthen coordination of stakeholders on planning and budgeting of nutrition activities at LGA level including updating of the terms of reference (TOR) for regional and Council Nutrition Steering Committees

<table>
<thead>
<tr>
<th>Status</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>- Conducted working sessions with support from stakeholders to Build capacity of councils on planning and budgeting</td>
</tr>
</tbody>
</table>

No external assistance required

### 12. Do the 2018 SUN Joint assessment

<table>
<thead>
<tr>
<th>Status</th>
<th>Details</th>
</tr>
</thead>
</table>
| Yes    | - Initial information were gathered from stakeholders through email  
- Conducted information gathering stakeholders meeting to score processes and agree on the priorities  
- Compile the report and share with stakeholder to validate the information  
- All key stakeholders where involved, Government network UN network, |

No external assistance required
2018 Joint-Assessment by the multi-stakeholder platform _ Report
Tanzania

<table>
<thead>
<tr>
<th>PROCESS 4</th>
<th>Donors network, CSOs, Business network and academia</th>
</tr>
</thead>
</table>
| 13. Conduct the August 2017 Public Expenditure Review (PER) on nutrition and share results | Yes | • The exercise was coordinated by the Ministry of Finance, and led by Oxford Policy Management Consultant
• Multiple stakeholders where involved to provide technical and financial support in planning, data collection and analysis. |
| 14. Develop a resource mobilization strategy for the NMNAP                | No | External assistance needed |

**ADVOCACY PRIORITIES**

| 15. Summarize the NMNAP in English and Kiswahili and disseminate to policy makers and planners, and other stakeholder at both national and sub-national levels as per JMNR3 recommendations | No | No external assistance required |
| 16. Strengthen nutrition profile especially of the contents of the NMNAP in the media, including social media | Yes | No external assistance required |
| 17. Develop a performance based review and rewarding system for good performing on Scaling Up Nutrition for Ministries, Departments Agencies (MDAs); Regional Secretariats; Councils; Private Sectors; Media; CSOs and Individuals | Yes | • The special committee was formed to oversee the whole activity
• The best performed councils were awarded during the 4th JMNR |

Please list key 2018-2019 priorities for the MSP

*Consider what has been working well during the past year and what achievable targets can be identified and prioritised. Please also include network-specific priorities.*

1. Strengthen advocacy on the implementation of NMNAP and the use of CRRAF across all levels to enhance accountability;

2. Strengthening capacity of National, RSs and LGAs on planning, coordination and tracking of nutrition financing

3. Ensure planned and approved funds for nutrition are being disbursed (timely) and monitored

4. Strengthen multi-sectoral coordination at all levels in accordance with NMNAP coordination structure

If you are seeking external support from the global Networks and/or external technical mechanisms, through the SUN Movement Secretariat, please provide relevant information
Technical support required in the areas of Financial Tracking and effective engagement of Nutrition Sensitive Sectors
### Annex 2: Emergency preparedness and response planning

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Within the reporting period (i.e. the past year), has the country faced and responded to a humanitarian situation? If yes, what was the duration and type(s) of emergency (e.g. natural and climate-related disasters, communal violence, armed conflict etc.)?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Within the reporting period (2017/2018) the country experienced floods twice which lasted for more than 14 days in both occasions. Some regions in the country were more affected, and the reported impact included death, increased animal diseases and environment degradation.</td>
</tr>
<tr>
<td>2. Does the country have a national plan on emergency preparedness and response? If yes, does it include nutrition actions and indicators (both nutrition-specific and nutrition-sensitive)?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>There is a Tanzania Emergency Preparedness and Response Plan (TEPRP) that guide all national responses during emergency. Nutrition action included; ensuring food provided during emergency situations meet the required nutritional standards.</td>
</tr>
<tr>
<td>3. Is the MSP involved in discussions and planning for emergency preparedness and response? If yes, does the MSP engage with humanitarian partners, and how does the MSP contribute to linking development and humanitarian nutrition actions?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>The MSP are involved in discussions and planning for emergency preparedness and response whereby the disaster management policy has a provision that requires them to convene twice in a year. The UN agencies and other MSP members in partnership with the Government normally develop talking points for discussions regarding humanitarian nutrition actions.</td>
</tr>
<tr>
<td>4. What are the key limitations faced at the country level in terms of linking development and humanitarian nutrition actions?</td>
<td>Emergencies are not prioritised in sector policies, plans and strategies, hence making emergency responses more difficult.</td>
</tr>
</tbody>
</table>

### Annex 3: Ensuring gender equality and that women and girls are at the centre of all SUN Movement action

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the MSP engage with a governmental Ministry or Department that is responsible for women’s affairs/gender equality? If yes, what is the name of this Ministry/Department?</td>
<td>Yes,</td>
</tr>
<tr>
<td></td>
<td>The MSP engages with the MoHCDGEC which is responsible for women’s affair and gender issues. The Ministry works through Gender Development department which develops policy and strategies to ensure that the national objectives of gender equality and women’s empowerment are achieved.</td>
</tr>
<tr>
<td>If not a part of the MSP, how do you engage with this Ministry/Department?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Does the MSP engage with other non-state actors that are responsible for gender equality and the empowerment of women (such as UN Women or civil society organisations)? If yes, with whom do you engage?</td>
<td>Yes,</td>
</tr>
<tr>
<td></td>
<td>To ensure gender equality and women empowerment the MSP works in close collaboration with the non-state actors like UNFPA, UNICEF, UN Women and other CSOs, International and local Non-Government Organisations (NGOs) which deals with women and gender issues.</td>
</tr>
</tbody>
</table>
3. How does the MSP ensure gender equality and the empowerment of women and girls as part of their work plan?  

MSP members are mainstreaming gender issues in Sector Policies, Plans and Strategies. Gender desks have been created in all sector Ministries, Government Departments and Agencies as well as in LGAs to grass root level.

4. What actions are identified and implemented by the MSP to ensure gender equality and the empowerment of women and girls at the community level?  

Mainstreaming gender in nutrition plans and strategies.

5. Have you analysed or done a stock take of existing nutrition policies, legislation and regulations from a gender perspective?  

No.

6. Does your country have a national gender equality and/or women’s empowerment policy or strategy in place?  

Yes, Tanzania has Women and Gender Development Policy (2000) and its implementation strategy was developed.

7. Has advocacy been undertaken for gender-sensitive and pro-female policy-making and legislation on nutrition?  

Yes, PANITA had conducted a workshop with Editors to discuss the issues of Gender and Nutrition, and The roles of media in addressing gender in relation to nutrition.

---

**Annex 4: Advocacy and communication for nutrition**

1. Do you engage with the media to amplify key messages, create awareness and demand for action on nutrition?  

Yes

- At the national level TFNC in collaboration with other stakeholders engage with media to provide nutrition education to general public through TV and radio programs, conduct media seminars and press conferences to ensure correct nutrition messages reach the community. Media seminar was conducted during the 2017 world breastfeeding week.
- Nutrition implementing partners has been supporting media engagement at RS and LGAs levels through; Examples; IMA World Health-ASTUTE project implemented in 5 regions of Tanzania through it engaged local medias to promote social and behaviour change communication using radio spots. Also CUAMM signed contracts with 3 local media in its implementing region to air nutrition education sessions and jingles.
- PANITA - SUN Civil Society Alliance in Tanzania conducted an interactive discussion with Journalists on their role in promoting food security and better nutrition to the community during the commemoration of the World Food Week October 2017. This was followed by the press release which carried key messages to Government, Development Partners and General Public.

2. Are parliamentarians actively contributing to improve  

Yes
There is a Parliamentary Group on Nutrition Food Security and Children Rights (PGNFSR); recently, their Strategic Plan of 2018 - 2023 has been revised with the support from various stakeholders include ASPIRES and PANITA.
The group has been actively involved in various issues include;
- Contributing to budgetary debate, exemplified by the Report of Social services and community development committee when contributing on estimates of income and expenditure of the MoHCDGC for the fiscal year 2017/18. (The chairperson of the group and other four committee members are also members of the PGNFSCR).
- Advocating for nutrition through one on one discussion with line ministers and other key decision makers.
- Actively engage on resource mobilization for nutrition at council level. For example follow up on the implementation of TZS. 1000 per under five children as per budget guideline.
- Promoting biofortified crops in the constituent.

### 3. Is there one or several nominated Nutrition Champions (including for example high-level political leaders, celebrities, journalists, religious leaders etc.) actively engaging to promote nutrition at national and/or local level?
Yes
The Vice President of United Republic of Tanzania is the champion for Nutrition at National level – Her Excellency Samia Suluhu Hassan.
The Vice President initiated the signing of compact agreement between the Government and Regional Commissioners to ensure implementation of nutrition in Regions and Councils.

### 4. Have you documented advocacy successes and best practice in reducing malnutrition through multi-sector and multi-stakeholder action, and shared them nationally and/or with regional and global partners?
Yes even though not at a very satisfactory level, as most of the successes are shared through stakeholders’ meeting with very few being documented for learning at national, regional and global levels. There is a need for more documentation of the successes and best practices to facilitate learning globally.
Example of the documented successes in the reporting period include; the results of Assessment of the Mwanzo Bora Nutrition Program (MBNP) Social and Behavior Change Communication Interventions. https://www.africare.org/technical-papers/icf-assessment-report-mwanzo-bora-nutrition-program/
PANITA documented on advocacy initiatives that took place in the country in its September newsletter of 2017 http://panita.or.tz/images/panita/events/docs/Newsletter2.pdf

### 5. Do you plan on organising a high-level event on nutrition in the upcoming period?
Yes
- The 2018 and 5th JMNR Meeting
- Launching of the new 2018-2023 Strategic Plan of the Members Of Parliament Nutrition Champion Group organised by ASPIRES which will involve members of Parliament Nutrition Champion Group, Speaker of the National Assembly and the Development Partner Group for Nutrition to be held between May and June 2018
PANITA is planning to host Graca Machel Trust (GMT) team mission to Tanzania to advocate for improved reproductive, maternal, newborn, child and adolescent health (RMNCAH) and Nutrition.

Annex 5: Participants at the 2018 Joint-Assessment of the national multi-stakeholder platform

<table>
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<tr>
<th>No</th>
<th>Title (Ms./Mr.)</th>
<th>Name</th>
<th>Organisation</th>
<th>Specific SUN role (if applicable)</th>
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