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# Monitoring and Evaluation Report on the Implementation of the Tanzania Covid-19 Socio-Economic Response and Recovery Plan, 2022

Tanzania, United Republic

Ministry of Finance and Planning

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**United Republic of Tanzania**  
**Ministry of Finance and Planning**



**MONITORING AND EVALUATION REPORT ON THE  
IMPLEMENTATION OF THE TANZANIA COVID-19 SOCIO-  
ECONOMIC RESPONSE AND RECOVERY PLAN**

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**FINAL REPORT**  
**AUGUST 2022**

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## ACRONYMS

ATC	Arusha Technical College
CAWM	College of African Wildlife Management, MWEKA
CBWSOs	Community Based Water Supply Organizations
COEHME	Centre of Excellence in Health Monitoring and Evaluation
DIT	Dar es Salaam Institute of Technology
DP	Development Partners
EMD	Emergence Medical Departments
FDC	Folk Development Colleges
ICT	Information and Communication Technology Unit
ICU	Intensive Care Unit
IFMIS	Integrated Financial Management Information System
IMF	International Monetary Fund
KIPs	Key Performance Indicators
LGAs	Local Government Authorities
M&E	Monitoring and Evaluation
MNRT	Ministry of Natural Resources and Tourism
MoEST	Ministry of Education, Science and
MoFP	Ministry of Finance and Planning
MoH	Ministry of Health
MRI	Magnetic Resonance Imaging
MU	Mzumbe University
NCAA	Ngorongoro Conservation Area Authority
NCT	National College of Tourism
NMT	National Museum of Tanzania
PAAAs	Project Authority Areas
PO-RALG	President's Office-Regional Administration & Local
Government	
RCF	Rapid Credit Facility
RSs	Regional Secretariats
RUWASA	Rural Water Supply and Sanitation Agency
TANAPA	Tanzania National Parks Authority
TANePS	Tanzania National e-Procurement System
TASAF	Tanzania Social Action Fund
TCRP Tanzania	COVID-19 Socio-economic Response & Recovery Plan
TFSA	Tanzania Forest Services Agency
TTB	Tanzania Tourist Board
TAWA	Tanzania Wildlife Management Authority
TZS	Tanzanian Shilling
URT	United Republic of Tanzania
UWASSA	Urban Water Supply and Sanitation Authority
VETA	Vocational Education and Training Authority
WHO	World Health Organization



## EXECUTIVE SUMMARY

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The Government of the United Republic of Tanzania received a concessional loan amounting to USD 567.25, equivalent to TZS 1,291.74 billion from the International Monetary Fund (IMF) under the Rapid Credit Facility (RCF) to implement the Tanzania COVID-19 Socio-economic Response and Recovery Plan (TCRP). The main purpose of the TCRP was to address socio-economic effects of COVID-19 pandemic in the country, focusing on revamping mostly affected sectors of the national economy namely: education, tourism, health and water. In addition, the project aimed at supporting poor households through Tanzania Social Action Fund (TASAF). The implementation of TCRP involved multiple stakeholders across the Government with the Ministry of Finance and Planning (MOFP) being the overall coordinator.

This evaluation involved a combination of data collection methods to inform the preparation of this report. It involved consultation meetings with stakeholders from the five priority sectors that were held between 23rd and 24th June 2022, which also included review of sectoral implementation reports. It also involved physical verification of the projects and interviews with representative from implementing institutions, which was conducted from 25th June 2022 to 9th July 2022. The physical verification and interviews with representative from implementing institutions were conducted in twenty-six (26) regions and 184 Local Government Authorities (LGAs). Although physical verifications focused on projects implemented by all sectors in the regions, more attention was given to projects that were observed to be lagging behind during quarter two evaluation that was conducted between January and March 2022). This evaluation covered cumulative performance since the program's commencement in October 2021.

It was observed during this evaluation that some of the projects were completed, most were at a very final stages and few in the middle stages. It was also noted that the resources received by all implementing sectors were already committed and implementation of some projects crossed the 2021/22 financial year and still on-going due to the nature of the projects. The reports and available contracts showed also that contractors and suppliers have agreed to hand in completed projects between July and September 2022. The specific observations across the priority sectors were as follows.

**Health Sector:** A total of TZS. 448.79 billion was allocated to implement construction/renovations, procurement, installation and research projects as well as recruitments of contract staff to provide technical support and orientation to available staff in specific areas of expertise. The implementation was done at tertiary and secondary levels that received TZS. 263. 7 billion as planned and at primary levels that received TZS. 137.6 billion, equivalent to

74.3 percent of the target. The construction or renovation of 44 ICU at secondary and tertiary levels received a total of TZS 15.1 billion and implementation status varied across institutions and levels. While implementation status at Consultant and Zonal Hospitals ranged from 75 to 100 percent and 97 to 100 percent respectively, implementation at the Regional Referral Hospitals ranged from 60 to 100 percent. Construction/renovation and retooling of 21 EMD that received a total of TZS.10.21 billion were all at the last stage of implementation. The OPD, which was initially designed to be implemented by the Ministry of Health, was later transferred to the respective Regional Referral Hospitals. Though, this situation has caused delays to start implementation, the speed of implementation was good and ranged between 11 and 50 percent. The contract documents and reports indicated that these projects will be completed before September 2022. The construction of 26 staff houses was 86.5 percent and that of services infrastructure was 70 percent. The procurement of EMD and ICU equipment, which received a total of TZS 60.8 billion; diagnostic equipment which received a total of TZS 86.8 billion and; vehicles that was allocated TZS 69.1 billion were all at the delivery stages and most were already delivered.

The strengthening of seven (7) Telemedicine Hubs and Regional Telemedicine Centre Rooms in 16 Regional Referral Hospital was at 95 percent of its implementation. A total of 137 contract staff, equivalent to 78 percent of the target were already recruited in all Regional Referral Hospitals. The secondary and tertiary levels institutions were allocated TZS. 6.1 billion to implement five (5) research projects for the development of vaccines and production of alternative medicine including development of laboratory for quality assurance. During this evaluation, all of the five (5) research projects had received Ethical Clearance. At the primary level, a significant number of construction and renovation projects were completed and some were at final stages of implementation. For instance, 18.8 percent of all EMDs, 28.6 percent of ICU and 40.7 percent of all staff houses were completed.

Water Sector: The sector was allocated TZS 139.4 billion for the improvement of water supply in rural and urban areas. Out of that, TZS 25.3 billion were directed to water projects in urban areas, TZS 79.12 billion to water projects in rural areas and 34.92 for acquisition of equipment. During this evaluation, it was observed that implementation was at varied but final stages of implementation. On average, implementation status of all 218 projects in rural and urban areas were between 75 and 98 percent of implementation respectively. The construction of water tanks, pump houses, and Domestic Points was generally at 96 percent of implementation while 75 percent of constructed water schemes were completed and were in use. Only a few projects such as Mpimbwe water scheme in Mlele District and Murufyiti water

schemes in Kasulu were in the initial stage of construction but the speed was good and contracts and reports indicated that it will be completed by September 2022. In most of the projects, the laying of water pipes and connection of water pipes, installation of electricity, and alternative energy (solar energy) were completed. The Ministry of Water also acknowledge receipt of 4 sets of groundwater exploration equipment as planned, 5 sets of hydraulic excavators as envisaged and 4 out of planned 25 sets of bore drilling rigs

*Education sector:* A total of TZS 368.902 billion allocated for implementation of projects at basic education and tertiary levels as well as vocational training. Note that, out of the total allocation to the education sector, TZS 304 billion was allocated to implement projects for basic education and TZS 64.902 for secondary and tertiary levels projects. The results of this evaluation showed that the construction of all 12,000 secondary school classrooms (that were planned) were completed and are in use. Also, out of the 50 dormitories to be constructed, the construction of three (3) dormitories for tertiary and secondary levels were completed and forty-six (46) dormitories were at various stages of completion with only one being at the foundation stage. Completion of construction of four (4) Regional Vocation Training Colleges (RVTC) in Rukwa, Njombe, Geita, and Simiyu and construction of twenty-five (25) District Vocational Education Training Colleges (DVTC) were progressing well.

*Prime Minister's Office* Labour, Youth, Employment and Persons with Disability received a total of TZS 3,468,603,626.00 for the renovation and rehabilitation of four (4) Colleges of Vocational Skills for People with Disabilities. During this evaluation, the implementation was at 57.5 percent.

The Tourism Sector was allocated a total of TZS 90.2 billion to implement different projects. During this evaluation, a total of TZS 89.17 billion, equivalent to 98.86 percent was already received by the sectoral ministry. Overall, more than 85 percent of projects related to road construction and rehabilitation were completed. The procurement of all equipment and vehicles was at the delivery stage and more than 70 percent of the equipment were already received. The construction of the gates and revenue collection points in the national parks and game reserves were completed. Some of the funds were used for the rehabilitation of airstrips and construction of cottages for guests, which both were at 90 percent (i.e. the finishing stage).

The completed projects were the launching of the Royal Tour Program and the construction of traditional houses at Makumbusho village in Dar es Salaam. Others were training of quality assessors and grading of accommodation service providers (hotel assessors); COVID-19 protective

gears that were distributed to 10 tourism associations with a total of 16,056 members and; Training of Trainers to 1,787 enumerators.

Tanzania Social Action Fund (TASAF) received a total of TZS 5.54 billion to provide financial support to 34,641 poor households that were severely affected by COVID-19. During this evaluation, it was reported that there were more households that were severely affected by COVID-19 than initially planned. The funds were disbursed to beneficiary households in four windows. During the first window, a total of 51,290 households were supported and in the second window the household reached 51,163 while the third and fourth windows supported 11,377 and 884 households respectively.

In view of stakeholders from implementing institutions, beneficiaries and observations done during the physical verifications, successful implementation of projects under TCRP will significantly improve the quality of services, increase access to services and reduce congestions that existed due to limited number of services or space. For instance, in the health sector, some of the services that were either not available or available at a small scale at primary and secondary level health facilities such as EMD, ICU and advanced X-Rays will be accessible in regional referral hospitals and primary level health facilities thereby reducing congestions that were existed at Consultant, Zonal and National hospitals. The construction of classrooms will significantly address congestions of pupils while construction of dormitories will not only reduce congestion but also create conducive environment for students with special needs. Access to clean and safe water in communities and touristic centre will significantly facilitate control of the spread of COVID-19 virus. Poor communities were enabled to afford food necessary for strengthening their body immunities and COVID-19 protective gears such as masks and sanitary which were critical for control of the spread of COVID-19 and other communicable disease.

In general, implementation of projects was in a good state of implementation in the sense that most of the projects were completed, some were at the final stages and only a few were at average implementation levels. All the fund received by implementing sectors were already committed and some projects are still ongoing. In view of the contracts and implementation reports most of projects that were in the last stages of implementation were reported to be completed by July 2022 and only a few will be completed by September 2022. In the same vein, procurement of equipment was at the delivery stages and most were already delivered. The procurement of vehicles was to be delivered in two phases and first batch was already delivered in June 2022. It is recommended that; the relevant sectors should enhance follow up to ensure that all projects are completed in the agreed time as stipulated in the contracts.

## CHAPTER ONE: INTRODUCTION

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### 1.1. Background

In September 2021, the Government of the United Republic of Tanzania received a concessional loan worth USD 567.3 million from the International Monetary Fund (IMF) to implement the Tanzania COVID-19 Socio-economic Response and Recovery Plan (TCRP). The funds were initially received under two windows namely Rapid Financing Instrument (RFI) accounting for 66.67 percent of the quota and RCF which accounted for 33.33 percent of the quota as approved by the Executive Board of IMF on 7th September 2021. Further discussions were conducted which resulted to the Board's approval for RCF/RFI swap on 12th November 2021 that replaced the previous application of RFI and confirmed disbursement of the fund in full concessional terms with zero interest under RCF. The swap culminated into loss of local currency value equivalency from the earlier estimate of TZS 1,310.65 billion to actual amount received of TZS 1,291.74.

The main purpose of the TCRP was to address socio-economic effects of COVID-19 pandemic in the country, focusing on revamping the mostly affected sectors of the national economy in both Tanzania Mainland and Zanzibar. These sectors are education, tourism, health and water. The Plan also aimed at supporting poor households who are beneficiaries of the Tanzania Social Action Fund (TASAF) as well as empowerment of youth, women and disabled. The money was intended to provide needed fiscal space for 2021/22 to implement targeted measures to respond to the health crisis and mitigate the socioeconomic impact of COVID-19.

The mostly affected sectors were conceived as priority sectors and were allocated funds to implement various interventions. The interventions aimed at: improving availability and access of safe and clean water; reduce congestion in schools and health facilities; increasing access to quality health services; increase vaccination uptake; support to vulnerable households; and improve quality of services in the tourism industry to promote tourism.

Each of the five sectoral ministries was responsible for coordinating a package of interventions designed to address COVID-19 related challenges in the relevant sector. The Prime Minister's Office in collaboration with the Ministry of Finance and Planning played the overall implementation coordination. The specific roles for the Ministry of Finance and Planning were to facilitate timely flow of funds, monitoring and evaluation of the implementation process, updating the sectors for continuous improvement and ensuring adherence to fund's conditionality as stated out in the Letter of Intent signed between the Government and IMF.

## **1.2. Objective of Monitoring and Evaluation of TCRP Projects**

The main objective of the Monitoring and Evaluation of the TCRP projects was to inform the programme performance indicators and contextual issues facilitating or impinging the implementation of the project interventions for continuous improvement and realisation of the programme goal. The following specific objectives were implemented to realise the main objective:

- i. To evaluate the implementation process of projects under TCRP for continuous improvement to realise the intended objective timely
- ii. To determine the contribution of projects under TCRP on increasing availability and access to safe and clean water
- iii. To determine the contribution of projects under TCRP on addressing congestion in schools
- iv. To determine the contribution of projects under TCRP on increasing access and quality of health services
- v. To determine the contribution of projects under TCRP on vulnerable households (enhance safety nets); and
- vi. To determine the contribution of projects under TCRP on improving quality of services in the tourism industry.
- vii. To examine the contribution of projects under TCRP on improving the quality of health and education services for disabled groups

## **1.3. Expected Outcomes of the TCRP**

The implementation of the TCRP was expected to produce the following results for each of the key priority sectors as shown in **Table 1** below:

*Table 1: Expected Outcomes of the implementation of TCRP*

Outcome Area	Expected results
Health	<ol style="list-style-type: none"> <li>1. Improved inpatients and outpatients' services of hospital emergency and critical care.</li> <li>2. Improved diagnostic services.</li> <li>3. Improved vaccine supply, delivery and mass campaign.</li> <li>4. Strengthened port of entry.</li> <li>5. Improved health facilities.</li> <li>6. Enhanced operational research.</li> </ol>
Education	<ol style="list-style-type: none"> <li>1. Improved learning of pupils in classrooms and dormitories through decongestion.</li> <li>2. Improved access to teaching and learning materials particularly for pupils with special needs.</li> <li>3. Improved teaching and learning environment for students with special needs.</li> </ol>
Tourism	<ol style="list-style-type: none"> <li>1. Enhanced operational support to the most affected institutions in the tourism industry.</li> <li>2. Strengthened tourism market and provision.</li> <li>3. Improved business adherence to safety and international health standards.</li> <li>4. Strengthened private sector actors' engagement in tourism sector through the provision of the COVID-19 relief-training package.</li> <li>5. Strengthened digital platform for tourism statistics.</li> </ol>
Water	Improved water service availability especially in populated areas and fast-growing rural centres to facilitate cleanliness as basic and initial means of fighting COVID-19.
Youth, women and disabled empowerment	Improved business environment for Small and Medium Enterprises by constructing business places for youth, women and people with disabilities.
TASAF	Improved livelihood to poor households to meet their basic needs through provision of cash transfer.

#### **1.4. Budget Execution**

The budget approved by the Parliament for the implementation of TCRP to address the socio-economic effects of COVID-19 was 1,310.65 billion



shillings. However, the actual amount received from IMF under the RCF window was 1,291.74 billion shillings, equivalent to USD 567.25 million. The amount received was allocated to the most affected sectors to finance the implementation of interventions in the plan which addresses the socio-economic effects of COVID-19. Out of the amount received, 230.18 billion shillings were transferred to the Revolutionary Government of Zanzibar and 1,061.6 billion shillings were directed to the most affected sectors in Tanzania Mainland.

During this evaluation, MOFP had disbursed a total of 1,242.82 billion shillings equivalent to 96.2 percent of the total budget. Out of the amount disbursed, 832.03 billion shillings were capital spending and a total of 410.78 billion shillings were current spending. The disbursement of remaining funds which amounts to 48.9 billion shillings shall continue upon receipt of the request from the beneficiary sectors with valid and eligible documents such as procurement contracts, invoices and receipts. The summary of disbursement to beneficiary sectors is shown in **Table 2** below.

*Table 2: Summary of RCF Disbursement*

RESPONSIBLE SECTOR/MINISTRY	RCF RESOURCES APPROVED BUDGET	AMOUNT DISBURSED	TYPE OF SPENDING		% OF RELEASE
			CAPITAL SPENDING	RECURRENT SPENDING	
Water	139.35	139.35	139.35	0	100.0%
Health- MoH	263.73	263.73	122.26	141.47	100.0%
Health- PO- RALG	185.06	137.59	0	137.59	74.3%
Education -MOEST	64.90	64.48	35.37	29.11	99.4%
Education - PO- RALG	304.00	304.00	304	0	100.0%
PO- RALG (Youth, women and disabled empowerment)	5.00	5.00	0	5	100.0%
TASAF -Social Protection	5.54	5.54	0	5.54	100.0%
Tourism	90.20	89.17	2.358	86.815	98.9%
Prime Minister's Office to the disabled people with special needs	3.47	3.47	0	3.47	100.0%
Transfer to Zanzibar	230.18	230.18	228.7	1.6	100.0%
MOFP -Coordination and Administration	0.30	0.30	0	0.3	100.0%
<b>Total</b>	<b>1,291.73</b>	<b>1,242.81</b>	<b>832.03</b>	<b>410.78</b>	<b>96.2%</b>

Source: Ministry of Finance and Planning, 2022



## **1.5. Structure of the report**

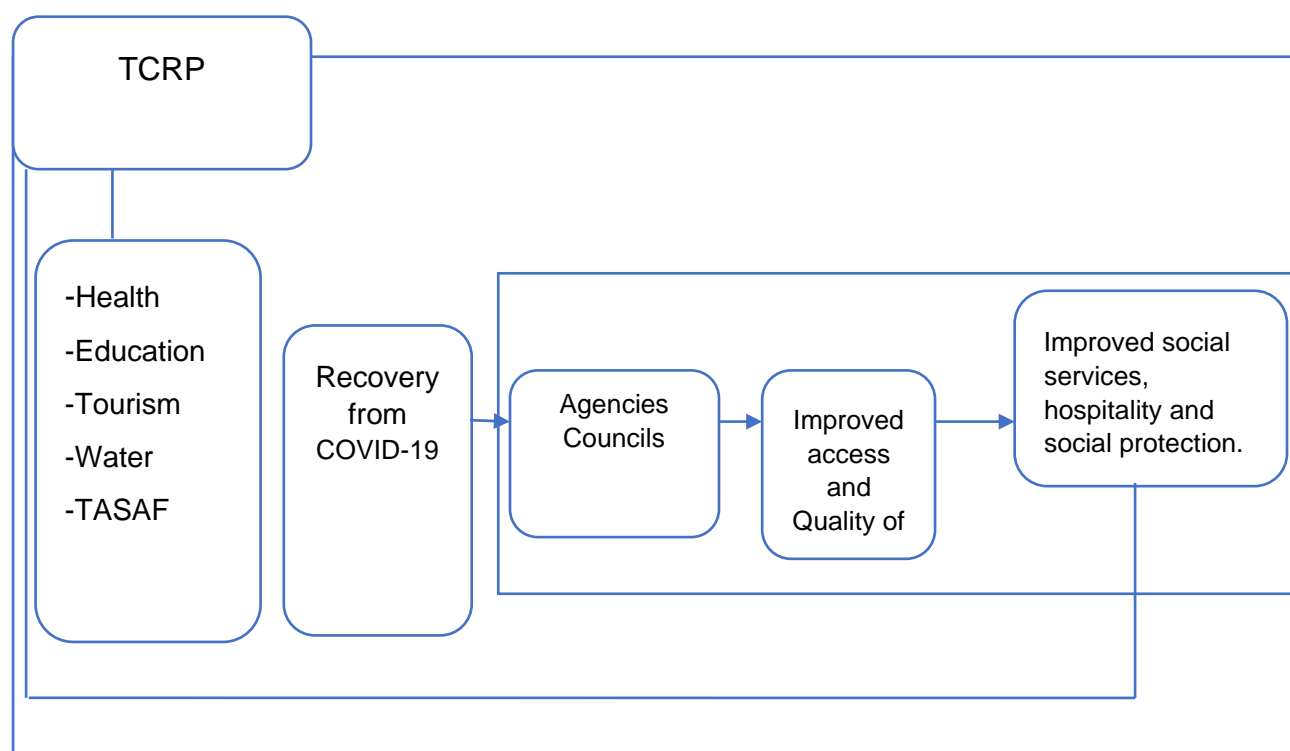
The executive summary presented in the preliminary pages of this report provide a summary of the scope, process, observations and recommendation. The content is organised in chapters as follows: Chapter one presents the background of the projects under TCRP, the objective of monitoring and evaluation, and the budget execution; Chapter two provides the method and approach; Chapter three presents the results, challenges and lessons learned for all beneficiary sectors; Chapter four presents transparency and commitments, and chapter five presents conclusion and recommendations.

## CHAPTER TWO: APPROACH AND METHOD

### 2.1 Design and Evaluation Framework

This evaluation was guided by the project's implementation framework of the Tanzania COVID-19 Socio-economic Response and Recovery Plan. The framework presents the key aspects of the relevance of the projects under TCRP, the implementation process, and the expected results. **Figure 1** presents the adopted system model for the Tanzania COVID-19 Recovery Plan.

*Figure 1: Adopted system model for the Tanzania COVID-19 Recovery Plan*



### 2.2 Data Collection Strategy and Approach

The Ministry of Finance and Planning (MOFP) is the overall coordinator of implementation of projects under the TCRP and Mzumbe University (MU) through its Centre of Excellence in Health Monitoring and Evaluation (COEHME) served as the external evaluator. The evaluation process was interactive and consultative, which was useful in validating information collected from different sources. The data collection methods involved consultations, documentary review, physical verifications, and interviews. It used a combination of qualitative and descriptive statistics to explain the implementation process, the attainment, related results and perceived outcomes.

## 2.3 Documentary Review

Sectoral specific reports on implementation of projects under TCRP that were prepared by relevant ministries were reviewed. The review of the reports aimed at shading lights on status of implementation status as well as the attainment reached toward planned targets as reported by sectors. The findings from documentary review was useful for follow up during consultation workshop as well as planning for physical verification and interviews.

## 2.4 Consultation Workshop with Sectoral Ministries and Agencies

Prior to physical verifications, consultation workshops were conducted to validate the findings generated from the review of reports and collection of more in-depth information about the implementation process, status towards targets, challenges encountered at the coordination level and lessons learned. The key findings from the workshop were very informative and guided the implementation of physical verifications and finalization of the report.

## 2.5 Physical Verifications

Two physical verification visits were conducted, one in the second quarter and another one in the last quarter of the project implementation. As indicated in quarter two report eighteen (18) regions and fifty-two (52) LGAs were visited for physical verifications. In quarter three, a total of twenty-six (26) regions and 184 Local Government Authorities (LGAs) were visited for physical verification. The increase of the scope of the sample was important for generalization and capturing a wider range of contextual issues. The physical verifications for quarter three was conducted between June and July 2022.

### **Approach for Physical Verification**

A total of 46 enumerators were recruited and oriented on physical verification tool and interview guide. Enumerators were then split into 10 teams with four (4) to five (5) members. Each team comprised of a team leader and teams with four (4) members was assigned to collect data in two regions and that with five (5) members was assigned three regions. At least 80 percent of projects in the region were physically verified. Data was collected for 14 days.

The teams started by paying a courtesy call to the offices of the Regional Administrative Secretaries, District Executive Directors, and the Management of the relevant sectors for implementing institutions that were not operating directly under the local government and regional secretariat. Thereafter, the teams visited the relevant projects in the relevant regions and districts. The teams observed the actual projects' sites and checked the status of implementation using the tools developed to determine the implementation status. The physical verifications involved in-depth discussions with staff

responsible for supervising the implementation of projects activities under TCRP.

In addition, the team visited the headquarters of the sectoral ministries and specific government agencies and institutions implementing projects under TCRP. The agencies and institutions visited include the Rural Water Supply and Sanitation Agency (RUWASA) and; the Urban Water Supply and Sanitation Authority (UWASSA). Others were the Jakaya Kikwete Cardiac Institute (JKCI), Ocean Road Cancer Institute (ORCI), Muhimbili National Hospital (MNH), and National Institute for Medical Research (NIMR) and Muhimbili Orthopaedic Institute (MOI). Also, visits were made to the Ngorongoro Conservation Area Authority (NCAA), National College of Tourism (NCT), National Museum of Tanzania (NMT), Tanzania National Parks Authority (TANAPA), and the Vocational Education and Training Authority (VETA).

## **CHAPTER THREE: RESULTS ON IMPLEMENTATION STATUS, CHALLENGES AND LESSONS LEARNED**

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### **3.1 Introduction**

This chapter presents the results on implementation status of projects funded under TCRP, challenges encountered in the implementation process and lessons learned. The results are presented in response to the objective of this evaluation by sectors. The chapter start with the health sector with two main components namely tertiary and secondary level, and primary level. This is followed by water sector and education sector- which consists of basic education, tertiary and vocational training centre, and vocational collages for persons with disability. The last part of the chapter presents results on tourism, social protection and petty traders.

### **3.2 Health Sector**

#### **3.2.1 Overview**

Projects under the health sector were allocated a total of TZS 448.79 billion to implement various projects at tertiary, secondary and primary levels of the health systems. To enhance efficiency and effectiveness in the use of funds within the project's timeframe, the Ministry of Health (MOH) which is in charge for the secondary and tertiary health levels coordinated the implementation of TZS 263.7 billion, equivalent to 58.8 percent of the total RCF resources allocated to health sector projects. The President's Office Regional Administration and Local Government (PORALG) coordinated the implementation of TZS 185.1 billion, equivalent to 41.2 percent. Funds under the MOH were directed to implement 619 projects out of which 609 were contract-based and 10 were for research, vaccinations and recruitment of short-term staff that were implemented directly by relevant institutions. The funds under PORALG were directed to implement 259 projects. Except for the 10 projects, all projects in the primary, secondary and tertiary levels involved renovation, construction and/or procurement of EMD, ICU, Staff Houses, Radiology, Telemedicine, and Equipment for ICU, EMD, radiology and telemedicine.

#### **3.2.2 Secondary and Tertiary Level**

During this evaluation, the MOH acknowledged to have received 100 percent of the funds (TZS 263.7 billion) allocated to health projects at secondary and tertiary levels. The MOH has disbursed TZS 239.8 billion, equivalent 91 percent to relevant institutions and hospitals. Generally, the number of projects entered during this evaluation was 608 with the value of TZS. 255.6

billion. Also, it was noted that 1,003 contracts worth TZS. 256.9 billion (equivalent to 100 percent) were scrutinised and submitted to the Ministry of Finance and Planning for uploading to the website as required. The remaining amount pertaining to non-contractual interventions were performed by the Ministry, which include technical trainings, research and temporary contracts.

### **3.2.3 Implementation Status of Specific Projects**

The findings show that on average, all projects implemented and supervised by the Ministry were at 70 percent. This was verified through the physical visit of implementation sites in all 26 regions of mainland Tanzania. The assessment during physical verification of implementation sites indicated that the renovation and construction of EMD and ICU was 85 percent, staff houses was 86.5 percent, the OPD and Maternal and Child Health Building was 72 percent. Procurement of all equipment was in the delivery stage and 60 percent of the equipment were already received.

#### **Renovation and Construction Projects**

A total of TZS 54.9 billion was allocated for construction and renovation projects in hospitals at secondary and tertiary levels. During this evaluation, it was reported that, TZS 51.5 billion was already disbursed to relevant institutions and hospitals to support the construction, extension and renovations of infrastructures. This involved 44 Intensive Care Units (ICU), 21 Emergence Departments (EMD), 7 Regional Referral Hospitals, 1 Special room at Mirembe Hospital, 1 Centre for Outbreak and Diseases at Kisopwe, Dar es Salaam and 1 Centre for the provision of public health education at Ndejengwa in Dodoma. Specifically, the implementations status of such interventions was as follows:

#### **Construction and Renovation of ICU**

Findings show that the construction or renovation for 44 ICU were at various final stages of implementation. The implementation status ranges between 75 percent and 100 percent for the Specialized Hospitals, between 97 percent and 100 percent for the Zonal Hospitals, and between 60 percent and 100 percent for the Regional Referral Hospitals.



*Figure 2: Constructed ICU at Mawenzi Regional Referral Hospital*

The number of construction and renovation projects varied across levels. The implemented projects include 4 ICUs at Muhimbili National Hospital including Theatre and 24 rooms for the Highly Dependent unit, 7 ICUs at Special Hospitals, 7 ICUs at Zonal Referral Hospitals and 25 ICUs at Regional Referral Hospitals. The quality of most of the ICU projects was generally good indicating efficiency in the use of the funds. The ownership of projects by

*Figure 3: Case 1 Mawenzi Regional Referral Hospital*

At Mawenzi RRH, the target was to renovate one ICU with the capacity of 12 beds. The management of Mawenzi Regional Referral Hospital used Force Account and prepared drawings by themselves. They then hired a *local Technicians (fundis)* through single source. Total amount of TZS. 149 million that was allocated for the project was received and used. During physical visit, the amount spent in implementing the project was TZS 253, 637, 942/=. This implies that the hospital using its own sources had contributed TZS. 104, 637, 942/=.

relevant institutions was high such that some have even added more funds to get a high level of output beyond what could have been realised by TCRP funds alone, indicating actual response of TCRP projects. The interviews conducted with officials in relevant institutions and hospitals revealed that the construction and renovation of ICU infrastructure will increase bed capacity for ICU services from 68 to 88 at Muhimbili National Hospital; from 21 to 114 at Special Hospitals; from 45 to 131 at Zonal Hospital and from 73 to 655 at

Regional Referral Hospitals.

In view of the officials interviewed at different levels, several factors facilitated the realisation of such magnitude of projects at a short period of time (i.e. less than one year). This included high level of project ownership by implementers, close follow-up by relevant officials from the MOH, good teamwork between different levels involved in the implementation of the projects, transparency and timely disbursement of funds. This enabled the utilisation of TZS One (1) billion for projects implemented at Muhimbili National Hospital, TZS 1.9 billion for projects implemented at Specialized Hospitals, TZS 1.5 billion for projects implemented at Zonal Referral Hospitals, and TZS 10.6 billion for projects implemented at Regional Referral Hospitals. In view of officials in the relevant institutions and hospitals, the improved ICU services will enhance capacity and quality of ICU services in the country as indicated in figure 3 above.

*Figure 4: Respondents perspectives on the improved ICU services*

- Increase quality of ICU services and reduce complaints against the hospital and the government
- Reduce the number of patients in need of referrals. The number of those who can be admitted will increase from 6 to 12.
- Increase access to ICU services and thus reduce costs of treatment to patients.
- Increase hospital revenues for continuous improvement of ICU



## **Construction and Renovation of EMD**

A total of TZS 9.2 billion was allocated to implement 21 EMD projects at different levels. During this evaluation, the implementation was at various stages of completion. The construction of one EMD at Mirembe Specialized Hospital was at 70 percent of its implementation. The allocated amount for the construction of one EMD at Mirembe Specialized Hospital was TZS 400 million. In the view of relevant officials at Mirembe and MOH, the EMD completion will enable availability of 17 beds at Mirembe Special Hospital, which did not have one.

*Figure 5: EMD room with installed equipment at Muhimbili National Hospital*



Mbeya Zonal Hospital was allocated TZS 306.3 million for the renovation of the EMD. During this evaluation, the implementation was at 90 percent. The completion of this project will enable an increase in bed capacity from 9 to 20. In view of relevant officials, the increase in bed capacity will allow the hospital to reduce congestion and address more cases than before, where some cases which were supposed to be admitted were served as outpatients.

Regional Referral Hospitals across the country received a total of TZS 9.5 billion for the construction and renovation of 19 EMDs. During this evaluation, the implementation status ranged from 60 percent to 100 percent. In view of the respondents, all the funds were already committed, and contractors were working hard to finalise the work before the end of June 2022. Relevant officials in Regional Referral Hospitals pointed out that the construction and renovation of 21 EMD will increase bed capacity from 49 to 425 and enable Regional Referral Hospitals to accommodate more cases than before. In view of officials in the relevant institutions, the improved EMD will increase access and quality of EMD services and records across the country.

*Figure 6: The Constructed EMD building at Morogoro RRH*



## **Construction of OPD and Maternity Block**

A total of TZS 15 billion and TZS 6 billion were allocated for the construction of five OPD in five Regional Referral Hospitals and two Maternity Blocks in two Regional Referral Hospitals respectively. The construction of OPD was implemented in Ruvuma (Songea), Mtwara (Ligula) Lindi (Sokoine), Kigoma Regional Referral Hospitals and Ukerewe Special Hospital. Initially, the role of



constructing the OPD in relevant hospitals was of the Ministry of Health but was later transferred to the respective Regional Referral Hospitals. During this evaluation, the implementation status ranged from 11 percent to 50 percent. The findings from physical verifications showed that the speed of construction was high and the allocated funds were already committed to contractors and suppliers of the materials. In views of officials and contractors found in the field during physical verification, the construction was expected to be completed before September 2022 through engagement of more technicians/fundi. In the same vein, the status of construction of Maternity Block at the Regional Referral Hospital in Tabora (Kitete) and Katavi was at 72 percent. Observably, during the physical verification, the speed of implementation was good and was expected to be completed by September 2022.

*Figure 7: Construction of Maternity Block at Tabora RRH*



### **Construction and Renovation of Staff Houses and Services Infrastructure**

The construction of 26 staff houses and services infrastructure at Mirembe Special Hospital was allocated TZS.2.3 billion and TZS. 3 billion respectively. During this evaluation, it was observed that overall, the implementation status



*Figure 8: Construction of staff houses at Tumbi RRH*

of staff houses was 86.5 percent and that of services infrastructure was 70 percent. It was reported that all Hospitals have received all the money allocated for the construction of staff houses and that all the money was already committed to contractors and suppliers. Also, it was reported that the delays in construction of some staff houses were contributed by delays in securing plots for implementation of the

projects. During the time of this evaluation, all hospitals had secured the plots and the construction was completed by 100%. The construction of services infrastructure at Mirembe Consultant Hospital involved inpatient ward (80 percent), doctors' rooms (75 Percent) and staff houses (89 percent). During physical verification, it was observed that the speed of construction was high and according to relevant officials at Mirembe, the construction was expected to be completed by end of August 2022. It was also reported that all funds for the construction were already committed to contractors and suppliers. In the view of officials in the relevant hospitals, constructed staff

*Figure 9: Staff houses at Morogoro RRH*



houses are expected to enhance staff morale, access to health services throughout the day and staff performance.

### **Construction of Centres for Communicable Diseases and Public Health Education**

The construction of the centre for communicable disease at Kisopwe Dar es Salaam with a budget of TZS 1.4 billion was at the initial stage of implementation. Observably, during physical verification, the implementation status was only 5%. In view of the MOH relevant officials, the reason for the delays in the start of implementation was the failure to procure an appropriate supplier on time. However, in view of the relevant officials and the contractor at Kisopwe, more labour power was engaged to ensure that the construction is completed not later than November 2022.

The Ministry of Health was also implementing the construction of a Public Health Education Block at Ndejengwa in Dodoma with a budget of TZS 2.1 billion. During this evaluation, the implementation status was 18 percent. The reason for the delay was failure to secure contractors who could implement at the available budget allocation. The allocated budget was later realised to be insufficient to cover costs for the consultant and contractor until the re-scoping was done and revision that enabled implementation to start. In view of the officials from the Ministry of Health, the contractor was given a condition to hire more technicians/fundi and ensure that the work is completed by July 2022. Observably, the speed of implementation suggested that the construction will be completed in the agreed timeframe.

### **Procurements**

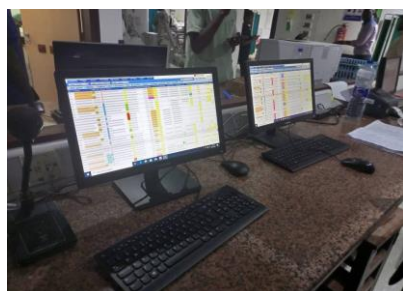
Through TCRP projects, various procurements were done to equip health systems with the capacity to deliver health services in a way that will facilitate the containment of COVID-19. The MOH coordinated and implemented procurement of EMD and ICU equipment that were allocated a total of TZS 60.8 billion, diagnostic equipment that was allocated a total of 83.3 billion, and vehicles that was allocated TZS 17.4 billion. Also, the MOH coordinated the procurement of laboratory reagents including diagnostic equipment and development of electronic data systems that were allocated TZS 2 billion, and COVID-19 vaccine that included presentation and distribution that was allocated TZS 6.3 billion. Each of these procurements are at different status of implementation as follows:

#### **EMD and ICU Equipment**

The procurement process of EMD and ICU equipment was delegated by the MOH to procurement institutions to ensure efficiency and compliance. In view of relevant officials, the process used for the procurement of EMD and ICU

equipment was that of single sources as stipulated in the National Procurement Guidelines issued by the Public Procurement and Regulatory Authority. It is noted that, although the procurement process was coordinated by the MOH in support of the Procurement Institutions, the funds for the equipment were paid directly by relevant hospitals and institutions. At the time of this evaluation, a total of TZS 83.3 billion was disbursed to relevant Hospitals and institutions for the procurement of EMD and ICU equipment.

*Figure 10: Equipment installed at EMD room at Muhimbili National Hospital*



Twelve (12) procurement companies won the tender for the supply of EMD and ICU equipment. These are Anudha Limited, Bahari Pharmacy Limited, Jaffery Ind. Saini LTD, M/S Balyem LTD, and Pacific Diagnostic LTD. Others were Kas Medics LTD, Pyramid Pharmacy, Nairobi X - Ray LTD, Salima Oxygen, Mokasi Medical System and electronic services, M/S Computech-ICS (T) LTD and Lab Equip. At the time of this evaluation, the procurement status was at 60 percent, meaning that most of the equipment were already delivered and the remaining were expected to be delivered soon.

### **Diagnostic Equipment**

The MOH contributed on the procurement of radiology diagnostic equipment, which include five (5) MRI, thirty (30) CT – Scan, thirty-nine (39) Digital X – Ray machines, one (1) mini Angio suite and seven (7) Echo Cardiograph machines. During this evaluation, it was learned that TZS 83.3 billion was allocated to the procurement of equipment, installation, renovation for a period of five years, and construction and renovation of rooms for installation of relevant equipment. The implementation status ranged from 25 percent to 100 percent. A total of TZS 72.78 billion was already disbursed to relevant hospitals and institutions. All procurement processes had been completed and the delivery of the equipment had started from June 20, 2022 and was expected to be completed by September, 2022.

The companies that won the tender for delivery of diagnostic equipment are Pacific Diagnostic Ltd. (Siemens), KAS MEDICS (Del Medica), COMPUTECH - ICS (T) Ltd (GE) and MOKASI Medical System and Electronic Service Ltd. (Philips).

### **Vehicles**

Under the TCRP mechanisms, a total of TZS 69.1 was allocated for the procurement of 503 vehicles. These were 96 vehicles for the Ministry of Health (MOH) and 407 vehicles for the President's Office Regional

Administration and Local Government (PORALG). Out of the allocated amount, TZS 17.04 billion was directed to the MOH and TZS 52.06 was allocated to PO-RALG. A tender was advertised and various suppliers submitted their proposals. In the assessment it was noted that the costs of all applicants were higher than the allocated budget. For instance, the cost of the applicant for the purchase of a basic ambulance was TZS.144.3 million and a special vehicle for vaccines distribution was TZS 163.6 million.

In this view, the MOH opted to find another supplier. In this attempt, UNICEF was approached to support the procurement of the vehicles. After negotiation, UNICEF agreed to supply a Basic Ambulance at the cost of TZS 99.1 million and a special vehicle for the distribution of vaccines at the cost of TZS. 116.2 million. This was a significant reduction. It was reported that a Total of TZS. 13,204,721,269 were saved and enabled to increase the number of vehicles to be purchased from 503 to 663. These are 160 additional vehicles i.e. 39 for the MOH and 121 for PORALG. The vehicles that were planned to be procured are Land Cruiser Hard Tops (262), Basic Ambulance (373), advanced ambulance (20) and Blood Collection Vans (8). In view of the report from the MOH, the vehicles were to be delivered in two phases in which the first phase will be delivered in December 2022.

### **Improvement of Laboratory Services**

A total of TZS 4.9 billion was allocated for the procurement of laboratory reagents, diagnostic machines and development of the electronic data system. The role of procurement of laboratory reagents was transferred to Medical Stores Departments (MSD) because of its expertise. All reagents have arrived; sequencing reagents was already delivered to the National Public Health Laboratory (NPHL) and COVID-19 PCR reagents were kept at MSD and will be delivered upon NPHL request. During this evaluation, 24 out of 28 Regional Referral Hospitals had received Blood gas Analyser while 4 RRH (Bukoba, Sokoine, Katavi, and Maweni) have not received yet. It was reported that the remaining four (4) will be delivered by August, 2022.

During this evaluation, the procurement process of the laboratory reagents had started and was ongoing. On the other side, One Apheresis Machine has been installed at Chato Zonal Referral Hospital and four (4) machines have been procured and delivered to the respective Hospitals (ORCI, MZRH, KCMC and BMC). Further, Plasma Apheresis Machines were delivered to BMH and BMC before 30th June 2022. The consultants for the development of electronic data systems were in the last stage of development as the implementation was at 70 percent.

## **Vaccines for COVID-19**

A total of TZS 6.3 billion was allocated for procurement of vaccines, scrolling, preservation and distribution of COVID-19. Since the Government of Tanzania has continued to receive the vaccines for COVID-19 from COVAX Facility and other donations from friendly countries, such money was used for scrolling, preservation and distribution of vaccines. During this evaluation, it was reported that the MOH had received TZS 5.1 billion for vaccination activities. It was also reported that evaluation of the request made by MSD, which was assigned to implement such a role, was already completed. A total of TZS 1.2 billion was transferred to Mloganzila Hospital for the procurement of medical equipment.

## **Telemedicine Services**

The findings from the report of the MOH that was verified through physical visit of sites show that renovation and procurement of electronic equipment for the strengthening of seven (7) Telemedicine Hubs and Regional Telemedicine Centre Rooms in 16 Regional Referral Hospitals were implemented and was in the final stage of installation. The strengthened hubs were those at Jakaya Kikwete Cardiac Institute, Ocean Road Cancer Institute, Bugando Medical Centre, Benjamin Mkapa Dodoma Hospital, MOI, Muhimbili National Hospital and Mbeya Zonal Hospital. The 16 Regional Referral Hospital were Sekou Toure, Mtwara (Ligula), Rukwa, Kigoma (Maweni), Songwe, Mara, Bukoba, Singida, Mt. Meru, Kitete, Shinyanga, Iringa, Geita, Njombe, Manyara, and Simiyu. During this evaluation, it was reported that a total of TZS. 4.5 billion was already disbursed to relevant institutions. The relevant officials in the relevant institutions commented that Telemedicine services will be very useful as it will enable experts to share and interpret samples and disease names through MRI, CT scan and Digital X – Rays. This situation will help to reduce congestion in more specialised hospitals and enhance access to more specialised services that were initially obtained in more specialised hospitals such as National, Zonal and Consultant hospitals. Observably, the findings from physical verifications showed that the status of implementation of these interventions was at 95 percent, as the ongoing activities during this evaluation was installation. This means that rooms were ready, and equipment were already in place.

*Figure 11: Physical verification team in the Telemedicine Room at Benjamin Mkapa Hospital*



## **Human Resources Development**

During this evaluation, it was reported that the MOH had already received TZS. 1.6 billion for short-term training (i.e. 3 weeks) of 582 staff under the



Emergency Departments and Intensive Care Units; 438 doctors and nurses, 130 Radiographers and 14 Radiography Specialists. During this evaluation, it was reported and verified through physical visits that training for Doctors and Nurses was conducted at Muhimbili University of Health and Allied Sciences (MUHAS) in Dar es Salaam and Catholic University of Health and Allied Sciences (CUHAS) in Mwanza. Training for Radiographers and Radiologists was conducted by teaching hospitals including Muhimbili, Kilimanjaro Christian Medical Centre (KCMC), Bugando Medical Centre, Benjamin Mkapa Hospital and Mbeya Zonal Referral Hospital. During this evaluation, it was learned that the last phase of training was completed in July 2022.

### **Recruitment**

In all Regional Referral Hospitals, the MOH had recruited 137 contract staff which was 78 percent of the target which was 179 staff. The reason for not meeting the target was inadequate supply of Radiographers and Biomedical Technicians. The recruited cadres were 36 Radiographers, 59 Biomedical Technicians and 42 Information and Communication Technologists (ICT). A total of TZS 312,510,000.00 Million was already received and disbursed to Regional Referral Hospital concerning recruitment.

### **Procurement of Medical Equipment by MSD**

Medical Store Department was allocated TZS 7,442,119,430.81 for procurement of Medical equipment such as Digital X-rays, BP machine and NICU equipment for improving health services in various health facilities in the country. The whole amount was already disbursed to the respective institution for implementation. During evaluation, it was reported that procurement of Digital X-rays and BP machine were on going and the delivery was expected to be completed in July and early August 2022 respectively. It was further reported that the delivery process of NICU equipment was expected to be completed in September 2022.

### **Health promotion Services**

The Ministry allocated TZS 5,048,515,100 for strengthening Health promotion in the country. The projects executed include procurement of printing and reprographic machinery, printing materials and ICT equipment. During evaluation, it was noticed that the equipment in question were still at the procurement stage. It was reported that the delivery was expected to be completed by September 2022.

### **Strengthening Port of Entry**

To improve health services in the port of entries, the MOH received TZS 3,186, 394,197 for procurement of Personal Protective Equipment, motor vehicles and motorbikes, Office Furniture and Hardware Servers. During this evaluation, the Personal Protective equipment were already received and

where in use. It was further reported that delivery of motor vehicles and motorbikes, Office Furniture and Hardware Servers were expected to be completed by November 2022.

### **Vaccine Promotion Campaign**

During this evaluation, it was reported that the MOH received TZS 4.5 billion for the COVID-19 vaccine promotion campaign. At the time of this evaluation, TZS 720 million was used for “Participatory and Hurry Up” campaigns for the second phase which was one of the strategies to sensitise people aged 18 and above to take the jab. In view of the relevant official interviewed at MOH, the remaining TZS 3.8 billion will continue to be used through the Benjamin Mkapa Foundation (BMF). The MOH prepared the indicators that will be used to monitor and evaluate the implementation including the Memorandum of Understanding (MoU) between MOH and BMF. The engagement of the MOH was done in line with the National Procurement Guidelines and as advised by the Legal Officer. In other words, the MoH has implemented the engagement process of BMF as advised by the Legal Office.

### **Research and Strengthening Alternative Medicines**

A total of TZS 6.1 billion was allocated for five (6) research projects to generate evidence that will enable the country to develop vaccines and an industry for processing and production of alternative medicine including laboratory for quality assurance. During this evaluation, it was reported that all mentioned research projects were at 60 percent of implementation. The research include *Multicenter Phase 1/2A Double blinded Randomized Controlled, non-inferiority Trial to Assess Safety and Immunogenicity of TANCov1.3.20 SARS – COV 2 Vaccine in Healthy Participants in Tanzania; Immunogenicity following administration of Johnson & Johnson COVID-19 Vaccine in Tanzania; Compassionate COVID-19 treatment project intended to evaluate safety and efficacy of the NIMRCAF, COVIDOL and Bupiji oil– the herbal preparations for the treatment of COVID-19 patients; Pre-clinical study of 45 herbal preparations used in management of COVID 19; Post-COVID-19 Sequelae Study in Tanzania (PCOSET Study): Population-based age-stratified sero-epidemiological investigation of SARS-COV-2 infection in Tanzania*

At the time of this evaluation, TZS. 6.1 billion was already disbursed to respective research institutes. In addition, out of the total allocation to this portfolio, the MOH allocated TZS 1.2 billion to the procurement of equipment and plant for the alternative medicines industry and laboratory for production and quality assurance of alternative medicines. During this evaluation, it was reported and verified through physical visit that the supplier of the plant had been obtained.

### **Savings and Plan for Use**

The commitment and proper management of the procurement process has enabled the MOH in collaboration with the institutions that were contracted for procurement to save a total of TZS 11.9 billion. The savings were from procurement of radiology equipment (i.e. TZS 9.5 billion) and other equipment including the amount of money allocated for M&E (i.e. TZS 976 million). In view of relevant officials from the MOH, the saving was distributed as follows: TZS 2.7 billion for the procurement of MRI; TZS. 4 billion for the procurement of 16 Digital X-Ray; TZS 3 billion for the procurement of BP Machine for Dispensaries and Health Centres; and TZS 2.2 billion to the procurement of 54 NICU (equipment for children born prematurely). This is a significant contribution made from efficient use of TCRP funds.

#### **3.2.4 Challenges**

There have been a few challenges in the implementation of the TCRP in the health sector. The challenges are mainly associated with the procurement process and acquisition of land area for the construction of staff houses. The challenges associated with the procurement process involved:

- i. Non-response to some of the advertised tenders which led to re-advertisement and therefore delays in the implementation of some projects, for example in Mtwara and Lindi.
- ii. Non-adherence by tenderers to specification put by the MOH.
- iii. High bid prices compared to the budget allocation.
- iv. Complaints for some tenderers on the procurement process.

In some areas, there have been delays in acquiring a plot for the construction of staff houses. For instance, such delays to start the construction of staff houses were registered in Tanga, Iringa and Mbeya regional hospitals.

These challenges caused delays and time pressure to implement the projects. In other words, the implementing teams were forced to hire more technicians and working tirelessly to ensure that the projects are completed within the agreed timeframe and without compromising the quality. Nevertheless, some stages of activities like construction might have been rushed than it should have been as required by the standards. Preparedness to ensure that the work implementation starts on time especially for projects with limited timeframe is highly recommended.

#### **3.2.5 Lessons learned**

Lessons of experience were drawn during implementation of health sector projects under TCRP. Some of the lessons learned include:



- i. The MOH has been proactive and reactive to ensure that the allocated funds are used efficiently, and all projects are successfully implemented.
- ii. The MOH formed a committee to review specifications and provide clarifications to relevant institutions to proceed with the procurement process.
- iii. The MOH continued to advertise tenders in order to get the qualified suppliers who have adequate capacity to implement relevant projects. It also conducted meetings with experts from the implementing institutions and hospitals to establish a common understanding in the implementation of the TCRP projects and to ensure that the intended results are obtained from the projects.
- iv. The MOH prepared a guideline in consultation with procurement experts in the project areas on appropriate means to secure qualified suppliers or contractors.
- v. A crash program was prepared for implementers to fast track construction projects/activities.
- vi. The MOH ensured that all funds allocated for the projects were committed or otherwise used to purchase materials required for the implementation of projects such as cement, building steel, roofing sheets and other finishing materials.
- vii. Good coordination and adequate interaction between central ministries and implementing institutions have shown to be one of the major factors in facilitating the attainment of TCRP projects.
- viii. A close follow up and monitoring by the central ministries including quarterly evaluation have made implementers to be more active throughout the project implementation.
- ix. The use of “Force Account” and “Strategic Procurement” have shown to be the most efficient way of implementing projects. As some projects were under budget, it was possible to accomplish them using “force account” and “strategic procurement”. Most of institutions found the normal procurement approach to be too demanding to yield the expected results on time and thus opted to go for conventional method.
- x. Some officials in the implementing institutions and hospitals used the opportunity of the TCRP projects to implement more other projects with an addition of funds from their own sources of revenue in order to address the demands and needs. This is an indication that the TCRP project implementation process steered up a high level of commitment among relevant officials.

### **3.2.6 Best Practices**

The high level of interaction among stakeholders that were involved in the implementation of TCRP projects enabled a quick response to limiting factors and development of more effective resolution. Some of the implementers moved beyond expanding the intervention to obtaining more results that meet their demands and needs. The high level of ownership and commitment prompted implementers to use the available contextual opportunities in their areas to enable and facilitate successful implementation of project activities at hand.

### **3.3. Primary Health Care Level**

The President's Office Regional Administration and Local Government (PO-RALG) Health Sector coordinated health sector interventions for the primary health care level i.e. district hospitals and health centres. Through TCRP, primary health service was allocated TZS 185.1 billion for the purchase of medical equipment including MRI, X-RAY, and CT-SCAN; construction of 80 Emergence Medical Department (EMD), 26 Intensive Care Unit (ICU), one (1) treatment centre and 150 staff houses of which most of were constructed at health centres in peri-urban. PORALG was also responsible for the procurement of EMD, ICU and treatment centre equipment. Most of the construction projects were implemented through the "Force Account Model" guided by the existing Force Account Guidelines and few were done using contractors.

#### **3.3.1 Implementation Status**

Report from PORALG and physical verification shows implementation status varied across projects. More than 56 percent of the EMDs were at the roofing stages and 15 percent were completed and were waiting for equipment; 39 percent of ICUs were at the finishing stage and 8 percent were complete and; 40 percent of staff houses were complete. The remaining percentages were at final stages of implementation.

Table 3: Summary of the construction/renovation of EMD, ICU and staff house

Implementation Status	EMD				ICU				Staff House				Treatment Centre	
	Quarter 2		Quarter 3		Quarter 2		Quarter 3		Quarter 2		Quarter 3			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Q2	Q3
Preparation (Site Cleaning)	22	27.5	0	0	10	38.5	0	0	49	32.7	0	0		
Foundation	41	51.3	0	0	9	34.6	2	7.14	65	43.3	0	0		
Competing Foundation	11	13.8	0	0	5	19.2	0	0	12	8	0	0	1	
Walling	5	6.3	0	0	1	3.8	0	0	11	7.3	2	1.3		
Roofing	1	1.3	45	56.3	1	3.8	7	25	8	5.3	42	28.0		1
Finishing stage	0	0	20	25.0	0	0	11	39.3	3	2	45	30.0		
Completed	0	0	15	18.8	0	0	8	28.6	1	0.7	61	40.7		
<b>Total</b>	<b>80</b>	<b>100</b>	<b>80</b>	<b>100</b>	<b>26</b>	<b>100</b>	<b>28</b>	<b>100</b>	<b>150</b>	<b>100</b>	<b>150</b>	<b>100</b>	<b>1</b>	<b>1</b>

Source: PO-RALG

### 3.3.2 Renovation and Construction Projects

PORALG was allocated a total of TZS 185.1 billion to implement health projects at primary level of which 44.5 billion was allocated for the renovation and construction projects. During this evaluation, it was reported that all TZS 44.5 billion was received and TZS 23.3 billion equivalent to 45% was already utilized and the remaining was already committed. As indicated in **table 4**, this allocation was directed to the construction of staff houses, EMD, ICU, and Isolation treatment centre. In addition, the fund was used for supportive supervisions and distribution of COVID-19 vaccine.

Table 4: Disbursed Funds as per Planned Activities

S/N	Activities	Amount Allocated (Billion)	Amount received (Billion)
1	Construction of houses for 150 health workers	13.5	13.5
2	Construction of Eighty (80) EMD	24.0	24.0
3	Construction of Twenty-Six (28) ICU	6.5	7.5
4	Construction of Isolation Treatment Centre	0.5	0.5
<b>Total</b>		<b>44.5</b>	<b>45.5</b>

Source: PO-RALG

## Construction of EMD, ICU, Staff House and Isolation Treatment Centre



Figure 12: ICU at Longido District hospital

Findings from the physical verification show that there are significant changes in the stages of building for most of the buildings. During this evaluation, it was observed that 18.8 percent of all EMD were completed; 28.6 percent of ICU were completed; and 40.7 percent of all staff houses were completed. The remaining percentages were at roofing and finishing stages.

The officials interviewed explained that transparency among the staff around the projects; involvement of politicians and public officials at regional level; payment of contractors on time; and teamwork have increased efficiency in the implementation of the TCRP projects and enabled completion of most of the project on time. They further acknowledged the presence of multiple supervision from different groups that range from politicians to experts. It was also reported that ownership by members made them to follow up closely and demand for progress.

Figure 13 Staff house - Bukoba hospital



The exception was observed at Mbulu TC on the construction of ICU where status of

Figure 14: ICU Construction at Mbulu Town Council



implementation (on stage). The reported reasons for the delay

were that initially Mbulu TC was not allocated fund for the construction of ICU until they were notified that some fund that were saved from other areas were allocated for the construction of ICU in Mbulu TC. Such fund was disbursed to Mbulu TC in June 2022. The contract entered between

Mbulu TC and the Contractor for the construction of ICU showed that the construction will be completed by 30th September 2022.

### **3.3.3 Procurement**

As indicated in **table 5**, thirteen (13) contracts including cost for motorcycle registration with a value of TZS. 10,340,000 were already signed by different suppliers to supply ICU and EMD equipment, 528 motor vehicle, 517 motorcycles, and other equipment. During this evaluation, it was noted that all equipment were at delivery stage.

*Table 5: List of contracts entered by PORALG for the delivery of equipment including vehicles and motorcycles*

No.	Project Name	QNT	Procurement Method	Contract Number	Value of the Contract (TZS)	Name of Supplier
1	Procurement of Motor vehicles	528	Single Source Procurement for Goods na Non - Consultancy Services	NIL	52,060,000,000	UNICEF
2	Procurement of Motorcycles	517	Single Source Procurement for Goods na Non - Consultancy Services	ME/022/2021/2022/CR/26	1,402,033,898	M/s Mohamed Enterprises Limited
3	ICUs Equipment	28	National Restricted Tendering	ME/022/2021/2022/CR/27	10,724,635,152	M/s Bahari Pharmacy Limited
4	EMDs Equipment	80	National Restricted Tendering	ME/022/2021/2022/CR/28	32,420,424,000	M/s KAS Medics Limited
5	Double Detector X – Rays Machines	137	National Restricted Tendering	ME/022/2021/2022/CR/29	21,288,786,474	M/s Hypermed HealthCare Limited
6	Aesthetic Machines	80	National Restricted Tendering	ME/022/2021/2022/CR/12 LOT 1	3,920,000,000	M/s KAS Medics Limited
7	Hospital Equipments	1,030	National Restricted Tendering	ME/022/2021/2022/CR/13 LOT 2	6,659,135,059	M/s KAS Medics Limited
8	Oxygen generating plants	13	National Restricted Tendering	ME/022/2021/2022/CR/21	5,317,000,000	M/s Hypermed HealthCare Limited
9	Manifold System with flow meters	129	National Restricted Tendering	ME/022/2021/2022/CR/22	9,872,499,000	M/s TOL Gases Limited
10	Portable Cylinders Size D with flow meters	1,081	National Restricted Tendering	ME/022/2021/2022/CR/23	486,450,000	M/s Tindwa Medical and Health Services Limited,
11	Wall Mounted with flow meters	14,240	National Restricted Tendering	ME/022/2021/2022/CR/25	697,760,000	M/s Hypermed HealthCare Limited
12	Portable Cylinders Size J with flow meters	5,361	National Restricted Tendering	ME/022/2021/2022/CR/24	3,023,604,000	M/s Tindwa Medical and Health Services Limited,
13	Cost of Motorcycles registration				10,340,000	
			<b>TOTAL</b>		<b>147,882,667,583</b>	

It was reported, strategic procurement enabled PORALG to save a total of TZS 21,761,849,026.81 from procurement. The fund was used to increase the number of equipment and motorcycles after scrutiny by the ministry's management and approval by the Permanent Secretary. **Table 6** present the additional equipment that was procured using the served fund:

*Table 6: Additional equipment, machines and motorcycle procured using the served funds*

No.	Items	Initial Quantity	Additional	Total
1	Oxygen generating plants	6	7	13
2	Manifold Systems with flow meters	73	56	129
3	Portable Cylinders with flow meters	1,062	19	1,081
4	Cylinders with flow meters	4,320	1,041	5,361
5	Wall Mounted with flow meters	8,560	5,680	14,240
6	ICUs Equipment	26	2	28
7	Double Detector X – Rays Machines	65	72	137
8	Motorcycles	368	149	517

### **3.3.4 Advocacy for Vaccine Uptake and Mass Campaigns**

A total of TZS 4.9 billion was allocated for vaccine's supply, delivery and mass campaign. As of end June 2022, a total of 7,617,571 people out of the targeted 30,740,928 people aged above 18 years were fully vaccinated. This is equivalent to 24.78 percent of target group and vaccination exercise was still ongoing to reach 70 percent of the target population by December 2022.

### **3.3.5 Training on Critical Care, Imaging and Emergency**

A total of TZS 1.49 Billion was allocated for the training of health professionals from primary health facilities to be trained on utilization and proper management of equipment for management of critical care, imaging and emergency. During this evaluation, it was reported that the training on emergency care would be conducted in September 2022 after the receipt of all equipment. In other words- the delays for implementing this activity were caused by delay in receipt of relevant equipment which are critical for demonstration during the training.

### **3.3.6 Recruitment of Different Cadres**

A total of TZS 641.69 million was received to recruit 150 health cadres of different specialization on contract for a period of six months. The purpose was to address in a short-term severe shortage of health workers in hard-to-reach areas while the government was working to address the problem for the long term. The focus was

60 Clinical Officers grade II, 80 Nurses grade II and 10 Radiologists grade II. During the evaluation, all target cadres were recruited and distributed.

### **3.3.7 Supportive supervision**

A total of TZS 2.11 billion was received for supportive supervision of the projects, whereby TZS 500 million which was allocated for PORALG was reallocated and used to build ICU in Mbulu TC and Bunda DC. Thus, the remaining balance TZS 1.61 billion was used by LGAs and Regions to conduct supportive supervision in their areas.

### **3.3.8 Lesson Learned**

The implementing institutions have shown great commitment, ownership and teamwork in the implementation of projects under TCRP. These have enabled the completion of most of the projects on time and in good quality with the remaining stages in good progress. Some of the lessons learned include:

- i. The use of Force Account Model has shown to be most efficient and promoted ownership to implementing institutions and stakeholders.
- ii. Flexibility in projects implementation enabled implementing institutions to adjust themselves with contextual issues that in some cases increased the cost for implementation. For instance, possibilities for modifying original plans and use of Force Account Model, which enabled to fit the budget ceiling with the planned project.

### **Best Practice**

Some of the best practices documents in the implementation of projects under TCRP were:

- i. The use of Force Account has increased the building skills of local technician (local fundi) since they were supervised by qualified engineers and committees that comprised of experts in different areas. It also promoted ownership of the projects since most of the local technician (local fundi) were obtained from the project catchment areas
- ii. Despite the budgets for similar projects [such as construction of ICU, EMD and Staff house] being the same regardless of geographical location- the flexibility in the implementation of the projects enabled implementing institutions to own and innovatively use the available opportunities to successfully complete the projects. For instance, the use of local technician (local fundi), participation of community members, and procurement of materials in bulk from manufacturers and authorized dealers, which enabled to reduce the cost of some projects.

### **3.3.8 Implementation challenges**

Relevant officials in the implementing institutions pointed out several challenges encountered during implementation of the projects. Some of the challenges include:

- i. Rainfall during implementation of projects delayed the start of some projects
- ii. Increase of prices for construction materials due to increase in demands for projects under TCRP
- iii. Multiple directives from PO-RALG that delayed the implementation of some projects. For example, previously the implementation was required to use contractors, but later on was directed to use force account. This caused the delay in implementation of some projects, since some of the councils had gone far in the procurement stages and were almost about to start the implementation.
- iv. Involving staff from the hospitals and health centres in the project supervision sometimes impaired the provision of health services. This increases workload to other healthcare providers.
- v. Project funds did not include budget for supervision and therefore management team was sometime forced to use their own money for supervision.
- vi. Delay in starting of the project due to absence of appropriate votes for the projects and some building materials were not easily accessible, especially the asbestos. This delayed implementation of the project.

Although the fundi agreed to execute the project under the provided budget, the LGAs were called up to take responsibility in case the available materials based on the design were insufficient. For example, the prescribed marine boards did not suffice the design, therefore the councils had to find ways to cover the gap. The measures taken to address the shortage contributed to delays in project progress.

## **3.4 WATER SECTOR**

### **3.4.1 Overview**

This sector was allocated a total of TZS 139.4 billion, equivalent to 10.7 percent of the TCRP funding and was disbursed as planned. The fund was directed to the rehabilitation, expansion and extension of water supply infrastructure in both rural and urban areas. It also involved procurement and purchasing of drilling rigs, dam construction equipment and groundwater exploration equipment.



The projects under the water sector were implemented through Rural Water Supply and Sanitation Agency (RUWASA) and Water Supply and Sanitation Authorities (WSSAs). RUWASA implemented interventions in the rural areas while WSSA implemented the projects in urban areas. The agencies operate under the Directorate of Water Supply and Sanitation at the Ministry of Water. RUWASA cascaded its management roles to offices at the headquarters, region, and district levels. WSSA operate in all regions and is named after the name of the relevant region. Under TCRP, WSSA was responsible in implementing targeted projects for urban areas.

The Procurement Management Unit (PMU) of the Ministry did all procurement processes of drilling rigs, dam construction equipment and ground water exploration equipment. Procurement of other materials were processed by PMU of respective Entity (RUWASA & WSSAs). For RUWASA, the procured materials were distributed to the relevant intervention areas in the relevant regions. Regional Managers and the Director of the Authority were responsible for signing and managing contracts for the implementation of interventions by RUWASA and by UWASSA respectively.

The fund was mainly directed to interventions that focus on increasing reliable and sustainable water supply. **Table 7** presents interventions implemented under the water sector and the allocated budget:

*Table 7: Water Sector main interventions and budget allocation*

No.	Interventions	Budget (TZS Bil)
1.	Improving water services in rural areas	79.168
2.	Improving water services in urban areas	25.266
3.	Procurement of 25 sets of borehole drilling rigs and accessories including pumping test equipment	17.5
4.	Procurement of Five (5) sets of dam construction equipment	10.399
5.	Procurement of four (4) sets of groundwater geophysical investigation equipment	7.02
	Total	139.35

These interventions were split into five (5) areas focusing on improving access to adequate safe and clean water while 218 projects focused on improving water network connections in 25 regions of Tanzania Mainland. The areas involved

procurement of drilling rigs; dam construction equipments; and ground water exploration/investigation equipments. The Ministry of Water was directly involved in the implementation of three (3) areas out of five (5) that involve procurement of borehole drilling rigs and accessories (including pumping test equipment), procurement of dam construction equipment, and procurement of groundwater geophysical investigation equipment. The procurement process of equipment is often time-consuming.

Therefore, the Ministry assists in speeding up the process and ensuring that the implementing units receive the required equipment timely for utilization. Similarly, implementing the construction, rehabilitation, extension, and expansion of rural water supply under RUWASA was seen as feasible in accelerating the implementation process. The set-up and distribution of tasks under the water sector were promising in realizing most of the planned activities with the TCRP implementation framework.

Improving water services consists of 172 projects in rural areas and 46 projects in urban areas across 25 regions in Mainland Tanzania. A total of TZS 79.168 billion was allocated to implement the projects in rural areas and TZS 25.266 billion in urban areas. The projects entail different activities including the construction of water tanks, pump houses, samplers, and distribution points (DPs); installation of a water pump, electricity system, and alternative energy; and laying and covering of water pipes. The projects cover renovation, rehabilitation, and construction of water sources including drilling of boreholes, spring water, and gravity water schemes.

### **3.4.2 Implementation Status**

The implementation of all four water projects is at different stages of implementation. Observably, in average the implementation status range between 35 to 100 percent. The following sections presents specific status of the four water sector projects that focused on improving access to adequate safe and clean water.

### **3.4.3 Improving Water Services in Rural and Urban Areas**

During this evaluation, it was reported that the Ministry had already received TZS 139.4 billion, equivalent to 100 percent, of the allocated budget for the improvement of water supply in rural and urban areas. The money was disbursed to the spending units indicated in table 7 above.

The 218 projects in rural and urban areas were at different stages of implementation. The construction, rehabilitation, and drilling of water sources were at good progress with exception of a few projects such as Mpimbwe water scheme in Mlele District in Katavi region and Murufyiti water construction in Kasulu District, Kigoma region that were in 35 percent of implementation- though it was reported that all fund for the latter two projects were already committed. The construction of water tanks and



Figure 15: Water tank at Munanila village, Buhigwe



at 96 percent of implementation and 75 percent were a 460 DPs were constructed. The construction of associated facilities like and installation of alternative energy and toilets have been completed. Laying water pipes, construction of distribution chambers/points and connection of water pipes were completed in most projects and for the remaining were at 98 percent of implementation.



Figure 16: Water DP in Songolo -Kondoa DC



Figure 17: Figure 18: Pipe laying Kimochi – Moshi DC Hanang DC



It is important to notice that the projects were implemented through contractors and local engineers from the respective water authorities were used as consultants. The procurement process for equipment and service providers for the intervention in 48 urban area projects were at different stages of implementation.

### 3.4.4 Procurement Activities

Implementation of the project involved procurement of drilling rigs, dam construction equipment, and groundwater exploration equipment. A total of TZS 36.98 billion was allocated for procurement in the water sector. During this evaluation, it was reported that TZS 18.56 billion was used for procurement of 25 sets of borehole drilling rigs and accessories including pumping test equipment; TZS 10.75 billion was used for procurement of Five (5) sets of dam construction

equipment and; TZS 7.67 billion was used for procurement of four 4) sets of groundwater geophysical investigation equipment.

During this evaluation it was reported the bore drilling rigs and accessories including pumping test equipment will be delivered in three batches. In view of the relevant officials in the water sector, four (4) drilling equipment have arrived at Dar es Salaam port, 10 pumping test equipment was expected to arrive by the end of August 2022, and 11 pumping test equipment were expected to arrive in September 2022. According to the official, all the money for these consignments were already committed and it will be paid after the receipt, inspection and acceptance of all machines and equipment.

The Lot 2-Supply of Support trucks and Lot 3-Supply of four (4) Submersible Pump and Accessories that were procured by TZS 6,097,689,311 and TZS 260,000,000.00 respectively were already delivered, inspected and received. Also, the two generators that costed a total of TZS 101,157,266.00 were also delivered, inspected and received.

The five (5) sets of Dam Construction Equipment that include: Lot 1B-Supply of 5 Hydraulic excavators and 5 pad foot rollers; Lot 2-Supply of 10 dump trucks, 5 Water bowzers and 2-lobed with the tractor); Lot 3-Supply of 5 bull dowsers. The five (5) hydraulic excavators have arrived and have not been accepted as they are waiting for the inspection process; five (5) pad foot rollers have not arrived; they are expected to arrive in August 2022. Furthermore, 10 dump trucks, five (5) Water bowzers, two (2) lowbed with a tractor and (5) bull dowsers have been procured, delivered, and accepted. In addition, the groundwater geophysical investigation equipment that costed a total TZS 7.667 is expected to be delivered in August 2022. The allocated fund for such consignment was used to open a letter of credit at the Central Bank of Tanzania and the payment will be affected after receiving the materials. Procurement cost was higher than the estimated TCRP budget by TZS 2,062,716,324 which was covered from other sources. The excess funds were related to procurement of drilling rigs (1,061,996,397); dams construction equipment (TZS 354,277,200) and ground water exploration equipment (TZS 646,442,727).

### **3.4.5 Intermediate Outcomes**

The implementation of water projects under TCRP are expected to enhance access to clean and safe water. In view of key stakeholders including officials in the implementing institutions, the outcomes of the water projects include:

- i. Shortened the distance to the water source

- ii. Reducing the outbreak of diseases like COVID 19 and cholera– in some places like Tanganyika District, the outbreak of cholera was chronic. The implementation of the water project at Karema village helped to combat and curb the outbreak. Similarly, the project helped to reduce contaminants and water-borne diseases.
- iii. Increased supply of clean and safe water in both urban and rural areas. For example, in Kigoma municipal, water supply was twice to thrice per week. But the condition has improved to six days a week. In Buhigwe, water was available once per week but now it is through-out.
- iv. Reduced price of water: For example, in Ilula village the price for a 20 litres bucket of clean water cost TZS 500 before the project. Currently, three buckets of 20 litres each (i.e., 60 litres) cost TZS 100. Similarly, in Manyovu village, Buhigwe district, a 20 litres bucket of water costs TZS 200 before the project and TZS 100 after the project.

#### **3.4.6 Best practices**

The projects have enabled a direct connection of water from the source to the water distribution points; people are now enjoying access to water.

- i. In some areas, communities have erected a signpost to protect the water source from activities near the source.
- ii. Including locals in implementing the project: When locals participate as fundi and day-workers, and in digging water pipe ditches the project becomes more supportive, protected, and secured than when people outside the localities are engaged.
- iii. Where procurement of goods and construction works are done separately, goods should be procured first before the contract for construction is signed. Doing these simultaneously have effects on the project implementation as the construction works depend on the availability of raw materials.
- iv. Community participation and engagement in the implementation of projects enhance effective project implementation.

#### **3.4.7 Lessons learned**

In the implementation of water sector projects, some lessons of experience

- i. The success of the implementation of water projects largely dependent on the experiences and financial capital of the contractors.
- ii. Implementation of projects of similar nature at a time across the country has faced the immediate price fluctuation of equipment due to increased demand for the construction materials in the market.

- iii. Inclusion of local community facilitated easy and quick implementation of the projects. For example, for projects which are not completed are mostly hindered by prior resistance from the community.

### **3.4.8 Implementation Challenges**

During this evaluation, it was reported that despite successful implementation of water projects, some of the challenges have contributed to some delay in the start and completion of projects. Some of the challenges encountered include:

- i. Excessive rain weather disorganized the initial stage of the activities. In some areas, the project started during the rainy season. The project sites were not easily accessible due to heavy rains. Therefore, the contractor's delayed/failure to apply for advance payment delayed the project activities' start.
- ii. Delayed supply of pipes from the suppliers, especially in remote areas. Some suppliers like KAHAMA OIL MILLS were contracted to supply water pipes and equipment to about five regions in the North-West of Tanzania. The supplier seems not to have the capacity to supply the materials on time; the supplier had a slow pace in production and supply of the required materials. A single source system was used to fast-track the procurement process and most of the suppliers selected had been working with RUWASA previously.
- iii. The demand for materials was high compared to the capacity of the suppliers as the projects are implemented in all districts of the country and the same materials are required at the same time. The low capacity of the suppliers made it difficult to get all materials for all districts timely.
- iv. Processing of VAT exemption also caused some delays for the procurement process as well as the overall implementation of the project. Although all contracts had been signed the contractors did not start the implementation waiting for assurance of VAT exemption.

## **3.5 EDUCATION SECTOR**

### **3.5.1 Overview**

The education sector had basic education projects that were implemented through the President's Office-Regional Administration and Local Government while Tertiary and Vocational Training Centres projects were implemented through the Ministry of Education Science and Technology (MOEST). The projects for renovation of vocational training colleges for students with disabilities were under the Prime Minister's Office- Labour, Youth, Employment and Persons

with Disability Projects under the basic education category focused on the construction of classrooms for satellite primary schools and secondary schools as well as construction of dormitories. Tertiary and Vocational Training Centres projects focused on the construction and renovation of 29 Vocation Training Centres (VTC) and one student hostel. It also involved the procurement of furniture for the new VTC, procurement of teaching and learning tools for students with special needs in the higher learning institutions, and printing of books for students with visibility impairment (special needs) in secondary schools.

### 3.5.2 Basic Education

The projects for basic education aimed at constructing 12,000 classrooms for secondary schools; 3,000 classrooms for satellite primary schools; and 50 dormitories for students with special needs. With classroom construction, the project also set aside funds for furnishing each constructed secondary school classroom with 50 sets of chairs and tables. This makes a total of 600,000 sets of chairs and tables. Similarly, each constructed satellite school classroom would be furnished with 15 sets of desks. This makes a total of 45,000 sets of desks.

A total of TZS 304 billion (equivalent to 23.2 percent of the entire TCRP fund) was allocated for these projects. During this evaluation, all the allocated funds were disbursed to PO-RALG. Due to the pressing need to decongest classrooms by the start of the school year in January 2022, these projects were supposed to be completed by January 2022. Owing to this fact, physical verification of these projects focused on monitoring immediate project outcomes.

### 3.5.3 Implementation Status

During this evaluation, the implementation of basic education projects had reached various stages of implementation as described in the following sections and summarised in **Table 8**.

*Table 8: Implementation status of basic education projects*

Sn	Activity	Target	On progress	Completed	Achievement (%)
1.	Construction of classrooms for secondary schools	12,000	0	12,000	100
2.	Construction of classrooms for satellite primary schools	3,000	0	3,000	100
3.	Construction of dormitories for students with special needs	50*	46	4	75
4.	Furnishing constructed classrooms in satellite schools	45,000	0	47,149	105
5.	Furnishing constructed classrooms in secondary schools	600,000	0	600,000	100

\*4 dormitories completed, 45 at completion stages and one dormitory at foundation stage



### 3.5.4 Construction of classrooms for secondary schools and satellite primary schools

Construction of all planned 12,000 classrooms in secondary schools has been completed by 100% and furnished with 600,000 sets of chairs and tables as planned. A total of TZS 240 billion has been used (equivalent to 100% of the allocated budget) for construction and furnishing of the secondary school classrooms. All the classrooms have been in use since January 2022 except for 12 classrooms which were completed in the quarter under review. This marks an important milestone in the overall target of decongesting classrooms and increasing enrolment as well as extending service to children in remote areas. In some of the constructed classrooms, staff offices were added to reduce congestions of teachers in one office. It was reported that in the constructed classrooms, a total of 3,184 teachers' offices were constructed. Construction of 3,000 classrooms for satellite primary schools were also completed and furnished with 47,149 sets of desks, equivalent to 5 percent more than the target of 45,000 desks.



Figure 19: Lopolosek B satellite school  
(Before and After TCRP)

### 3.5.5 Construction of dormitories for students with special needs

Construction of four (4) dormitories out of the planned 50 has been completed by 100 percent. Construction of forty-five (45) other dormitories is at various stages of completion while construction of the remaining one (1) dormitory is at the foundation stage, with underperformance caused by delays in the transfer of funds from Ngorongoro MC to Handeni district where the dormitory is to be built. As a result- the funds were transferred from Ngorongoro where it was initially disbursed to Handeni District on 10<sup>th</sup> April, 2022. Observably, the implementation progress of the 46 dormitories was good as it had already reached 75 percent.



Figure 20: Dormitory for students with  
special needs at Masasi District  
(finalization stage)

### **3.5.6 Project Outcomes**

A number of outcomes have been achieved through the TCRP. Primary outcomes include minimizing the risk of COVID-19 infections among students in secondary and primary schools. Prior to this project, classrooms were congested and figures like 80 pupils and above in a single classroom were commonplace. Construction of the 12,000 classrooms countrywide has reduced congestion in classrooms significantly. The standard number of 40–50 pupils in a classroom has been achieved. All qualified primary school leavers were enrolled in form one in 2022 at once and there was no second or third selection as it used to be previously. A total of 907,802 students were enrolled in form one in 2022 compared to 833,872 students in 2021. In addition, since some of the classroom construction projects improvised 3,184 economical staff offices which were built between the two classrooms, TCRP also helped to decongest staff offices thus improving the working environment and raising the morale of teachers.

Another primary outcome of the TCRP is extending primary education to more children in remote areas through construction of satellite primary schools. Initially, children in these areas had to walk long distances to school. This did not only discourage them to go to school but also exposed them to social and environmental risks. Construction of the satellite schools has extended service to these children closer if not within their villages thus shortening the distance they must walk to school and protecting them from potential risks associated with walking long distances to school.

Regarding secondary outcomes, the TCRP helped in creating many employment opportunities across the country, benefiting both men and women particularly those in rural areas. Many people were involved directly in the construction work helping in tasks ranging from transporting building materials to actual construction work as labourers and technicians. It is estimated that over 21,000 people worked in different projects under the TCRP with about 20 percent being women.

### **3.5.7 Implementation Challenges**

Despite the remarkable success achieved in implementing the TCRP classroom and dormitory projects, there were also some challenges encountered along the way. The number one challenge was budget constraints. Budget constraints were a result of two factors which are: inflation of prices for raw materials due to increased demand of the same; and remoteness of the construction sites. As many similar projects were under way across the country, the demand for raw materials such cement, timber and roofing sheets soared. This made prices to soar as well. Also, due to the increased transportation costs to remote areas, the price of building materials in those areas tends to be relatively higher. Since this factor was not considered in the preparations for the original BOQ, projects in those areas suffered.

Budget constraints emanated in the form of variations in the constructed classrooms. For instance, while some schools managed to construct marble (tiled) floors, others afforded traditional solid floors. Similarly, while other schools managed to fit glass windows, others did not. The second challenge was shortage of manpower. Because many similar projects were being carried out concurrently and many used force account model, the demand for qualified fundi was so high that it was difficult to satisfy. In some areas wage rates for local fundi soared thereby adding to budget constraints.

### **3.5.8 Lessons Learned**

Several important lessons have been learned over the course of implementing TCRP education projects. These lessons will be beneficial to not only the TCRP projects but also future similar projects. They include:

- i. *Sourcing building materials directly from suppliers:* implementers learned that avoiding brokers and sourcing materials directly from suppliers led to significant savings. This approach was employed in sourcing cement and roofing sheets as described above.
- ii. *Improvisation:* In the face of limited budgets, implementers quickly learned to improvise things, that is, to use what is available and fill gaps. A good example of this is the improvised staff offices which were not part of the original plan.
- iii. *Monitoring vs. supervision:* Implementers learned that while monitoring and evaluation is a good way to ensure projects are completed on time, close supervision (on-site) always is equally important. It was further learned that a separate budget should be set aside for this purpose. The current practice is to use committees which comprise of largely members from the surrounding communities who are not remunerated, making their morale and commitment low.
- iv. *Involving local communities:* Implementers learned that involving the local community from the onset of the projects helps to create the sense of ownership of the projects. This does not only help to get different kinds of contributions (e.g., land and labour) from them, but also helps in protecting materials and finished facilities from vandalism.

### **3.5.9 Tertiary and Vocational Training Centre**

The Ministry of Education, Science and Technology were responsible to implement projects for Tertiary and Vocational Training Centres. The ministry was allocated a total amount of TZS 64.902 billion whereas until June 20, 2022, MOEST received a total of TZS 64.478 billion equal to 99.3 percent. The funds were for building and improving infrastructure in teaching colleges and colleges that provide vocational training. The funds implemented the following projects:

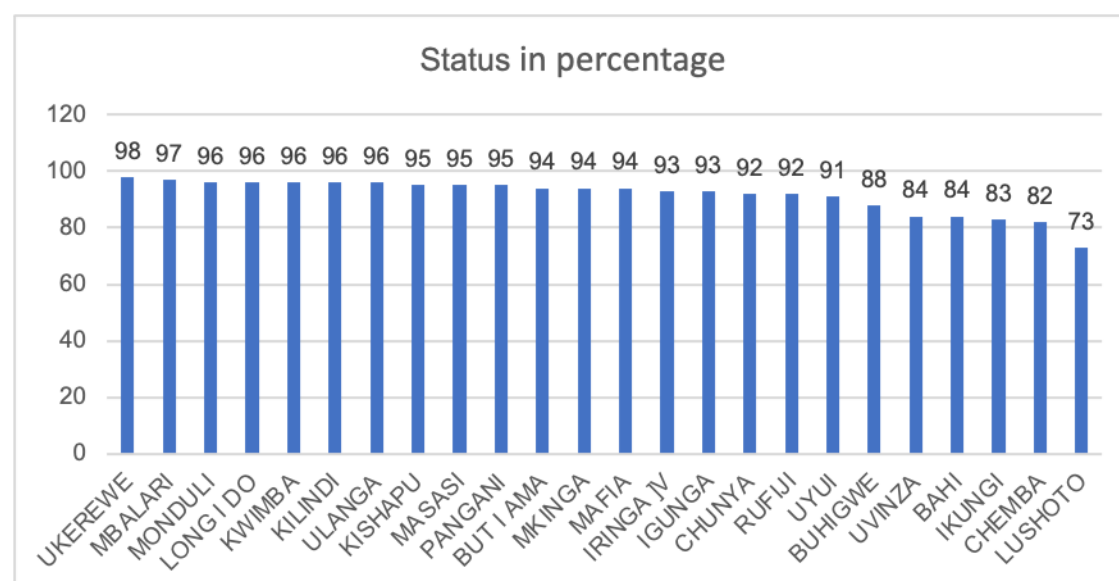
### **Construction of four (4) Regional Vocational Education Training Colleges (RVTC)**

A total of TZS 19,895,382,970.14 was disbursed to VETA for the completion of construction of four (4) Regional Vocation Training Colleges (RVTC) in Rukwa, Njombe, Geita, and Simiyu; and to support the construction of a laboratory at Arusha Technical College (ATC) as well as two dormitories for vocational teachers training colleges in Morogoro. The construction of regional VTC was supervised by the Ministry of Education and the contractor was Arusha Technical College. The implementation status of the construction of four Regional Vocational Trainings Centre (RVTC) were as follows; Rukwa (77 percent), Geita (83 percent), Simiyu (77 percent) and Njombe (75 percent). Until June 30th, 2022, the construction of laboratory building at Arusha Technical College (ATC) had reached 90 percent and the construction of dormitories at Morogoro Vocational Teachers Training College (MVTTC) had reached 68 percent.

### **Construction of Twenty-Five (25) District Vocational Education Training Colleges (DVTC)**

A total of TZS 28.8 billion were allocated for the construction of 25 District VETA Colleges whereas TZS 28.3 billion equal to 99.9 percent were received and spent. Out of that, a total of TZS 8,752,459,189 were for the manufacturing and installation of 32,750 different furniture in 25 DVTCs including offices, classrooms, garages, student dormitories, dining halls and meeting halls. The overall implementation status was at 87 percent where as Ikungi and Lushoto had less than 84 percent of implementation achievement due to delayed securing of plots for construction (Figure 21).

*Figure 21: Status of implementation of projects in District Vocational Education Training Colleges*



As indicated in figure 21, the implementation of projects in District Vocational Education Training Colleges was good. A total of 3,424 pieces of furniture were completed, while 6,225 were above 50 percent and 23,096 were less than 50 percent. The distribution of the completed furniture was already done. In addition, the purchase of 3,600 mattresses has been completed and they were distributed to colleges.



Figure 23: Classroom, lab and offices at ATC



Figure 22: Distribution of furniture from VETA HQ

### **The procurement of teaching and learning materials for thirty-four (34) Folk Development Colleges**

During this evaluation, it was noted that TZS 6.8 billion was allocated for procurement of teaching and learning materials for thirty-four (34) Folk Development Colleges (FDC). All procurement was at the delivery stage and some were already received and distributed. Also, a total of TZS 770 million shillings were allocated but the amount spent was 949.9 million for procurement of equipment for students with special needs in Higher Learning Institutions (HLI). All materials were delivered, accepted and distributed in the respective HLIs. The materials include three-wheeler motorcycles and laptops for physically impaired students, audiometer and tablet for the hearing-impaired students and embosser and digital voice Recorder for the blind. **Table 9** shows the equipment were delivered to 11 higher learning institutions.

*Table 9: Number of equipment received by each Higher learning institution*

No.	Institute	Type of Disability	Equipment	Quantity
1.	University of Dodoma	Physical	Bajaj Laptop	08 15
		Deafness	Audiometer Tablet	05 29
		Blindness	Embosser Digital Voice Recorder	01 15
2.	University of Dar es Salaam	Physical	Bajaj Laptop	05 15
		Deafness	Audiometer	07

No.	Institute	Type of Disability	Equipment	Quantity
			Tablet	40
		Blindness	Embosser Digital Voice Recorder	02 20
3.	Mbeya University of Science and Technology	Physical	Bajaj	01
		Deafness	Audiometer Tablet	02 10
4.	Mkwawa University College of Education	Physical	Bajaj	02
		Deafness	Audiometer Tablet	04 15
		Blindness	Laptops Embosser Digital Voice Recorder	06 01 06
5.	Open University of Tanzania	Deafness	Audiometer Tablet	04 18
		Blindness	Embosser Digital Tape Recorder Laptop	01 15 13
6.	Mzumbe University	Physical	Bajaj Laptop	05 05
		Deafness	Audiometer Tablet	03 04
7.	Ardhi University	Physical	Bajaj	01
		Deafness	Audiometer Tablet	02 06
8.	Dar es Salaam	Physical	Bajaj Laptop	02 13
		Deafness	Audiometer Tablet	04 10
		Blindness	Embosser Digital Voice Recorder	01 12
9.	Moshi Cooperative	Physical	Bajaj	02

No.	Institute	Type of Disability	Equipment	Quantity
	University	Deafness	Audiometer Tablet	01 03
10.	Sokoine University of Agriculture	Physical	Baja	02
		Deafness	Audiometer Tablet	05 25
11.	Muhimbili University of Health and Allied Sciences	Physical	Bajaj Laptop	01 05
		Deafness	Audiometer Tablet	02 05

### **Printing of books for secondary school students with special needs**

A total of TZS 707 million were allocated for printing braille and large textbooks but the amount spent was 1.03 billion for students with special needs. During this evaluation, all books were printed and distributed to relevant schools.

### **Construction of teachers training colleges**

A total of TZS 5.44 billion were allocated and 6.03 billion was received for the construction of 41 classrooms, 3 lecture halls and 15 dormitories in teaching colleges. During this evaluation, the construction of five (5) colleges were completed; 12 colleges were at 99 percent of its completion; 5 colleges were at 93 percent of implementation. In addition, Ngorongoro College was at 65 percent of its implementation.

### **TCRP Supervision**

The Government has allocated a budget of TZS 993,667,500 for overseen implementation of TCRP. Mzumbe University through the Center of Excellence in Health Monitoring and Evaluation (COEHME) was commissioned this task as external evaluator. The overarching objective of this evaluation was to assess the implementation of the TCRP and to document implementation progress, best practices and lessons learnt, and challenges for future programming of similar nature. The target was to produce three quarterly reports. Until June, 2022, two reports have been produced and uploaded to the MoFP website and the final one is underway.

### **3.5.10 Challenges**

During implementation of projects of education sector under TCRP, some of challenges were encountered that in a way delayed the start of implementation and in some cases completion of some projects. Some of the challenges include:



- i. Delays due to rains as the construction started during the rainy season.
- ii. Delay of suppliers to deliver materials on time.
- iii. Increase in the cost of building materials during implementation process such as iron sheets, wood and Gypsum Boards
- iv. In some of the projects some important infrastructure such as toilets and water systems were overlooked
- v. In some areas, there was low response to the contribution of the workforce, especially to projects implemented by Force Account.
- vi. Estimates of some of the projects had lower value than the reality as important materials were not included in the estimate, such as tiles and window grills.

### **3.5.11 Lessons Learnt**

The implementation of education sector projects under the TCRP has drawn some lessons of experiences especially in completing a number of projects within a short period of time efficiently. Some of the lessons learned include:

- i. Effective engagement of key officials from national level instilled commitment and teamwork among key structures of implementing institutions which showed critical for timely completion of projects. For instance, it was observed that there was a strong teamwork among the staff from the procurement units, internal auditor, accountants, and human resources officers which facilitated speed of process necessary for timely implementation of project activities.
- ii. Close supervision of key officials from the sectoral ministries and Regional Administration Secretariat enabled significant progress of the construction of RVTCs in Simiyu and Njombe, which were far behind in the previous quarter, as well as procurement of learning and teaching equipment in 34 Community Development Colleges.

### **3.5.12 Vocational Training Centres for Persons with Disability**

The Prime Minister's Office- Labour, Youth, Employment and Persons with Disability received a total of TZS 3,468,603,626 (equal to 100 percent of all the funds approved) for the renovation and rehabilitation of four (4) Vocational Colleges for People with Disabilities. The supported colleges are Luanzari (Tabora), SabaSaba (Singida), Mtapika (Masasi Mtwara) and Yombo (Dar es Salaam). The overall aim of the project was to improve the learning environment for people with disabilities.

#### **Implementation Status**

The overall implementation status of renovation of Vocational Training Centres for persons with disability is 72.5 percent; of which The renovation of the Saba



Figure 24: Mtapita Administrative building under renovation

Saba VTC in Singida region was at 80 percent, Luanzari VTC in Tabora Municipal, Tabora region was at 70 percent, Yombo VTC in Dar es Salaam was 60 percent and Mtapika VTC in Masasi Town Council in Mtwara region was at 75 percent of the implementation **(Table 10)**. In view of key officials in the implementation institutions and as reflected in contracts most of the projects will be completed by September 2022. During evaluation, it was also noted that all fund allocated for the projects were already committed and the implementation speed was promising.

*Table 10: Status of renovation of Vocational Colleges for Persons with Disability*

S/N	Name of the college	Renovation commencement date	Renovated Infrastructure
1.	Mtapika-Masasi (Mtwara)	2 <sup>nd</sup> June 2022	Four (4) classes; 4 dormitories; 2 Libraries; 13 staff houses; 1 house for Principal; 2 cafeterias; 1 food store; 1 kitchen; 1 Administration building. The total number of buildings in the renovation plan was 29.
2.	Yombo – Dar es Salaam	25 <sup>th</sup> May 2022	Two (2) dormitories, 1 double room garage; 2 staff houses, 1 dispensary with 3 rooms; fence; the construction of guard huts; 1 administrative building with 4 rooms and toilets; yard and kitchen building; and construction of walkways
3.	SabaSaba-Singida	25 <sup>th</sup> May 2022	Four (4) classes; 3 garages; 4 dormitories; 4 staff houses; 1 administration building; 1 cafeteria building; construction of new toilets for 2 staff houses; and renovation of 2 toilets in student classrooms
4.	Luanzari - Tabora	15 <sup>th</sup> May 2022	The infrastructures under renovation were garage building, administration and classroom buildings, cafeteria, kitchen, unfinished building, new toilets (for students and teachers), girls' dormitory, boys' dormitory and staff houses (Block A, Block B and Block C)

A total of four contracts were signed to procure iron sheets, and woods and cement were directly procured from the manufacturers-hence reduced prices. Also, all woods were procured from the SAO HILL. During this evaluation, the following activities were completed: removing old ceiling boards and placing 'gypsum board' in all buildings; repairing doors and windows; installation of electrical infrastructure; setting up of clean water and sewage infrastructure systems and; construction of new vents for all designated toilets. Other completed

projects include installation of non-slip marble on all buildings; placement of signs for Persons with Disabilities in relevant areas; painting inside and outside all buildings, construction of fences; construction of new buildings based on the assessment and needs of each College and construction of fence for Yombo, Luanzari and SabaSaba colleges.

### **3.5.13 Outcomes of the Education Sector Projects**

The education sector projects are expected to significantly impact delivery of services in the education sector including reduction of congestions in dormitories and classrooms. In view of stakeholders, some of the outcomes include:

- i. Improve the learning environment through decongestions and eventually boosts the sense of empathy among students.
- ii. Increased accessibility of quality training facilities that will be used to provide technical skills for students with special needs.
- iii. The training centres will promote the demand for acquisition of technical expertise which will enhance technical capacity to youths and increased utilization of local technicians.
- iv. There will be reduction of congestion in the dormitories and classrooms due to increased space in rooms.

## **3.6 NATURAL RESOURCES AND TOURISM SECTOR**

### **3.6.1 Overview**

The Ministry of Natural Resources and Tourism (MNRT) was allocated a total of TZS 90.2 Billion, equivalent to 6.9 percent of the total funds received to implement TCRP. The allocated funds to the tourism sector were distributed to departments, agencies and units for implementation of specific projects. During this evaluation, it was reported that the Ministry of Tourism and Natural Resources received a total of TZS 89.17 Billion equivalent to 98.86 percent of the approved funds. In view of key officials from the Ministry of Natural Resources and Tourisms and as indicated in **table 11**, the remained percent of fund was already processed and will be disbursed in the financial year 2022/2023 starting early July. The delay in processing of the remained percent of fund that was allocated for projects in this sector was contributed by the delays to start in some of the projects.

Out of the amount received by the sector, a total of TZS 47.15 Billion was committed to proceed with the implementation of project activities, and no certificates were raised by the contractors for TANAPA, NCAA, TTB, TAWA, TFS and NMT.

*Table 11: Status of Funds Received and Spent by Institutions under Tourism Sector*

S/N	Department / Unit / Institution	Approved Budget (in TZS)	Amount Disbursed (in TZS)	% of Disbursement	% of total Budget
1	Tanzania National Parks Authority (TANAPA)	46,792,554,115	45,763,423,292	97.8%	51.9%
2	Tanzania Wildlife Management Authority (TAWA)	12,978,054,139	12,978,054,139	100.0%	14.4%
3	Ngorongoro Conservation Area Authority (NCAA)	6,645,258,276	6,645,258,276	100.0%	7.4%
4	Tanzania Tourist Board	10,568,000,000	10,568,000,000	100.0%	11.7%
5	Tanzania Forest Services Agency	4,000,000,000	4,000,000,000	100.0%	4.4%
6	Tourism Division	1,834,456,000	1,834,456,000	100.0%	2.0%
7	National Museum of Tanzania	2,450,000,000	2,450,000,000	100.0%	2.7%
8	Policy and Planning Division and Research and Training Unit	1,799,979,000	1,799,979,000	100.0%	2.0%
9	Information and Communication Technology Unit	900,000,000	900,000,000	100.0%	1.0%
10	College of African Wildlife Management, MWEKA	1,011,000,000	1,011,000,000	100.0%	1.1%
11	National College of Tourism	1,223,044,000	1,223,044,000	100.0%	1.4%
<b>Grand Total</b>		<b>90,202,345,530</b>	<b>89,173,214,707</b>	<b>98.9%</b>	<b>100.0%</b>

Source: Ministry of Finance and Planning

### 3.6.2 Implementation Status

As indicated earlier, the projects under Natural Resources and Tourism were implemented by department, agencies and units. The following sections present the status of implementation of projects under different department, agencies and units.

#### **Tanzania National Parks Authority (TANAPA)**

TANAPA was allocated a total of TZS 46,792,554,115 equivalent to 51.9 percent of the total budget allocated to the tourism sector. The budget was distributed to different projects as indicated in appendix 1. During this evaluation, it was observed that some projects were completed while others were still in progress, though in the last stages of implementation. The completed projects were: the construction of a 6.5 kilometres of hiking trail from Mweka hut to Millennium station; the hiking trail from Horombo to last water point; repair of crossings ways on Lava tower- Baranco, and construction of 6.5 kilometres of trail from second cave to Kileleni. Other completed project was the procurement of three (3) generators to be used at the gates designed for revenue collection centres was completed. The projects that were at different stages of implementation were: the road rehabilitation of 897 kilometres out of 1,552 that was at 57.8 percent; the construction of 55 crossing ways in eight (8) National Parks in Serengeti, Nyerere, Kilimanjaro, Tarangire, Mkomazi, Saadani Katavi and Gombe that were

at 53 percent of implementation. Other projects include: the construction 1 kilometre of guard trail in Gilman's area to Uhuru peak and the construction of trails using the concrete (rigid pavement) 0.7 km from Kilema to Horombo in the Kilimanjaro National Park that were at 69 percent. The implementation progress was good and according to the reports and contracts, the fund for all these projects were committed and indicated that these projects will be completed between July and September 2022.



*Figure 25: Mkomazi complex gate*

The construction of gates (Revenue Collection Centers) at Zange area in the Mkomazi National Park was at the stage of skimming, installing grills and ceilings and completion of installation of the electricity and water system. The construction of Likuyu Sekamaganga was at the stage of laying stones and crushing rubble while similar construction at Nyerere National Park was at the foundation stage. In average, the implementation of these projects were at 50

percent.

The construction of five (5) Helipads has been completed by 99 percent. The rehabilitation of five (5) airstrips in Nyerere National Park, Tarangire, Mkomazi and Saadani was at 69 percent of implementation and speed was good. The repair and maintenance of these airstrips will strengthen the safety and security of tourists in accordance to the TCAA standards. In addition, tourists experience, satisfaction levels and confidence will be improved. The funds to procure seven (7) small cars, were reported to have been paid to the Government Procurement Services Agency (GPSA). TANAPA has procured four (4) water bowser, twelve (12) trucks, two (2) low beds out of four (4), two (2) graders out of four (4), and four (4) excavators while the procedures for the procurement of four (4) vibrator soil compactors have been completed and all the remained machinery are expected to be received before September 2022. The overall implementation of these projects has reached 70 percent.



*Figure 26: Air Stripe at Tarangire*

### **Ngorongoro Conservation Area Authority (NCAA)**

During this evaluation, it was observed that repair 80 kilometers of roads at Golini area to Seneto junction (55 kilometers) and 25 kilometers from Rock Olduvai to Nasera were completed. The fund for procurement of two (2) small vehicles have already been made at Government Procurement Service Agency (GPSA) and the procurement procedures for planned machines (two water bowser; one motor grader, one wheel excavator, one vibration roller and four trucks) were also completed. One motor Grader was already received, and the vehicles and machinery were expected to be delivered in September 2022.



*Figure 27: Rehabilitated Road at NCAA*

### **Tanzania Wildlife Management Authority (TAWA)**

The rehabilitation of 336.2 kilometers out of 463.5 in the forests of Akiba Wami Mbiki, Kijereshi, Mkungunero, Lukwika Lumesule, Liparamba, Igombe and Rungwa was at 72.53 percent of implementation. The construction of four (4) large gates in Wami Mbiki (one gate), Mkungunero (one gate), Kijereshi (one gate) and Swagaswaga (one gate) in the Game Reserve was at the final stage of implementation. The construction of two (2) revenue collection points in the Game Controlled Area of Lake Natron has been completed by 98 percent and the contractor is expected to handover the site in August 2022. The establishment of these vital infrastructures will improve revenue collection, attract tourism activities in the western and southern zones of Tanzania. It will also minimize tourist travel costs and park operational costs.

The construction of five (5) cottages for guests to rest in the Mpanga Kipengere Forest Reserve and the renovation of six (6) huts in the Wami Mbiki Reserve Forest were in the finishing stage. This work has been completed by 95 percent. In addition, the construction of four (4) tourist camps i.e. one at Mpanga Kipengere Game Reserve, one at Lukwika Lumesule, one at Pande and one at Ruhila Wildlife Park are in the finishing stages- which is almost 98 percent completion rate. Also, the construction of five (5) Picnic sites: one at Akiba Mkungunero Game Reserve, one at Mpanga Kipengere, one at Pande, one at Kilombero Game Reserve; and one at Lake Natron is in the stages of completion- which is equal to 90 percent. In addition, one (1) picnic site in Game Controlled Area at Lake Natron is in the stage of completion equal to 88.67 percent- this includes the procurement of 559 guest tents.

TAWA was still continuing with the rehabilitation of three (3) airstrips where two airstrips were in Maswa game reserve, and one in the Lake Natron Forest

reserve. The rehabilitation of airstrips in Maswa game reserve is estimated to have reached 90 percent while at Lake Natron Forest reserve has reached 80 percent. The procurement of six (6) vehicles has been completed by 70 percent, of which three (3) vehicles which are for rhino monitoring have been received. However, three (3) other vehicles are expected to be delivered by GPSA before the end of July 2022. The report from the MNRT indicate that the procurement of a plant (grader) and a drilling vehicle have been completed and the grader has been received and handed over. Also, the drilling truck reported to have arrived and inspected and is expected to be handed over in July, 2022. Similarly, the procedures for the procurement of six (6) boats have been completed and the boats are expected to be received in September 2022 and the procurement of a lowbed truck contract has been signed and are expected be received in September 2022. Finally, the construction of pedestrian paths which are 1.65 kilometers in Mpanga Forest (0.15 meters) and Lake Natron Forest Reserve (1.5 Km) were completed by 83 percent.

#### **Forest Service Agency (TFS)**

The repair of 80 kilometre out 96, equivalent to 72 percent in the eleven (11) nature reserves of Magamba, Pugu-Kazimzumbwi, Nilo, Chome, Essimangor, Mount Hanang, Mount Rungwe, Kalambo Falls, Uluguru, Amani and Matogoro has been completed. Also, TFS managed to rehabilitate 164 kilometers out of 190 kilometers in the ten (10) reserves of Magamba, Pugu-Kazimzumbwi, Nilo, Chome, Essimangor, Mount Hanang, Mount Rungwe, Kalambo Falls, Amani and Matogoro. Finally, the construction of four (4) large gates at Amani, Pugu-Kazimzumbwi, Mount Hanang and Matogoro nature reserves and one (1) small gate in Nilo reserve were in the stage of roofing and plastering.

#### **Tanzania Tourism Board (TTB)**

During this evaluation, in supporting the development of the Royal Tour Program, the board facilitated the launching of the Royal Tour Program in the cities of New York, and Los Angeles, USA on April 18, 2022 and April 21, 2022 respectively. The same was launched in Tanzania on April 28, 2022 in Arusha; on May 7, 2022 Zanzibar; and on May 8, 2022 in the city of Dar es Salaam. Apart from the launching of the Royal Tour Program, the procurement process of the company that will oversee the production of articles of the country's attractions (country videos) to be used on social networks is on progress. Ideally, the produced articles will be distributed to the Tanzanian embassies and high commissions abroad to promote the country as the best place for tourism. The process of procurement of 32 vehicles for tourism development were completed and funds have already been paid to GPSA; and vehicles are expected to be received before September, 2022.



The Ministry participated in four (4) international tourism advertising exhibitions which were FITUR in Spain held from 19th to 23rd January, 2022, Expo 2020 Dubai that were held from 1st October, 2021 to 31st March, 2022, Rwanda Tourism Week Exhibition November, 2021; and IMEX Frankfurt 2022 which started from May 1<sup>st</sup> to June 2<sup>nd</sup>, 2022. Additionally, the Ministry participated in meetings to promote tourism between tourism stakeholders and travel and transport agents (Road Show) in Germany, Denmark and Sweden which started on the 1st to 12th May 2022. Likewise, the preparations for the meetings that intends to promote international tourism through a local exhibition called Karibu-Kilifair held from 3rd to 5th June, 2022 and the preparatory sessions for the UNWTO-CAF Conference and the Swahili International Tourism Expo have already started. The board managed to procure software for the activation of the monitoring centre and provision of tourism information (Digital Command Center); including procurement of six (6) LED screens- which has also been installed.

### **National Museum (NMT)**

The National Museum (NMT) was in progress with construction of an information center in Mbuamaji Kigamboni as well as strengthening of ancient buildings in the centre of the Historical Town in Mikindani. Also,



Figure 29: Zanaki Traditional hurts

the construction of the Tendaguru Information Centre and the construction of the Lindi Information Centre as well as the strengthening of the ancient tower are ongoing and there are steps to raise the walls. The construction of the Elephant Exhibition was ongoing in the

Arusha Animal Education Museum, where currently 3 images

(sculpture) of elephants are in the stages of completion and the construction of the Big Five is ongoing. The construction of traditional houses for three families (Wazanaki, Wairaq and Wahehe) in Makumbusho village Dar es Salaam has been completed. In addition, the procurement of an exhibition van has been completed. The installation of security cameras in the centers of the Mwalimu Nyerere was at 99 percent of completion.



Figure 28: Hehe's traditional hurts

### **National College of Tourism & College of Wildlife Management**

On one hand, the National College of Tourism conducted and completed training for 1,072 tourism service providers in eight (8) regions of Mtwara, Lindi, Ruvuma, Njombe, Mbeya, Mwanza, Iringa and Ruvuma. The training among others things covered topics related to environment, safety and security, human resources, fire and electric safety, and legal issues that are important in enhancing hospitality in the tourism industry. Similarly, the training of quality assessors and grading for accommodation service providers (hotel assessors) were conducted- and completed by 100 percent. On the other hand, the College of Wildlife Management trained 1,060 tour guides in Tarangire, Saadani, Ruaha, Serengeti, Lake Manyara and Ngorongoro Park Authority National Parks.

### **Department of Tourism**

The department managed to train 4,698 tourism service providers in 26 regions of mainland Tanzania. In the training, a total of 344 participants received COVID-19 vaccination voluntarily. As far as procurement of six (6) vehicles which will be used in tourism development through GPSA was completed and the vehicles are expected to be delivered before end of September 2022. Also, the procurement processes for IT equipment that will be used to strengthening the performance and collection of data was completed and wait for delivery; and once received, the same will be distributed to the Ministry and its agencies. As of 30th June, 2022, the department completed the procurement of protective equipment that includes 14,285 hand sanitizers with a volume of 500 millimetres each and 50 masks boxes with a total 2,800 of masks from the Medical Store Department (MSD). All these protective gears were distributed to 10 tourism associations that have a total of 16,056 members.

### **Information Technology Division**

The process of developing the electronic evaluation system for the planning of accommodation and food services is still on progress- which is estimated to be at 66.2 percent. As of June 30<sup>th</sup>, 2022, a total of 13,398 questions for eight types of accommodation and food services in accordance with the criteria of the East Africa Community has been prepared and uploaded in the system. Also, the electronic monitoring and evaluation (M&E) system for project implementation has been strengthened. There have been ongoing improvement processes for the Ministry's revenue collection system commonly known as MNRT Portal whereby a total of 35 out of 66 transactions queries of the MNRT Portal system have been worked on and completed. In addition, a total of 26 out of 28 modules of the MNRT Portal system have been worked on and completed. Also, the Ministry is building a new "Landing Permit" module to increase the efficiency of the system.

### **Research and Training Unit and Policy and Planning Department**

The department conducted the Training of Trainers for 1,787 enumerators. The training was conducted in February 2022 in Morogoro Region. The collection of information in the field has been completed for all regions of mainland Tanzania and Zanzibar by reaching 33,606 households, which is equal to 99.25 percent of the targeted households. The collection of information on day visitors was carried out by officers of the immigration department at 18 entry points at Julius Nyerere International Airport, Kilimanjaro International Airport, Abeid Amani Karume International Airport, Namanga, Tarakea, Holili, Sirari, Horohoro, Manyovu, Mutukula, Murongo, Tunduma, Kasumulo, Ileje, Rusumo, Kabanga, Mtambaswala and Mkenda. A total of 1,651 visitors were interviewed equal to 92 percent of the target. In addition, the work of writing the report of the local research and the calculation of the contribution of the tourism sector in the National GDP was completed and the draft report was submitted to the Ministry for review and to provide their views for final improvements.

#### **3.6.3 Immediate Outcomes**

The implementation of natural resources and tourism projects under TCRP have resulted to several intended and unintended positive outcomes. The following were some of the outcomes that were reported and observed:

- i. In the implementation of these projects, institutions like TANAPA have decided to establish a building and consultancy construction company for both private and civil works as part of reducing costs - but this company will also be used to do various renovation work at a low cost. This company was registered under BRELA with class Z by 30th June, 2022.
- ii. The construction of roads in national parks and pathways has provided many opportunities including having alternative ways of rescue in case of disasters or emergencies in the areas of reserves and parks. Also, opening of new roads has embark with new opportunities for investments and tourism areas For example, Rescue road from Kilema to Horombo road is currently now being used effectively and construction of 28 km Gurusi tourism circuit at Tarangire.
- iii. The construction of gates (entry and exit points) in the National parks, game reserves, and forest reserves will significantly increase accessibility to receive and serve more tourist at a time and also improve revenue collections around these gates. For example, initially, there were small gate at Mkomazi.
- iv. The rehabilitation and constructions of airstrips in National Park and game reserve is currently enabling the tourists to land and reach in many parts of the parks without unnecessary delays.

- v. Road improvements within the parks and game reserves have reduced operating costs for service providers including reducing the level of damage to vehicles as well as fuel consumption. This has also resulted to the increase of more tourist attracted to visit the parks and game reserves.
- vi. The improvement of museums by installation of internet connectivity in museum libraries such as Arusha Declaration Museum in Arusha has increased internet access which has started to show signals of increased potential visitors and increased museum collections.
- vii. The implementation of various projects under the tourism sector has provided employment opportunities (permanent jobs and short-term jobs) for more than 200 hundred men and women- which have increased the livelihood of citizens but also contributed to the circulation of money in the country's economy.
- viii. The training of tourist service providers has increased the knowledge, efficiency and quality of service delivery which has also led to increased level of customer satisfaction and increased awareness to COVID-19 precautionary measures
- ix. Tanzania is currently seeing the massive influx of tourists as results of many interventions particularly the Roya Tour Film. For example, as of June, 2022, the number of tourists who visited Tanzania almost doubled from 637,052 in 2020/21 to 1,123,130 in 2021/22 while revenue increased by 183 percent in the same timeframe (Table 12 a and b)

**Table 12a: Summary of Tourist Arrivals by Month - Numbers**

	2015	2016	2017	2018	2019	2020	2021	2022
January	98,710	99,815	121,280	133,795	108,027	132,684	79,116	94,441
February	88,939	91,485	101,168	107,835	122,929	137,204	79,730	101,042
March	77,841	93,068	98,295	123,256	108,323	66,581	72,285	93,889
April	67,447	76,527	86,652	92,876	95,212	7,105	43,966	79,405
May	81,538	76,120	78,016	91,374	80,172	5,529	42,173	89,271
June	90,236	89,383	92,442	117,802	121,173	9,671	57,689	117,349
July	91,896	126,681	131,583	148,557	156,664	17,136	81,307	166,736
August	142,885	119,453	131,388	157,312	155,734	24,863	87,397	
September	100,829	121,264	110,962	150,953	143,690	29,566	80,733	
October	84,121	134,054	122,289	120,762	133,014	41,740	92,345	
November	96,873	121,379	109,211	111,859	124,917	61,183	92,939	
December	115,867	135,050	143,857	149,321	160,296	87,605	113,012	
<b>TOTAL</b>	<b>1,137,182</b>	<b>1,284,279</b>	<b>1,327,143</b>	<b>1,505,702</b>	<b>1,510,151</b>	<b>620,867</b>	<b>922,692</b>	<b>742,133</b>

Source: Immigration Services Department

**Table 12b: Revenue Collection from Selected Tourist Institutions**

	2020/21	2021/22		Target	Growth
Institution	Actual	Target	Actual		
TANAPA	66,850.1	124,457.7	210,866.8	169.4%	215.4%
NCAA	31,715.7	53,732.6	93,904.1	174.8%	196.1%
TAWA	25,943.8	49,756.4	47,221.0	94.9%	82.0%
	<b>124,509.6</b>	<b>227,946.7</b>	<b>351,991.9</b>	<b>154.4%</b>	<b>182.7%</b>

Source: Tanzania Revenue Authority

### 3.6.4 Implementation Challenges

Despite the remarkable achievements, implementation of the projects under Tourism sector encountered a number of challenges that were not limited to:

- i. The extreme rainfall during the monsoon which caused floods in various areas in the country. This heavy rainfall often led to either partial or complete suspension of road construction or rehabilitation due to saturated and unworkable soil conditions- which affected the timely completion of the projects while simultaneously adding costs on the side of contractors.
- ii. There was a repetition of the advertising of tenders for various contracts due to the bidders setting higher costs than the planned/ceiling budgets. This also led to a delay in signing the contracts and starting work - although, after the engagement of the contractors, close monitoring was done to ensure that the contractors work according to the duration of the contracts.

- iii. There was a challenge in procuring some of the equipment and large machinery/plants such as graders, boats, and special vehicles from abroad. This is due to the challenges associated with the availability of transport from abroad to Tanzania as some countries were still implementing the conditions/measures geared to fight and prevent the spread of COVID-19.
- iv. Inflated prices for the construction and building materials increased rapidly due to increased demands-which disrupted and diverted the quoted prices by the contractors as per their Bill of Quantities (BOQ). This challenge was more severe in rural areas than in urban areas where the projects were implemented.
- v. The implementation period of the projects was short and thus the respective Project Coordinators and Management Teams were under time pressure to make some of the decisions that should follow the country's laws and regulations such as the Public Procurement (Amendment) Act 2016; and The Finance Act, 2021 (Act No. 3 of 2021) just to mention a few.
- vi. Contractors were delaying to raise and submit the certificate of completion for construction from one stage to another, which caused unnecessary delays in fund utilization (burn-rate).

### **3.6.5 Lesson learned**

Some lessons were observed during implementation of projects in the natural resources and tourism sector.

- i. The formation of special committees/coordination teams at ministerial, institutional, regional, and district levels were instrumental in ensuring the smooth implementation of planned activities. These teams provided overall project management oversights; assisted and guided the frontline implementers while simultaneously monitoring the progress, controlled the project scope, and resolved challenges.
- ii. The use of multiple contractors in one project appeared to be more appropriate particularly in time-saving and completing the project within the agreed timeframe. This is because the project had a short duration which necessitated the authorities to select appropriate procurement methods- which were faster but within the existing laws and regulations.
- iii. The use of registered contractors increased the quality of work and saved time than using a force account. It was noted that registered contractors were able to manage, coordinate and supervise projects even those that involved multiple sub-contractors.
- iv. The use local contractors in different activities was effective in project implementation of these projects

## 3.7 SOCIAL PROTECTION AND EMPOWERING PETTY TRADERS

### 3.7.1 Overview

Under TCRP implementation, the social protection system, particularly social assistance programmes, was conceived as essential for mitigating the socio-economic impact of COVID-19. A total of 5.542 billion shillings equivalent to 0.4 percent of the RCF funding of TCRP, was allocated to Tanzania Social Action Fund (TASAF). The allocated fund aimed at providing financial support to 34,641 poor households to support them to improve consumption (160,000 shillings per household). During this evaluation, it was reported that there were more households that were severely affected by COVID-19 than initially planned. This situation led to an increase in the number of beneficiaries' households to 51,290. As a result, TASAF reduced the amount to each beneficiary from an average of TZS160, 000/= to 108,000/=. This was on assumption that all households will receive cash transfer in all windows. However, the number of households varies in each window as indicated in table 13. **Table 13** indicates the amount disbursed to the 35 Urban Project Areas Authorities (PAAs) to serve 51,290 households in 1,471 hamlets (*Mitaa*).

### 3.7.2 Implementation Status

The funds transferred to TASAF as of end June 2022 amounted to TZS 5.542 billion and the amount was paid to beneficiaries in four instalment windows. **Table 13** indicates that the first window disbursed a total of TZS 2,456,674,000 to 51,290, while TZS 2,454,728,531 was disbursed in April 2022 in the second window covering 51,163 households. The third window disbursed a total of TZS 585,807,858 to serve only 11,377 households from 16 PAAs. As indicated in **table 13**, both second and third windows were paid together in order to compensate the lagging behind of time as per payment calendar that were caused by delay in starting implementation. The fourth window disbursed TZS 45,303,611 to cover 884 beneficiaries in Bariadi TC, Shinyanga. The number of beneficiaries in the last three windows continue decreasing due to amount of financial resources remained during that time, hence it covered less beneficiaries compared to the first payment window. The last payment covered Bariadi TC only, the same reasons on availability of financial resources, but also selection considered area where fewer beneficiaries were targeted. A total of 884 households received cash transfer in all four window and received an average of TZS 198, 615.27 while 51,290 households received cash transfer only once amounting to an average of TZS 47,897.72. The beneficiaries who did not show up during a particular payment session for various reasons, their payment benefit was re-issued in the subsequent payment session.



*Table 13 The Distribution of Funds to beneficiaries in Urban Project Areas Authorities*

No	Windows	Date of Funds Disbursement	Number of households	Amount ( in TZS)	Average cash Transfer per household (TZS)
1	First window	27 Dec 2021 – 14 Jan 2022	51,290	2,456,674,000	47,897.7
2	Second window	21 Mar 2022 – 1 Apr 2022	51,163	2,454,728,531	47,978.6
3	Third window	21 Mar 2022 – 1 Apr 2022	11,377	585,807,858	51,490.5
4	Forth window	9 May 2022 – 20 May 2022	884	45,303,611	51,248.4
		<b>Total</b>		<b>5,542,514,000.00</b>	<b>198,615.3</b>

*Source: Tanzania Social Action Fund*

During physical verification, it was revealed that the PAAs in the selected LGAs received the fund in three phases with exception of Bariadi TC which received in four phases. All funds received were disbursed to all targeted 35 LGAs. As in the previous physical verification, successful implementation of the project was associated with:

- i. Team supervision by respective Mtaa Executive Officers/Members in collaboration with other TASAF team members at the Municipal level was crucial. This close supervision ensured that beneficiaries receive and use given monies for intended purposes.
- ii. Provision of appropriate education and guidance to all beneficiaries regularly to ensure that they understand the nature of the program, mainly because it is not intended to last forever. This education focuses on encouraging beneficiaries to invest some of the monies to income generation activities, which will make them eventually graduate from the program.
- iii. Provision of education regarding the management of funds, the use of technology in conducting surveys, assessments and payment to local leaders such as Village Executive Officers. The payment was facilitated by other source of funds.
- iv. The provision of community session platform made it possible to create awareness in communities regarding the criteria used in selecting eligible households and other awareness information regarding program interventions

### 3.7.3 Project Outcomes

During physical verification, it was also noted that the disbursed fund under TCRP have resulted to significant effects to individual beneficiaries, members of their households, and the community at large who were affected by COVID-19. The program has enabled those unable to have meals to get the required meals. In addition, it has enabled those who could **not** pay bills for their children in school to be able to do so and has changed the economic status of some beneficiaries. For example, some beneficiaries who were interviewed revealed that they have been able to start small



Figure 31: Some of the beneficiaries in Mwanza

businesses by using monies they received from TASAF under TCRP and can now cater for some of their essential needs and those of their families. Also, the physical verification revealed that TASAF beneficiaries had been connected to VICOBA groups in which they borrow and lend to each other and improve their economic activities. Before TASAF funds, there is always a community awareness session through which beneficiaries were trained on basic entrepreneurship skills. It implies that the platform used by TASAF serves as the source of knowledge for the beneficiaries and the community at large.

### 3.7.4 Implementation Challenges

The following Challenges were faced during implementation of TASAF projects under TCRP in some of the LGAs:

- i. Many complaints from citizens from the Villages included in the Program that they qualify as Beneficiaries but were left out for various reasons- despite having asked the relevant officials to be included
- ii. Inadequate tools, especially cars, for monitoring the targeted households.
- iii. The amount of fund allocated was not sufficient hence a lot of people who were entitled to benefit did not. As a result, a lot of complaints were raised by members of the community in particular those who were identified as needy during meetings in their communities and they thought that they have been treated unjustly.

### **3.7.5 Lessons learnt/best practices**

Several lessons were learnt during implementing of TASAF projects under TCRP initiatives. These include the following:

- i. Since beneficiaries were effectively sensitised, they used the funds properly and reduce dependence on cash transfers.
- ii. Using an e-payment system saves both time and costs. Also, the e-payment system increases efficiency and transparency for management purposes.
- iii. In the design of intervention such as provision of social security, there is a need to consider the contextual issues such as availability of heterogeneous vocations to provide a more significant impact. It will allow the development of entrepreneurship skills through post-training support (coaching, mentorship, and supportive supervision) and ensure the sustainability of the intervention.
- iv. The poor and vulnerable households need to be supported with funds and trainings- to be able to create new economic and livelihood resilience through the development of viable and feasible income-generating activities.
- v. Since the overall goal of social security is poverty alleviation, a combination of interventions (such as provision of safety nets, training on entrepreneurship skills and awareness campaigns on health issues) is critical to be included in the project package.

### **3.7.6 Recommendations**

It is recommended that TASAF, in collaboration with LGAs in Tanzania, should continue working together for the vision of providing more technical training on diverse livelihood options/opportunities in their locality. Also, for the sustainability of outcomes, there is a need for PORALG to make sure that community development officers are available, provide with technical support for enhancing their performance, and effectively address the challenges. Moreover, TASAF headquarters should continue to equip LGA offices with the necessary resources and working tools for implementation and supervision of program activities.

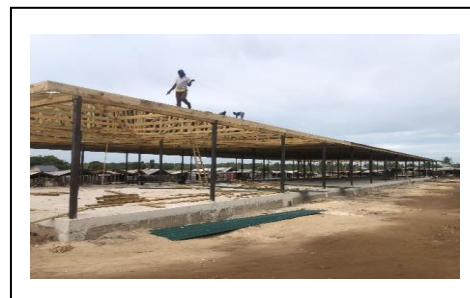
In addition, there is a need to continue enhancing the monitoring and evaluation system which links the monitoring utilisation of disbursed funds between the headquarters and the PAAs. It will enhance the quality of data collection for analysis of the performance of projects.

### **3.7.7 Decongesting and Empowering Petty Traders**

PO-RALG coordinate implementation of citizens empowerment in economic activities especially the informal sector, small vendors (Machinga) including youth, women and the disabled. The aim being to improve living standard of the less privileged and reduce dependency on formal jobs as a way of tackling poverty in the society. A total of TZS 5.00 billion was allocated by TCRP. The

beneficiaries of the fund allocated are from six City Councils of Dodoma, Mwanza, Arusha, Tanga, Mbeya and Dar es Salaam; four Municipal Councils of Kinondoni, Temeke, Ubungo na Morogoro and one Town Council of Tunduma. The funds were transferred to the mentioned Councils on 5th March 2022 amounting TZS 5.00 billion as indicated in **Table 14**.

*Table 14: The amount of fund disbursed into each council*



*Figure 32: Construction of Bunju B Machinga Market in Dar es Salaam*

<b>Councils</b>	<b>Amount Receive TZS (Millions)</b>
Mbeya City Council	540.9
Tanga City Council	540.3
Mwanza City Council	500
Arusha City Council	500
Dodoma City Council	500
Dar es Salaam City	263.1
Morogoro Municipal Council	490.2
Ubungo Municipal Council	398.5
Temeke Municipal Council	441.9
Kinondoni Municipal Council	441.9
Tunduma Town Council	383
<b>Total</b>	<b>5 billion</b>

Source: PO-RALG

As of June, 2022, councils were at the earliest stages of implementation whereby most of the contracts were signed ready for starting construction of the infrastructures with exception of Morogoro MC, Arusha CC and Tanga CC which was still in tendering stage and the contract was expected to be signed by end of July 2022. Dodoma CC was a little bit ahead as it received TZS 500 million to finalize the construction of the Bahi Road market to ensure that petty traders in the Council operate in uncrowded environments. The aim of this initiative was to empower petty traders through creation of enabling business environment and support the construction of business places for youth, women and disabled as a strategy to decongest markets and ensuring that the markets operate in accordance to the health protocols. The implementation of this component delayed as councils were unable to locate suitable areas for the construction of the petty trade centres.

### **3.8 Monitoring and Evaluation Project Activities**

Monitoring and Evaluation was critical to inform progress and continuous improvement of implementation of projects under TCRP mechanisms. Mzumbe University through its Centre of Excellence in Monitoring and Evaluation was allocated a total of TZS 993,667,500.00 to carry out the Monitoring and Evaluation, which was carried out in three phases. The implementation process was as follows: phase one was implemented in quarter two covering the period from July to December, 2022; phase two was implemented in quarter two three and phase three was implemented in quarter four. Three reports were produced, validated by relevant sectors and disseminated to key stakeholders including uploaded to the Ministry of Finance and Planning website.

## CHAPTER FOUR: TRANSPARENCY AND COMMITMENTS

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### 4.0 Overview

The projects under TCRP were implemented in line with the RCF commitment through the Letter of Intent (LOI) that was signed between the Government of the United Republic of Tanzania and IMF for transparency of all activities undertaken through the RCF fund. In that letter, the Government committed to ensure appropriate use of COVID-19-related funds, preparation of the supplementary budget, conducting monitoring and evaluation (M&E), publishing quarterly reports, and publishing the list of pandemics related public procurement contracts and related documents. Other commitments included publishing the audit report of the pandemic-related spending financed with the debt relief received under the Catastrophe Containment and Relief Trust (CCRT), publishing the post-audit report of all pandemic-related spending by December 2022, regularly and transparently reporting and disseminating critical information on the pandemic (testing, cases, deaths, etc.) to the WHO and the public at least weekly. It also committed to publish all information through website, which is easily accessible and searchable, and will include the contact details of Tanzania's relevant agencies in charge of receiving whistle-blowers' reporting about potential conflict of interest and corruption.

The Government has taken several actions to abide to the listed commitment such that most commitments were adhered to including submission of the supplementary budget, publishing quarterly reports, publishing the audit report of the pandemic-related spending financed with the debt relief received under the Catastrophe Containment and Relief Trust (CCRT), and providing updated information on COVID-19 status. Some commitments are close to being finalized particularly publishing the list of pandemics related public procurement contracts and related documents which have been submitted by the implementing sectors. The summary of published contracts for TCRP implementation is as shown in **Table 15** where the total value of contracts published was TZS 1,232.2 billion out of TZS 1,241.7 billion shillings which required contracts, equivalent to 99 percent. The list of pandemics related contracts is published on the easily accessible and searchable website which includes the contact details of Tanzania's relevant agencies in charge of receiving whistle-blowers' reporting about potential conflict of interest and corruption

Table 15: Summary of published contracts for TCRP implementation

SUMMARY OF SUBMITTED CONTRACTS FOR TCRP IMPLEMENTATION							
SECTOR RESPONSIBLE	BUDGET ALLOCATED (TZS BILLION)	WHICH DO NOT REQUIRE CONTRACTS (BILLION)	AMOUNT WHICH REQUIRE CONTRACTS (BILLION)	NUMBER OF SUBMITTED CONTRACTS	VALUE OF CONTRACTS SUBMITTED (TZS BILLION)	% VALUE OF SUBMITTED CONTRACTS	GAP BALANCE (TZS BILLION)
WATER	139.4	0	139.4	224	135.10	97%	(4.3)
HEALTH	263.7	6.829	256.871	1003	256.87	100%	(0.0)
EDUCATION	64.9	0.994	63.906	1362	63.46	99%	(0.4)
PO-RALG - HEALTH, EDUCATION and EMPOWERMENT	494.06	18.31	475.75	196	475.75	100%	-
PMO	3.47	0	3.47	52	3.47	100%	-
TOURISM	90.2	16.46	73.74	134	68.95	94%	(4.8)
ZANZIBAR	230.18	1.58	228.6	98	228.6	100%	-
MOFP	0.298	0.298	0				
TASAF	5.5	5.5	0	-			
<b>TOTAL</b>	<b>1,291.7</b>	<b>50.0</b>	<b>1,241.7</b>	<b>3,069</b>	<b>1,232.20</b>	<b>99%</b>	<b>(10)</b>

Source: Ministry of Finance and Planning

Other commitments were still on progress particularly the preparatory work for the audit of all pandemic-related spending expected to be published by December 2022. The National Audit Office (NAOT) completed the planning phase for the audit of RCF Fund by obtaining monthly data on disbursement of funds to implementing agencies and subsequent payment to suppliers to assist in updating of the audit plan. The office has gathered all required resources and intended to commence field audit of RCF funds in August 2022 alongside their interim audits to October 2022, followed by report writing and quality review in November 2022. NAOT is committed to meet the deadline and publish the report before end of December 2022. The status of RCF commitments is summarised in **table 16** below.

Table 16: Implementation of RCF Commitment

SNo.	RCF Commitment	Status				
1	Report and disseminate critical information on the pandemic (testing, cases, deaths, etc.) to the WHO and the public	<p>The information is published on WHO website weekly and on the website of the Ministry of Health (in Swahili) through the following links</p> <p><a href="https://COVID19.who.int/region/afro/country/tz">https://COVID19.who.int/region/afro/country/tz</a></p> <p><a href="http://www.moh.go.tz/sw/COVID-19-info">http://www.moh.go.tz/sw/COVID-19-info</a> (For Swahili)</p> <p><a href="http://www.moh.go.tz/en/COVID-19-info">http://www.moh.go.tz/en/COVID-19-info</a></p>				
2	Present to parliament a supplementary budget in February 2022 after the mid-year review to properly account for all necessary pandemic spending	Supplementary budget was prepared and presented to the parliament which was then passed and approved by the members of parliament on 18th February 2022;				
3	Create pandemic-specific Integrated Financial Management Information Systems (IFMIS) codes to track RCF spending	<p>The IMS Code to track COVID 19 spending has been prepared which can track spendings in the following sequence;</p> <p><i>Vote, Sub vote, Expenditure type, Project Number, Geographic location, Activity, Fund type, Source of Fund and GFS code.</i></p> <table><tr><td>Chart of Account in MUSE (IFMIS Code</td><td>GFS Description</td></tr><tr><td>052/1005/0000000/202/5441/000/D0 2S15/2/00000/0BF/22001103</td><td>Printing and Photocopy paper</td></tr></table> <p>All COVID-19 spending has been given Project No. 5441</p>	Chart of Account in MUSE (IFMIS Code	GFS Description	052/1005/0000000/202/5441/000/D0 2S15/2/00000/0BF/22001103	Printing and Photocopy paper
Chart of Account in MUSE (IFMIS Code	GFS Description					
052/1005/0000000/202/5441/000/D0 2S15/2/00000/0BF/22001103	Printing and Photocopy paper					
4	Publish quarterly reports of RCF spending related to the RCF financing within one month after the quarter ends on the website of the Ministry of Finance	<p>The 1st and 2<sup>nd</sup> quarter reports were prepared and published on the MoFP website the link:</p> <p><a href="https://www.mof.go.tz/publications/covid-19-documents">https://www.mof.go.tz/publications/covid-19-documents</a></p> <p>This is the third and final report Since it is the last progress report, it is cumulative and more comprehensive, covering the period from October 2021 to June 2022.</p>				



<b>SNo.</b>	<b>RCF Commitment</b>	<b>Status</b>
5	Publish all pandemic related public procurement contracts and related documents, including the names of the awarded companies and their beneficial owners, as well as information on all other pandemic related spending. This website will be easily accessible and searchable, and will include the contact details of Tanzania's relevant agencies in charge of receiving whistleblowers' reporting about potential conflict of interest and corruption	<p>Still on progress but close to being finalized with just a few contracts and related documents remaining from some beneficial sectors. The contracts published in MOFP website are summarized in <b>table 15</b> and can be accessed through the following link:</p> <p><a href="https://www.mof.go.tz/pages/contractsNumber">https://www.mof.go.tz/pages/contractsNumber</a></p> <p>The contact details of Tanzania's relevant agencies in charge of receiving whistleblowers' reporting about potential conflict of interest and corruption is also available on the website and can be found in the following link:</p> <p><a href="https://emrejesho.gov.go.tz/tenganisha_aina_zi_walala_mikaji?OpKxf3S6jCPv4dnCVw0Q4Nt49AWL6Bu4b5O0opcDjiZyvJwali55TPYmMXE3TmWG&amp;to_this_inst=373\$OpKxf3S6jCPv4dnCVw0Q4Nt49AWL6Bu4b5O0opcDjiZyvJwali55TPYmMXE3TmWG">https://emrejesho.gov.go.tz/tenganisha_aina_zi_walala_mikaji?OpKxf3S6jCPv4dnCVw0Q4Nt49AWL6Bu4b5O0opcDjiZyvJwali55TPYmMXE3TmWG&amp;to_this_inst=373\$OpKxf3S6jCPv4dnCVw0Q4Nt49AWL6Bu4b5O0opcDjiZyvJwali55TPYmMXE3TmWG</a></p>
6	Publish the ongoing audit of the COVID-19 related spending financed with the debt relief received under the IMF's Catastrophe Containment and Relief Trust (CCRT) by April 2022	<p>The audit report for CCRT was submitted to the authority <i>and published on the National Audit Office of Tanzania (NAOT) website through the following link:</i></p> <p><a href="https://www.nao.go.tz/uploads/reports/REPORT_ON_THE_AUDIT_OF_UTILISATION_OF_FUNDS_ISSUED_UNDER_THE_CATASTROPHE_CONTAINMENT_AND_RELIEF_TRUST_FACILITY_FROM_JUNE_2020_TO_APRIL_2022.pdf">https://www.nao.go.tz/uploads/reports/REPORT_ON_THE_AUDIT_OF_UTILISATION_OF_FUNDS_ISSUED_UNDER_THE_CATASTROPHE_CONTAINMENT_AND_RELIEF_TRUST_FACILITY_FROM_JUNE_2020_TO_APRIL_2022.pdf</a></p>
7	Sign the Memorandum of Understanding between the Ministry of Finance and Planning and the BOT that clarifies respective responsibilities for servicing financial obligations to the IMF	The first MoU was signed on 24 <sup>th</sup> September 2021 but after the RFI/RCF swap, an addendum was prepared to reflect the swap and was signed again by the two parties (MOFP and BoT) after NDMC meeting on 17 <sup>th</sup> February 2022 recommended for approval

<b>SNo.</b>	<b>RCF Commitment</b>	<b>Status</b>
8	Use a risk-based approach in the review of tax refund and spending arrears claims and clear them timely.	Currently the Government is using risk-based approach in tax refund verification and all verified claims are being cleared on monthly basis
9	Publish the audit report of the pandemic-related RCF spending by December 2022	Initial work has started under the National Audit Office (NAOT) and the Office is committed to meet the deadline

Source: Ministry of Finance and Planning

#### **4.1 Appropriate use and allocation**

The Government continued to ensure RCF fund is released to the allocated priority sectors that were mostly affected by the pandemic, namely health, tourism, education, water supply and social protection in both Tanzania Mainland and Zanzibar. The disbursement of funds to the beneficiary sectors has been upon receipt of valid and eligible documents such as procurement contracts, invoices and receipts that are COVID-19-related spending. Moreover, a smooth implementation was hastened through the provision of VAT exemption to sectors undertaking COVID-19 projects. The Government improved the modality of providing VAT exemption whereby until the period ending June 2022, TRA had exempted tax to 139 projects out of the 152 submitted projects. The remaining 13 projects were waiting for proper documentation

#### **4.2 Supplementary Budget**

The Government prepared a supplementary budget after the Mid-Year Budget Implementation Review which was presented to the parliament to properly account for all necessary pandemic spending. On 18<sup>th</sup> February 2022, the supplementary budget of total 1,310.6 billion shillings was approved and passed by the parliament although the actual amount received in the consolidated fund from IMF under the RCF window was 1,291.74 billion shillings, equivalent to USD 567.25 million. Despite the presentation of supplementary budget to the parliament with a lumpsum on the development expenditure, the amount approved included a total of 601.52 billion shillings capital spending and 478.13 billion shillings current spending and this will also be reflected in the budget books for 2022/23 budget.

### **4.3 Monitoring and Evaluation (M&E)**

The Government has continued to align to the M&E framework which was developed with agreed output/performance indicators to ensure appropriate monitoring of COVID-19 related spending under TCRP. Monitoring progress of implementation involved conducting a series of consultation workshops with relevant officials from key priority sectors to capture the progress and carrying out physical site visit to observe the actual progress on the ground to report progress status for improvement. In addition, the Government reviewed and improved the National Project Management Information System -NPMIS to ensure appropriate monitoring of COVID-19. The system can collect real-time data from implementers at the council and regional levels to the national level needed for analysis and reporting of the TCRP progress. Further, the Government through Internal Audit General (IAGD) has developed audit guidelines for real-time audit of the TCRP fund which is conducted every month to ensure that the fund available is being used as intended.

### **4.4 Appropriate reporting**

The Government through the Ministry of Finance and Planning in collaboration with external evaluator (Mzumbe University through the Centre of Excellence in Health Monitoring and Evaluation - COEHME) continues to consolidate and prepare quarterly reports of TCRP implementation. The first-quarter report (October-December, 2021) and second quarter report (January – March, 2022) were prepared and published on the MOFP's website to stipulate the implementation progress of each sector, challenges encountered and recommendations to ensure effective and efficient implementation of the plan. The Government also continues to abide by the obligation of timely provision of updated COVID-19 status to the World Health Organization (WHO) including the country's COVID-19 cases and deaths as well as total vaccine doses administered. The MOH has been providing updates on COVID-19 status weekly via its website (<https://www.moh.go.tz/announcement>) and updated information of COVID-19 status has been regularly and transparently posted to the WHO website (<https://covid19.who.int/region/afro/country/tz>). As of June 2022, there was a total of 36,174 confirmed cases of COVID-19 with 841 deaths. During the end of the same period, the country had acquired a total of 15,836,220 vaccine doses comprised of Janssen (6,280,350 doses), Cinopharm (4,067,000 doses), Pfizer (4,112,550 doses), Sinova (1,000,000 doses) and Moderna (376,320 doses). A total of 7,617,571 people were fully vaccinated out of the 30,740,928 targeted adult population, equivalent to 24.78 percent.

## **CHAPTER FIVE: CONCLUSION AND RECOMMENDATIONS**

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### **5.1 Overview**

This chapter presents major conclusions and recommendations across five sectors that received funds for implementation of projects under TCRP.

### **5.2 Education sector**

#### **Conclusion**

The construction of classrooms was completed and classes are in use. The increased number of classrooms allowed the majority of secondary schools to have additional capacity to accommodate students within acceptable spacing/social distancing. A number of outcomes have been achieved- which included reduced student congestion and hence minimized risks of COVID-19 infections among students and teachers. In addition, some schools managed to construct staff offices that reduced the shortage of staff offices while simultaneously increasing staff and better working environment and raising the morale of teachers. The construction of satellite schools in remote areas increased access to basic education and reduced social and environmental risks to students who were walking long distances to and from schools. The implementation of the TCRP created many employment opportunities across the country, benefiting both men and women, particularly those in rural areas.

The overall construction and renovation of 25 District Vocational Training Colleges (DVTC) has reached 90 percent. The highest and lowest levels of implementation of these projects were at 93 percent and 73 percent respectively. The construction status of four Regional Vocational Trainings Centre (RVTC) were at various stages- Rukwa (70%), Geita (60.4%), Simiyu (38%) and Njombe (30%). The completion of these training colleges were expected to lay a fundamental role in different career fields giving learners an excellent opportunity to further their careers. In addition, the future graduates from these colleges were expected to satisfy the demands of the labour market where employees with hands-on skills will be produced to improve production and productivity of the economy.

#### **Recommendations**

Increased students and pupils' enrolment because of infrastructural expansion across the country should consider addressing the current shortage of teachers- especially in rural and hard-to-reach areas. Most schools were experiencing a shortage of teachers. Most teachers were teaching many subjects contrary to the standards. The Government should conduct an assessment to establish the actual deficit of teachers after the expansion of school infrastructures. The

construction of toilets in all schools where classrooms were constructed is recommended to improve hygiene and sanitation to reduce the future spread of diseases such as cholera and dysentery. The Government should plan to renovate old classrooms across the country to improve the teaching and learning environment. Based on the observation from physical verification, MOEST should make a close follow-up to ensure timely completion of these projects. The completion of these projects will allow enrolment of students during the 2022/23 academic year. However, the speed of construction and renovation completion should not jeopardize quality standards.

### **5.3 Health Sector (Primary, Secondary and Tertiary)**

#### **Conclusion**

The overall implementation of the projects under the health sector was at 70 percent. The renovation and construction of EMD and ICU was 85 percent, staff houses were 86.5 percent, and the OPD, and Maternal and Child Health Building were at 72 percent. Procurement of all equipment was in the delivery stage and 60 percent of the equipment was already received. Five (5) research projects that aimed to generate evidence that will enable the country to develop vaccines and industry for processing and production of alternative medicine including a laboratory for quality assurance had received Ethical Clearance. Regional Referral Hospitals had recruited 137 contract staff which was 78 percent of the target. Most hubs had completed the installation of telemedicine while the Regional Telemedicine Centre Rooms in 16 Regional Referral Hospitals were in the final stage of installation

#### **Recommendations**

The MOH should make a close follow-up to ensure that the allocated funds are used efficiently to complete the unfinished projects successfully and without further delays. Furthermore, strategies such as mainstreaming the human resource for health deployed under TCRP into the government payroll are recommended for their retention. There should be ministerial (MOH and PO-RALG) collaboration to ensure that medical equipment and medical supplies are distributed and installed in relevant health facilities as planned. Evaluation should be conducted to establish the outcome of the investment made in the health sector to the health systems; and the health outcomes of the general population.

### **5.4 Natural Resources and Tourism Sector**

#### **Conclusion**

Overall, more than 85 percent of projects related to road construction and rehabilitation were completed. The procurement of all equipment and vehicles were in the delivery stage and more than 70 percent of the equipment was

already received. The construction of the gates and revenue collection points in the national parks and game reserves were mostly completed. Similarly, the overall rehabilitation of airstrips were estimated at 90 percent. The construction of cottages for guests were mostly in the finishing stage.

Launching of the Royal Tour was conducted which aimed at promoting Tanzania tourist attractions. The construction of traditional houses at Makumbusho village Dar es Salaam were completed. Similarly, the training of quality assessors and grading for accommodation service providers (hotel assessors) were conducted and completed by 100 percent. COVID-19 protective gears were distributed to 10 tourism associations that have a total of 16,056 members. Training of Trainers for 1,787 enumerators was also conducted.

### **Recommendation**

The sector should make a close follow-up to ensure completion of project activities that does not require immediate funding. The completion process should be well monitored to ensure quality for all activities that crossed the fiscal year to complete projects. The construction and rehabilitation of the roads should be continuous. Make closely monitoring of the machinery, boats and vehicles from to the Public Procurement Services Agency (GPSA) or the relevant Tenderer.

## **5.5 Water Sector**

### **Conclusion**

Projects under the water sector involved rehabilitation, expansion and extension of water supply infrastructure in rural and urban areas as well as procurement of various equipment and accessories. Implementation of these projects ranged between 75 and 100 percent. Delays in supply of materials, especially water pipes, and excessive rains contributed to the delay of most of these projects. Funds for procurement of equipment and accessories had been received in full and committed but delivery was still pending. Delivery of all orders is expected to be completed by September 2022. Similarly funds for rehabilitation and extension of water supply infrastructure had been received in full.

### **Recommendations**

The Ministry should make a close followup to ensure pending procurement and rehabilitation projects are completed as planned. To this end, working closely with suppliers and contractors is highly recommended.

## **5.6 Social Protection Sector**

### **Conclusion**

The overall implementation of social protection through TASAF was at 100 percent. The disbursement of funds was completed as per the scheduled windows. The first disbursement covered the first window and a total of 51,290

households were supported. The second disbursement was for both second and third windows which reached 51,163 and 11,377 households respectively. The last disbursement covered the fourth window and supported 884 households. The main challenge reported from the councils was the existence of two separate handling arrangements (IMF funded project and other donor funds) which was considered as a burden to financial transaction. However, the existence of two separate payment handling arrangements facilitated the process of tracking of TCRP funds and payment reconciliation.

### **Recommendations**

TASAF should continue working in collaboration with the LGAs to provide technical training on various livelihood options/opportunities in their locality. The respective LGAs where the projects were implemented should work with TASAF to ensure that the households that benefited from the support are mainstreamed into /LGAs' funding opportunities available and continued mentorship and coaching for sustainability. In addition, TASAF should continue to undertake evaluation study to establish the utilization of disbursed funds and their impacts on the targeted households.

## APPENDICES

### Appendix 1: Matrix of Implementation Status of TCRP (October 2021 –June, 2022)

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
<b>PRESIDENT’S OFFICE- REGIONAL ADMINISTRATIVE AND LOCAL GOVERNMENT (PO-RALG) – BASIC EDUCATION</b>							
Decongestion of pupils in classrooms and dormitories	Construction of Classrooms in Secondary Schools	Number of Secondary Schools Classrooms	12,000	240,000,000,000	240,000,000,000	100%	The construction of all classrooms has been completed and are in use.
	Construction of Classrooms in satellite Primary Schools	Number of Primary Schools Classrooms	3,000	60,000,000,000	60,000,000,000	100%	The construction of all classrooms has been completed and are in use.
	Construction of dormitories for students with special needs in primary schools	Number of Dormitories for Student with Special Needs	50	4,000,000,000	4,000,000,000	75%	PO-RALG should expedite the construction of dormitories without compromising quality.



TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
Youth, women and disabled empowerment	Decongestion in SMEs by constructing business places for youth, women and the disabled.	Number of constructed business places for youth, women and the disabled in each region	11	5,000,000,000	5,000,000,000	Funds released on 3rd March 2022 (Mbeya CC, Tanga CC, Arusha CC, Mwanza CC, Dodoma CC, DSM CC, Morogoro MC, Ubungo CC, Temeke CC, Kinondoni MC and Tunduma TC)	Contracts for construction signed except for Tanga CC, Morogoro MC and Arusha CC which are expected to be done by 30 <sup>th</sup> July 2022
				309,000,000,000	309,000,000,000		
PRESIDENT'S OFFICE- REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT (PO-RALG)-HEALTH							
<b>Strengthen IN and OUT of Hospital Emergency and Critical Care (Turn-key procurement method)</b>	ICU renovation/Construction and purchase of ICU equipment (in 26 Districts hospitals)	Number of Renovated works/Constructed and Equipment in District Hospitals (26 DHs)	26	6,500,000,000	6,500,000,000	The construction of majority of facility are at final stage. (2 foundation, 7 roofing, 11 finishing 8 completed)	PO-RALG to have a close follow up on equipment to ensure that the building is utilized for intended services.

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
	EMD Renovation/Construction and purchases of equipment (in 80 hospitals)	Number of EMD Renovation/Construction and purchases of equipment	80	24,000,000,000	24,000,000,000	The construction of majority of facility are at final stage. (15 lenta, 30 roofing, 20 finishing 15 completed)	PO-RALG to have a close follow up on equipment to ensure that the building is utilized for intended services.
	Purchase of Ambulances and Land cruiser Hardtop for supervision in all councils, regional secretariat and PO-RALG	Number of Ambulances and Land cruiser Hardtop purchased for primary health care level	407	52,060,000,000	52,060,000,000	Single Source Non - Consultancy Services contract has been signed with UNICEF for 528 vehicles.	The procurement is in delivery stage. Cost saving enabled to increase the number of vehicles to be purchased from 407 to 528 vehicles

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
	Purchases of Motorcycles for all councils	Number of motorcycles purchased	517	1,656,000,000	1,640,692,620	The contract for Single Source Procurement for Goods has been done but not delivered. The deliveries of motorcycles is expected to be delivered by 30 <sup>th</sup> August 2022	PO-RALG should make close follow-up of the procurement to make sure that the good are delivered on time
	Oxygen Supply	Number of Manifold's System for 71 DHs, meter 600 with oxygen outlet 70, Kilwa Road Police and Ukonga Prison College	129	9,855,000,000		National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.
	Portable Cylinder with Flow Meters	Number of portable cylinders with flow meters for 105 DHs,	1,081	637,200,000		National Restricted Tendering has been signed and the procurement are at	PO-RALG is advised to fasten the delivery process to meet

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
		Kilwa Road Police, Ukonga Prison College and Uhuru				delivery stage.	the project implementation timeline.
	Facility-based cylinder with Flow Meters	Number of facility based cylinder with flow meter for 105 District hospital and Kilwa Road Police and Ukonga Prison College and Uhuru;	5,361	3,024,000,000		National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.
	Oxygen generating Plant	Number of Oxygen Generating Plant constructed (Serengeti 1, Tarakea 1, Ngorongoro 1, Nyasa 1, Masasi	13	3,300,000,000		National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
		1, Police Kilwa road)					
	Flow Meters	Number of Flow meters (i.e. 80 wall mounted flow meters) per 105 facilities for 105 District hospitals and Kilwa Road Police and Ukonga Prison College.	14,240	4,280,000,000		National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.
	Aesthetic Machines	Number of Aesthetic Machines procured	80	4,400,000,000	3,920,000,000	National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
	ICUs Equipment	Number of ICUs Equipment procured	28	10,400,000,000		National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.
	EMDs Equipment	Number of EMDs Equipment procured	80	13,927,760,751		National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.
	Hospital Equipment	Number of Hospital Equipment's procured	1,030	5,369,500,000.00	6,026,442,259	National Restricted Tendering has been signed and the procurement are at delivery stage.	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
<b>Strengthen diagnostic services in hospitals</b>	Radiology - Double Detector X – Rays Machines (Construction/ renovation/supply installation/ training and 5 years maintenance contract	Number of Digital X – Rays:	137	22,100,000,000	21,288,786,474	National Restricted Tendering has been signed and the procurement are at delivery stage. The deliveries is expected to be done by the end of 30 <sup>th</sup> September 2022	PO-RALG is advised to fasten the delivery process to meet the project implementation timeline.
<b>Vaccine's supply, delivery and mass campaign</b>	Advocacy for vaccine uptake and mass campaigns (Community awareness and sensitization	Number of outreach services and training of community health workers	lump sum	4,900,000,000	4,900,000,000	Campaign is ongoing. 24.78 percent of target group was vaccinated by end June 2022	Vaccination was still ongoing to reach 70 percent of the target population by December 2022
<b>Strengthen Port of Entry</b>	Construction and equipping of Isolation treatment centres with a five-year	Number of Isolation treatment centres constructed	1	500,000,000	500,000,000	The construction is at finishing stage	PO-RALG to have a close follow up to make sure that construction is

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
	maintenance contract						finished within the time frame
		Number of equipment procured	lump sum	400,000,000			
<b>Improve Health facilities</b>	Construction of Staff Houses and Improving Infrastructure	Number of staff houses constructed	150	13,500,000,000	13,500,000,000	Significant number of houses have been completed and rest are in finishing stage. (3 walling, 42 roofing, 45 final touches and 61 completed)	PO-RALG to have a close follow up to make sure that the remaining houses are completed
		Number of staff recruited	150	641,692,800	641,692,800	Staff recruited on contract terms	
<b>Operations and Research</b>	Conduct 90 short training on critical care, imaging and emergency	Number of short course training on critical care, imaging and	90	1,494,000,000	495,000,000	The training in emergency care will be conducted on September after	The delay of training was caused by delay in receiving the



TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
		emergency (90)				receiving all equipment	equipment.
	Supportive supervision	# Supportive report at PORALG	1	500,000,000	500,000,000	The fund allocated for M&E was reallocated and used to build ICU in Mbulu TC and Bunda DC	The Fund for building ICU was disabused on June and construction is ongoing.
		# of Support Supervision reports at regional level	26	418,407,200	418,407,200	Supportive supervision was conducted and reports were submitted to PORALG after every two weeks for follow up	Final report for the implementation of the ongoing construction still on progress
		# of Support Supervision reports at Councils level	184	1,198,713,448.	1,198,713,448		
<b>Sub Total</b>				<b>185,062,274,199</b>	<b>137,589,734,801</b>		

TCRP IMPLEMENTATION STATUS (OCTOBER 2021- JUNE, 2022)							
Area of Support	Activities	Indicators	Targets	Approved Budget	Amount Disbursed	Implementation Status	Remarks
MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY (MOEST)							

Enabling Teaching and Learning Environment	Completion of Vocational Training Colleges (VETA)	Number of finished and Furnished District Vocational Training Colleges	25	28,762,344,781	28,752,459,189.00	a) Overall Completion of construction and retooling of constructed buildings is at 93%. b) The highest score is 97% for Mbalali and lowest is 73% Lushoto	The VETA has used most of its staff and students in these projects which impact the skills to tutor and Students.
		Number Finished Regional Vocational Colleges	4	21,428,987,719	19,895,382,970.14	a) 83% for Geita, 77% for Rukwa, 75% for Njombe and 77% for Simiyu b) The construction in Arusha Technical	MOEST Should make close follow up to ensure sure that the construction is completed and start its utilization.

						College is at 90% c) Construction of Hostel at Morogoro VTTC is at 68%	
	Provision of Teaching and Learning Materials for Folk Development Colleges (FDCs)	Number FDC colleges equipped with teaching and Learning Equipment	34	6,800,000,000	6,797,605,437.15	45% - A total of 10 Colleges has received equipment and other are waiting for delivery.	MoEST should make a close follow-up on the delivery of the equipment to meet the project implementation timelines.
	Provision of Teaching and Learning infrastructure in Teacher Training Colleges (TTCs)	Number of constructed and furnished lecture theatre at TTCs.	3	1,092,158,767	6,031,580,981.03	70%	The MOEST should make close follow up to finalize the project
		Number of constructed and furnished Classrooms at TTCs.	41	1,536,774,915			
		Number of constructed and	15	2,811,066,318		70%	The MOEST should make

		furnished dormitories at TTCs					close follow up to finalize the project
Access and quality at all levels of education and training strengthened	Printing and distribution of textbooks	Number of Braille textbook printed	10,812	137,670,011	1,032,278,580.50	10,812 copies have been printed and distributed to 901 schools	The text book is in use
		Number of Large text book Printed	10,812	569,329,989			
	Provision of teaching and learning facilities and equipment for students with special needs in 11 higher learning institutions	Number of Students with special needs supported at universities	410	770,000,000	949,912,600.00	All equipment that includes 29 Bajaj, 63 Laptops, 39 Audiometers, 153 Tablets, 9 Embosser, 53 Digital Voice Recorders and 15 Digital Tape Recorders were delivered and distributed to 11 higher learning institutions. The Equipment are in use	The beneficiaries have acknowledged the receipt of equipment and some of Institutions has started using them.
<b>Mzumbe University through</b>	Overseen TCRP Implementation	Number of progress reports produced	3	993,667,500	1,018,655,900	Two reports have been produced and	This exercise enhanced commitments and

<b>Centre of Excellence in Health Monitoring and Evaluation</b>	and provision of monitoring and evaluation service					uploaded in the MoFP website. The third and final report underway	speed in the implementation of TCRP projects in a short period.  Disbursed fund in the second installment was more than requested by TZS 24,988,400. This money will be returned to the MOEST
				64,902,000,000	64,477,875,647		
<b>WATER SECTOR</b>							
Water supply in Urban centers	Rehabilitation, expansion and extension of water supply infrastructures to increase water availability in urban areas	Number of Rehabilitated, expansion, and extension of water supply	46	25,266,069,890.20	25,266,069,890.20	a) 22 projects out of 46 are complete and are in use. b) The lowest project has 67%.	MoW should make close-up supervision to make sure that the remaining projects are finalized and be used for intended

Water supply in Rural areas	Rehabilitation, expansion and extension of water supply infrastructures to increase water availability in rural areas	Number of Rehabilitated, expansion, and extension of water supply	172	79,168,668,565.21	79,168,668,565.21	<p>a) The highest percentage is 99% and the lowest is 20%</p> <p>b) Average implementation status for all 172 projects is 68.4%</p>	purposes.
Equipment	Procurement of bore drilling rigs and accessories	Number Pumping test equipment	25	11,041,153,423	12,103,149,820	The letter of credit has been opened at Bank of Tanzania until the equipment's are received and inspected to affect the payment.	<p>- 4 equipment have been received at Dar es Salaam Port</p> <p>- Last concernment is expected to be received by August</p>
		Number Support trucks	27	6,097,689,311	6,097,689,311	The payment of all trucks has been done	- All trucks have been received and are in use
		Number Submersible Pump and Accessories	4	260,000,000	260,000,000	Two pump and Accessories has been received and the remaining 2 are expected to be	- MOW should make close follow up to make sure that all equipment is

						received by end of July 2022.	received
		Number Generator	2	101,157,266	101,157,266	Two Generator have been procured	- The generator has been procured and received
	Purchase of dam construction equipment	Number of Hydraulic excavator and pad foot roller	5 sets	3,210,000,000	3,210,000,000	The equipment has been received. The inspection is ongoing.	
		Number of dump truck procured	10	3,490,775,800	3,845,053,000	All cars have been received	
		Number of Water bowser procured	5				
		Number of lowbed with tractor procured	2				
		Number of supplies of bull dower procured	5	3,698,224,200	3,698,224,200		All cars have been delivered
	Purchase of groundwater exploration equipment	Number of groundwater exploration equipment	4 sets	7,020,835,344	7,667,278,071	The letter of credit has been opened at Bank of Tanzania until the equipment	The equipment are expected to be received by August

		procured				is received and inspected to affect the payment.	
<b>Sub Total</b>				<b>139,354,573,799</b>	<b>141,417,290,123</b>	<b>The extra financing was mobilised from other sources</b>	
<b>Area of Support</b>	<b>Activities</b>	<b>Indicators</b>	<b>Targets</b>	<b>Approved Budget</b>	<b>Amount Disbursed</b>	<b>Implementation Status</b>	<b>Remarks</b>
<b>MINISTRY OF HEALTH</b>							
<b>To strengthen IN and OUT of Hospital Emergency and Critical Care (Turn-key procurement method)</b>  Vaccine's supply, delivery and mass campaign  <b>Strengtheni</b>	ICU renovation, construction and equipping EMD	Number of Renovated/ constructed ICU at Muhimbili National Hospital (MNH),	5	1,000,000,000.00	1,000,000,000.00	The renovation has been completed by 100%	This has increased the Bed capacity from 68 to 88
	Renovation/Construction and procurement of equipment	Number of Renovated/ constructed ICU at ORCI, Kibong'oto, Mirembe, JKCI)	7	1,999,884,447.00	1,999,884,447.00	"The Renovated/ constructed is between 75% and 100%.	Renovation/Construction and procurement of equipment
		Number of Renovated/ constructed ICU at Zonal Referral Hospital (Mbeya,	7	1,597,238,986.71	1,597,238,986.71	The implementation status range between 97% and 100%	This has increased bed capacity from 45



<b>ng of Port of Entry</b>  Improvement of Health facilities  Operation and Research		KCMC, BMH, and Bugando)					to 131
		Number of Renovated/ constructed ICU at Regional Referral Hospital	25	10,629,512,580.00	10,629,512,580.00	The Implementation range from 60 to 100%	This has increased bed capacity from 73 to 655
		Number of Renovated/ Constructed EMD at Regional Referral Hospital	19	9,257,030,239.13	9,257,030,239.13	The Implementation range from 60 to 100%	The number of EMDs increased from 19 to 21 due to user demands and priorities. This has increased bed capacity from 49 to 425
		Number of hospitals equipped with mattress, Bedside lockers and Cardiac table , EMD ,ICU, Medical Gas and Lab equipment	21	68,093,343,812.92	68,093,343,812.92	The contracts to procure all equipment was engaged and 60% of equipment have been delivered to respective health facilities and	Fast track the delivery

		procured for 21 Hospitals (Medical Oxygen Generating Plant for Iramba included)				installation is on progresss	
	Purchase of other equipment and facilities Strengthening Diagnostics Strengthening Telemedicine practice	Number of cars procured (96 for MOH and 407 for PORALG) Land Cruiser Hard Tops (262), Basic Ambulance (373), Advanced ambulance (20) and Blood Collection Vans (8)	96	17,404,178,617.73	17,404,178,617.73	135 cars will be delivered by Instalment from June 2022	Cost saving enabled to increase the number of vehicles from 96 to 135 for MoH 82
		Number of radiology equipment procure (MRI 5, CT-Scan 30, Digital x-rays 39, Echo Cardiograph 7 and 1 mini Angio Suite)	82	83,309,553,481.70	83,309,553,481.70	Rehabilitation of the room to install the equipment is between 25% and 100%.  The equipment will start to be delivered as from early July to 30th January, 2023	The MOH is advised to make a close follow up on the delivery processes

						The delivery of the equipment is expected to start June to September 2022	
		Additional Medical equipments procured by MSD		7,442,119,430.81	7,442,119,430.81	The equipment will start to be delivered as from early July to 30th January, 2023	The MOH is advised to make a close follow up on the delivery processes
		Number of Hub (7) and Spokes (16) for Telemedicine	23	4,515,642,354.24	4,515,642,354.24	The implementation status has reached 95%	
	Laboratory Capacity	Enhanced Electronic lab management information system in NPHL (desktop computers, laptops, data communication	1	212,500,000.00	212,500,000.00	The progress is at 90 percent of the implementation	The system will lead to reduced clerical work, better evaluation of workload, faster communication and many other advantages
		To strengthening Laboratory	1			continuing with configuration. The	

		capacity to through provisioning Gene sequencing (COVID & CANCER) to Decentralized COVID 19 Testing Lab by June, 2022		300,000,000.00	300,000,000.00	implementation has reached 70%	
		To strengthening Laboratory capacity through provisioning of reagents to Kigoma, Kahama, Mara, Dodoma, Mt MERU, Tanga, Mtwara by June, 2022		1,500,000,000.00	1,500,000,000.00		
	Deployment and distribution of vaccine and COVID -19 Test Kits	Number of Vaccine dosage procured	311765	5,153,275,962.88	5,153,275,962.88	The payment of deployment and distribution has been done using TZS 5.1 billion. The remained fund has been transferred to Mlongazila to procure medical	

						equipment	
	Advocacy for vaccine uptake and Mass campaigns	Number and type of advocacy and mass campaigns conducted	1	4,536,696,474.26	4,536,696,474.26	TZS 720 million have used for campaign. The MoU have signed with BMF to continue with campaign with remaining TZS 3.8 billion..	It is expected that the campaign shall lead to the increase of uptake of COVID – 19 Vaccine
	Construction and equipping of Isolation treatment centres with five-year maintenance contract	Number of constructed and equipped Isolation treatment at Mloganzila Academic Hospital	1	1,403,065,771	1,403,065,771	Implementation status range from 5%	MoH should expedite the process to ensure that activities are conducted timely

	Rehabilitation and Renovation of Staff Houses and Improving Infrastructure	Number of staff houses rehabilitated and renovated at Region Referral Hospital	26	2,338,393,560	2,338,393,560	The construction is at 86.5%.	The delay for completion of construction of few houses was caused by lack of spaces to build the house
		Number of OPD improved at Sokoine -Lindi, Ligula, Ukerewe, Maweni, Songea	5	15,000,000,000	15,000,000,000	Implementation status range from 11% to 50%	MoH should expedite the process to ensure that activities are conducted timely
		Number of Maternity wing constructed at Kitete & Katavi	2	6,000,000,000	6,000,000,000	Implementation status range from 72%	Good progress but, MoH should expedite the process to ensure that activities are conducted timely
		Number of facilities for provision of services at Mirembe	1	3,000,000,000	3,000,000,000	Implementation status range from 70%	Good progress but, MoH should expedite the process to ensure that activities are conducted timely

		Number of Centre for Public Health Education	1	2,744,641,998	2,744,641,998	The implementation is 18%	The construction delays due to high price from contractor
	Research and Survey conducted by NIMR and other local institution as well as procurement of equipment for alternative medicines	Number Operation research and surveys conducted	6	6,100,000,000	6,100,000,000	Generally all 6 research have received ethical clearance and are at the average of 60 percent of implementation.  The procurement of equipment for processing, production and quality control of alternative medicine. It is expected to be installed by July.	The MOH has to take advantage of the research outcome for the betterment of health future of Tanzanians and the world at large
	Capacity Building	Number of staff supported in short courses and professional studies	582	1,643,569,985	1,643,569,985	438 Doctors and Nurses 130 Radiographers, 14 Radiologist has been planned for training. The last batch will be	The MOH has to keep on training relevant cadres so that the equipment procurement

						completed by 08/07/2022	benefits the majority
		Number of deployments of radiographer, ICT and biomedical volunteers in 28 Regional Referral Hospitals	179	312,510,000	312,510,000	A total of 137 which 78% of the targets has been deployed 36 Radiographer, 59 Biomedical technician & 42 ICT	The MOH has to have a sustainability plan for the respective contracted personnel
		POE		2,415,493,019.28	2,415,493,019.28	Procurement of Motorcycles and Vehicles for Port of Entries of which is under procurement	
				770,901,177.31	770,901,177.31	PPE for port of Entries and procured and already in use	
		HEU-Printing unit, materials & ICT		5,048,515,100.00	5,048,515,100.00	Purchase of Printing Materials, Printing machine and ICT equipment of which is still under	



						procurement	
<b>Sub-total</b>				263,728,066,997.97	263,728,066,997.97		
<b>Area of Support</b>	<b>Activities</b>	<b>Indicators</b>	<b>Targets</b>	<b>Approved Budget</b>	<b>Amount Disbursed</b>	<b>Implementation Status</b>	<b>Remarks</b>
<b>MINISTRY OF NATURAL RESOURCES AND TOURISM (MNRT)</b>							
	Construction of guard trail in Gilman's area to Uhuru peak 1Km - Repair of crossings through Lava tower - Baranco, Construction of trail 6.5Km from second cave-Kileleni National Park	Number of kilometers constructed	7.5	103,934,400	103,934,400	98.6%	The project is under the defect's liability period
	Rehabilitation of Walking trails (trails) 6km at Mweka hut to Millenium, 4 km from horombo to Last water point at Kilimanjaro Nationa	Number of kilometers constructed	10	277,769,640	277,769,640	90%	The construction the construction is expected to be completed by 30 <sup>th</sup> July 2022

<b>TANAPA</b>	Park.						
	Construction of mountain roads using concrete (rigid pavement) 0.7 km Kilema area to Horombo Kilimanjaro National Park.	Number of kilometers constructed	0.7	294,020,600	294,020,600	60%	The construction is still on progress. The challenge is the continuous rains
	Construction of five (5) Helipads on Mount Kilimanjaro in Kilimanjaro National Park.	Number of helipads constructed	5	122,000,790	122,000,790	90%	The construction work of four (4) helipad has been completed and the remaining 1 work is in progress. The challenge is the continuous rains.
	Repair of road infrastructure 40 km Kenyangaga-Lamai area in Serengeti National Park.	Number of kilometers of roads repaired	40	1,262,173,737	1,262,173,737	36%	The contractor has ploughed a total of 37 km and laid 4 km of gravel and the construction of 2 pipe culverts has been completed.

	Repair of road infrastructure 220 km Ikoma Junction, Dala bridge, tourist roads Seronera, Seronera Turner Spring, and Migration Camp - Kichwa Tembo and 80 km Kenyangaga - Lamai - Kogatende.	Number of kilometers of roads repaired	300	3,016,394,961	3,016,394,961	38%	This project is in the stage of road grading. The contractor has ploughed a total of 151 km and 39 km have been laid in gravel.
	Repair of road infrastructure 110 km in Ndutu Kusini and Duma to Vilima Rasta in Serengeti National Park.	Number of kilometers of roads repaired	110	1,520,826,197	1,520,826,197	35%	The project is in the grading stage. The contractor has ploughed a total of 70 km, laid gravel (gravelling) 15 km and 4 crossings.
	Construction of the Grumeti River Bridge within the Serengeti National Park	Number of bridges constructed	1	444,324,407	444,324,407	35%	The implementation of the project is in the basic stage (abutments and piers) of the

							bridge.
	Maintanance of Kuro Bridge in Tarangire National Park.	Number of bridges repaired	1	133,891,886	133,891,886	98%	The bridge is currently in use. The project is under the defect's liability period
	Repair of road infrastructure 105.5 km Kibaoni-Kuro area via Nyani camp, Matete-Mamire through TTCL and repair of Kuro airport.	Number of kilometers of roads repaired	105.5	1,353,960,910	1,353,960,910	87%	The road has been paved for 86 km, with 20.7km of rubble dumping work, construction of 7 crossings has been completed, Kuro airport renovation is 99% complete and work is in progress
	Road infrastructure repair 133.8 km Gurusi area, Kuro bridge, Tembo-Sangaiwe Plateau, Tarangire Hill, Mibiyu Mingi, Kuro-	Number of kilometers of roads repaired	133.8	1,257,732,500	1,257,732,500	98%	The work of carving 133.8 km of roads, construction of 18 crossings, pouring rubble and pressing 18.6

	Chubi in Tarangire National Park						km and digging of ditches (Mitre drains) has been completed. The project is under the defects liability period
	Gravelling from Kinyonga- Mbuga ya Meli- to 9A Length of 17km and 14km, Malumbi drive Via no 10, 9A to Porokanya.	Number of kilometers of roads gravelled	31	833,389,160	833,389,160	70%	Slashing, cleaning and scraping the road (29km), raising the embankment (10km), and dumping debris (10km).The construction of 9 culverts has been completed and the work is on progress.
	Construction of a toilet in the area of the Airport (Airstrip) in Saadani National Park	Number of toilets constructed		94,926,213	94,926,213	75%	Plastering and ceiling installation is complete; construction of 2 sewage pits, laying marble,

							doors and windows, and "sanitary appliances" is ongoing
	Repair of road infrastructure (146 kilometres) in Mkomazi National Park.	Number of kilometers of roads repaired	146	964,956,682	964,956,682	80%	The work of carving the road (120 km), construction of 4 crossings, carving, pouring rubble to cover 14.9 km has been completed, the construction of Box culvert and rubble is in progress
	Construction of two toilets, and renovation of the Mkomazi airstrip.	Number of toilets constructed	2	474,283,862	474,283,862	80%	The well plot, roofing work has been completed with shade and toilet. The construction of sewage pits and plaster has been

							completed, Kajificheni plot, roofing work and the construction of sewage pits is in progress.
	Construction of a gate (Revenue Collection Centre) at Zange area in Mkomazi National Park	Number of gates constructed		2,129,862,865	2,129,862,865	81%	The construction of sewage pits and the maintenance of access roads and car parking is ongoing
	Repair of 140.5 kilometres of road infrastructure in Katavi National Park.	Number of kilometres of roads repaired	140.5	1,647,313,000	1,647,313,000	43%	The contractor has poured 28.5 km of rubble and covered 16 km and the digging of trenches in the road is ongoing. So far 49 km have been light graded.
	Repair of footpaths (trails) 10 km Gombe reserve.	Number of Kilometres of roads repaired	10	74,894,600	74,894,600	100%	The project is under the defect's liability period

	Construction of 100km at Ligombe-Naluale, Mdegere-Mbalang'andu Nyerere National Park	Number of Kilometres of roads repaired	100	642,506,012	642,506,012	2%	The construction is still on progress. The challenge is the continuous rains
	Construction of road infrastructure 28 km area of Kidongo Chekundu and springs; road camp and Umasaini in Nyerere National Park.	Number of kilometres constructed	28	598,005,946	598,005,946	70%	The carving of 7 km of roads and the construction of crossings/drift 5 crossings have been completed. Heavy rainfall was a challenge.
	Construction of 130km from Liwale Junction via Ndegere at Nyerere National Park.	Number of kilometers of roads repaired	130	741,911,477	741,911,477	29	The construction is still on progress. The challenge is the continuous rains
	Construction of 100km at Kalulu Via Mpakani-	Number of kilometers of roads repaired	100	611,685,925.78	611,685,925.78	26%	The construction is still on progress. The



	Mkuyu at Nyerere National Park						challenge is the continuous rains
	Construction of 80km from Boma Ulanga to the junction of River Luhombero at Nyerere National Park.	Number of kilometers of roads repaired	80	1,075,553,598	1,075,553,598	22	The construction is still on progress. The challenge is the continuous rains
	Rehabilitation of air strip at Boma Ulanga and Likuyu-Sekamaganga	Number of kilometers of air strip repaired	1.5	1,195,272,456.80	1,195,272,456.80	5%	The construction is still on progress. The challenge is the continuous rains
	Construction of Revenue Collection Centres at Msolwa and Likuyu-Sekamaganga Nyerere National Park	Number of Revenue collection Centre constructed	2	4,254,722,568.56	4,254,722,568.56	13%	The construction is still on progress. The challenge is the continuous rains
	Construction of	Number of	1	392,882,227	392,882,227	48%	The construction

	information centre at Major Gen. Kijuu (Mst) Burigi -Chato National Park	information centre constructed					is still on progress. The challenge is the continuous rains
	Construction of Generator house at ZANGE -Mkomazi National Park	Number of Generator house constructed	1	19,870,862	19,870,862	100%	Construction of Generator house has completed
	Construction of Generator house at MSOLWA at Nyerere National Park	Number of Generator house constructed	1	19,639,920	19,639,920	20%	The construction is still on progress. The challenge is the continuous rains
	Generator house at Likutu Sekamaganga at Nyerere National Park	Number of Generator house constructed	1	19,462,920	19,462,920	40%	The construction is still on progress. The challenge is the continuous rains
	Supply and Installation of Solar	Number of Solar powers installed	3	208,208,206.28	208,208,206.28	15%	The construction

	Power System Three Units for Gate Office and Staff Houses at Likuyu sekamaganga, Msolwa and Mkomazi Gate						is still on progress.
	Purchase of Fleet Management system	Number Fleet Management Systems procured	1	967,132,012.	967,132,012.	18%	The process of installing the fleet management system is continue
	Purchase of 7 Vehicles (L/Cruiser Double Cabin)	Number of vehicles purchased	7	1,044,111,887.96	1,044,111,887.96	80%	The payment for the seven (7) vehicles has been done to GPSA
	Purchase of 12 Lorries Low bed 4 and Water bowser 4	Number of vehicles purchased	12 lorries 4 low beds 4 water bowzers	9,286,777,000.00	9,286,777,000.00	95%	The amount saved to has been used to add three more lorries. The Addendum contract for Purchase of additional lorries has been done.

							<p>12 Lorries and 4 water bowzers has already received.</p> <p>The remaining 3 lorries will be delivery by 30<sup>th</sup> August 2022</p>
	Purchase of 7 Vehicles (L/Cruiser Double Cabin)	Number of vehicles purchased	7	7,434,643,138.00	7,434,643,138.00	80%	The payment for the seven (7) vehicles have been done to GPSA
	Purchase of Machinery grader, Excavator and vibrator soil compactor.	Number of vehicles purchased	<p>4Grader</p> <p>4Excavator</p> <p>4 Excavator</p>	348,378,657.00	348,378,657.00	62%	<p>The amount saved has been used to add 1 grader. The Addendum contract for Purchase of additional grader has been done.</p> <p>4 Excavator and 4 Grader 4 has already received at Tarangire Natinal Park</p>

							The grader is expected to be delivered by 30 <sup>th</sup> September 2022
	Purchasing of Revenue Collection Systems at Mkomazi (Zange) and Nyerere (Msolwa na Likuyu-Sekamaganga) gates	Number of Revenue collection systems	2	110,806,061.35	110,806,061.35	30.6%	The installation of the system is still on progress.
	To facilitate 20 Public Official expert for 30 days in collaboration with the Ministry of Health in improving access to vaccination for 400 Tourism business providers in some of the National Parks	Number of public officials facilitated	20	223,828,875.84	223,828,875.84	100	20 Public officials' expert was deployed to improve access to vaccination to 400 tourism business providers
	Supply of three units' standby	Number of Generator	3	90,189,524.00	90,189,524.00	65	The generators have already

	generators for gate office and staff houses at Likuyu Sekamaganga, Msolwa and Mkomazi Gate	supplied					purchased and now the installation process is continued
	Water Supply System (Drilling of Borehole and Solar Pump Installation) Likuyu Sekamaganga	Water supply System installed and solar installation	1	97,491,605.90	97,491,605.90	5	The installation of the system is still on progress.
	Water Supply System (Drilling of Borehole and Solar Pump Installation) Mkomazi	Water supply System installed and solar installation	1	89,916,000.00	89,916,000.00	50	The installation of the system is still on progress.
	Procurement of Office Furniture			283,770,994.94	283,770,994.94	70%	Furniture has already procured and the remaining task is to delivery to the respective offices
	Insurance for Vehicles and	Number of vehicles and	44	550,000,000.00	0.00	0	This process will be processed after arrival of all

	Plants	Plants installed					vehicles and plants
	Supply and Installation of 3 Water tanks at Likuyu, Msolwa and Mkomazi gates	Number of water Tanks	3	479,108,130.00	0.00	15	The contract has signed since 29 June 2022 and the funds were not received from the ministry of Finance and Planning  But the contractor has already supplied the product
<b>NCAA</b>	Repairing 80 kilometers of roads in the Ngorongoro Conservation Area	Number of kilometers of roads repaired	80	2,305,602,000	2,305,602,000	100%	The repair of the road from Golini to the Senate Junction 55km and 25km from Olduvai to Nasera Rock was completed
	Procurement of 8 vehicles (2 small trucks, 4 trucks, and 2 Water Boza)	Number of vehicles and machines procured	2 Small trucks 4 Trucks,	4,339,656,276	4,339,656,276	50%	Funds to procure two small cars have been paid to GPSA, and the

	and 3 machines (Motor Grader, wheel excavator and Vibration Roller) for Road Construction		2 Water Boza 3 Machines (Motor Grader, wheel excavator and Vibration Roller)				vehicles are expected to be received before September 30, 2022  The procedures for procurement of Water Boza, Motor Grader, Wheel excavator and Vibration Roller and trucks have been completed and the machinery is expected to be received in September, 2022.
	Construction and repair of 463.5 km road network	Number of kilometres constructed and repaired	463.5	4,832,027,255	4,832,027,255	72.3%	The construction of 336.2 km out of 463.5 km has been completed in the forests of Akiba Wami Mbiki, Kijereshi,



TAWA							Mkungunero, Lukwika Lumesule, Liparamba, Igombe, Maswa and Rungwa
	Renovation of three (3) airstrips (Maswa -2 and Lake Natron -1)	Number of airstrips renovated	3	199,570,000	199,570,000	84%	The renovation of the Lake Natron airstrip has been completed and the work of dumping debris in the airstrip in Maswa Forest Reserve is ongoing.
	Construction of gates and revenue collection centers – 6 in Wamimbiki, Mkungunero, Swagaswaga, Kijereshi and Lake Natron Reserve Forests	Number of large gates constructed	4	1,585,960,000	1,585,960,000	92.75%	The construction of four large gates in the forests of Wami Mbiki, Mkungunero, Kijereshi and Swagaswaga are in the final stage. The construction

							of two small gates in the Tengefu forest of Lake Natron has been completed.
	Construction and renovation of 15 accommodation infrastructure including tourist camps (4), picnic sites Six (6) and cottages Eleven (11)	Number of accommodation infrastructure constructed and renovated	15	2,450,376,884	2,450,376,884	95%	The procedures for the purchase of 559 guest tents have been completed and were received in June 2022.
	Construction of pedestrian paths 1.65 kilometers (walkways in Pori la Akiba Mpanga Kipengere and Pori Tengefu Lake Natron)	Number of kilometres constructed	1.65	171,120,000	171,120,000	83%	The construction of pedestrian paths in the isolated forest of Lake Natron has been completed. Road construction in Mpanga Kipengere Forest Reserve is on progress.

	Procurement of vehicles (6) and machinery (3). Procurement of Boats (Amphibia boat-1, Motor Boat-4 and Glass bottom boat-1)	Number of vehicles procured	6	3,738,999,999.90	3,738,999,999.90	90%	Procurement of three out of six rhino tracking vehicles were completed while three paid at GPSA
		Number of boats procurement				85%	Procurement of six boats were completed and are expected to be received in July, 2022.
<b>TFS</b>	Rehabilitating 96 kilometers of roads in 11 forests and improving 190.5 kilometers of tourist trails in the forests of ten nature reserves (10	Number of kilometers rehabilitated	96	3,067,809,346	3,067,809,346	83%	The road repair of 80 km out of 96 km in the eleven (11) nature reserves of Magamba, Pugu-Kazimzumbwi, Nilo, Chome, Essimangor, Mount Hanang, Mount Rungwe, Kalambo Falls, Uluguru, Amani

							and Matogoro were completed
		Number of kilometers improved	190.5			83%	The renovation of 164 km out of 190 footpaths in ten (10) Magamba, Pugu-Kazimzumbwi, Nilo, Chome, Essimigor, Mount Hanang, Mount Rungwe, Kalambo Falls, Amani and Matogoro reserves were completed.
	Construction of five gates in Amani, Nilo, Mlima Hanang, Pugu/Kazimzumbwi and Matogoro forest reserves	Number of gates constructed	5			80%	The construction of five (5) gates in nature reserves Amani (1), Pugu-Kazimzumbwi (1), Mount Hanang (1) and Matogoro (1) and Nilo (1) were in the final

							stages.
<b>TTB</b>	Sustaining the Royal Tour Program by collecting various statistics on tourist attractions			6,000,000,000	6,000,000,000	80%	Fully participated in the launch activities of The Royal Tour Program held in the cities of New York, United States, Los Angeles, United States, Arusha; Zanzibar; and Dar es Salaam. The process of procuring 32 vehicles is ongoing and are expected to be received in September, 2022.
	To organize and participate in two (2) tourism events and exhibitions by September 2022	Number of tourism events organised and attended	2	4,000,000,000	4,000,000,000	100%	Participated in two (2) international tourism (FITUR in Spain) and (Expo Dubai)

						30%	Ongoing preparation to participate in Road Show in the countries of Germany, Denmark and Sweden that will end on September 2022.
	Completed the establishment of the Digital Studio			568,000,000	568,000,000	80%	Software procurement for enabling the monitoring and provision of tourism information (Digital Command Centre) is ongoing and is expected to be completed in August, 2022. This work is 80 percent complete.
<b>NMT</b>	Rehabilitation of	Number of	6	912,100,000	912,100,000	50%	Rehabilitation of

	tourism infrastructure and ruins in six (6) areas: Mikindani, Tendaguru, Lindi, Kua, Kimbiji, and MbuaMaji.	tourism infrastructure and ruins rehabilitated					tourism infrastructure and ruins in progress.
	Building and renovating the storage and exhibition infrastructure in six (6) museums: House of Culture, Village of Museums, Arusha Declaration, Elimu Viumbe, Majimaji and Mwl. Nyerere, and procurement of an exhibition vehicle.	Number of exhibition infrastructure built and renovated	6	1,290,050,000	1,290,050,000	100%	This activity has been completed; including the procurement of exhibition vehicle as well as Chassis and Cabin were completed.
	To purchase information and communication technology	Number of information and communication technology	6	247,850,000	247,850,000	99%	Installation of a security camera system in the centers of the

	equipment for exhibitions in six (6) museums: House of Culture, Village of Museums, Arusha Declaration, Educational Creatures, Majimaji and Mwl. J.K. Nyerere (Butiama)	equipment procured exhibitions in six					Mwl Nyerere Museum in Butiama and Elimu Viumbe in Arusha is at the final stage.
NCT	Providing training to 100 tourism business operators for seven days 7 for the 8 most affected regions on strategies to increase the tourism sector	Number of tourism business operators trained	1072	426,000,000	426,000,000	100%	Trainings were conducted to operators in Mtwara (109), Lindi (146), Mara (167), Ruvuma (124), Iringa (127), Mbeya (132), Mwanza (167) and Njombe (100).
	Provide quality assessment and grading training for accommodation	Number of quality assessment and grading training for	50	797,044,000	797,044,000	100%	Trainings were completed as per the plans.



	service providers to 28 public officials, 14 private sector stakeholders and 8 hotel quality testers	accommodation					
<b>Mweka</b>	To provide training on how to deal with the effects of COVID-19 for 1060 tourism service providers in the country.	Number of tourism service providers trained	1060	1,011,000,000	1,011,000,000	100%	Training was conducted in Tarangire, Saadan, Ruaha, Serengeti, Lake Manyara National Parks; and the Ngorongoro Area Park Authority.
<b>DT</b>	Training for 150 tourism service providers in each region in 26 regions regarding the guidelines for dealing with the epidemic of HIV-19 in the tourism sector	Number of tourism service providers trained	3900	672,370,000	672,370,000	120.46%	Training for 4,698 tourism service providers has been provided in 26 regions and has been completed. In the training, a total of 344 participants received UVIKO-19 vaccination voluntarily.

	The purchase of IT equipment to support activities to improve tourism services by strengthening the performance and collection of government services.			135,085,000	135,085,000	100%	These devices are expected to be received by September, 2022
	Provide protective equipment to deal with COVID 19 to 15 tourism associations in the country	Number of tourism associations provided with Covid-19 protective equipments	15	222,000,000	222,000,000	99.5%	Purchase of protective equipment including 14,285 hand sanitizers with a volume of 500mls each and 50 masks with a total of 2,800 masks have been purchased from the MSD. The handling processes is ongoing.
	Procurement of six	Number of cars	6	805,001,000	805,001,000	70%	Payment for six

	(6) cars	procured					(6) vehicles through GPSA has been completed and these vehicles are expected to be received by September, 2022.
MNRT- ICT	Strengthening the Electronic Evaluation system for the planning of Accommodation Services and food in the quality of bridges			650,380,000	650,380,000	66.2%	Improvement of the building the system is ongoing and to date including entering questionnaires with a total of 13,398 questions of 8 types of accommodation and food services in accordance with the criteria of the East African Community has been uploaded.
	Improving the			249,620,000	249,620,000	55%	A total of 35 out

	Collections system of MNRT Portal						of 66 transactions queries of the MNRT Portal system have been worked on and completed. In addition, a total of 26 out of 28 modules of the MNRT Portal system have been worked on and completed
<b>MNRT-DRT/DPP</b>	Stand-alone domestic tourism survey and calculate the contribution of the tourism sector to the National GDP			1,799,999,999	1,799,999,999	90%	Training of Trainers and enumerators, collection of information in the field, classification of information (data analysis & processing) and preparing preliminary information on domestic tourists

							and contribution to the National GDP has been done. The first draft of the domestic tourism research report has been submitted to the Ministry and comments have been made.
<b>TANZANIA SOCIAL ACTION FUND (TASAF)</b>							
<b>Cash transfer program</b>	Provision of financial support to 34,641 poor households in order to help them improve consumption (160,000 per household)	Number of poor households supported	34,641	5,499,622,000	<p>TZS 2,456,674,000 (51,290 Households for window 1)</p> <p>TZS 2,454,728,531 (51,163 Households for window 2)</p> <p>TZS 585,807,858 (11,377</p>	<p>The disbursement has been achieved by 100%</p> <p>51,290 received cash transfer once. The number of beneficiaries continues to decrease in the subsequent windows on account of</p>	Beneficiary households supported were more than targeted number of household but the amount received per household was less than what was planned initially to maintain the

					Households for window 3) TZS 45,303,611 (884 households for Window 4) <b>(total of TZS 5,542,514,000</b>	resource constraint and natural exit. As a result, 51,163 households received the funds twice (i.e in the first and second window), 11,377 households received cash transfer in the first, second and third window and 884 received the funds in all windows.	same allocated budget.
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