Organization	HIJBA (HIJBA Organizatio	n for Welfare and Developr	nont)						
Organization	, ,	•	·						
Project Title		asic secondary health servi districts of south central So				e populations in			
CHF Code	CHF-DMA-0489-512								
Primary Cluster	Health Secondary Cluster								
CHF Allocation	Standard Allocation 1 (May	/ 2013)		Project Duration		12 months			
Project Budget	314,400.00								
CAP Details	CAP Code	SOM-13/H/56506		CAP Budget					
	CAP Project Ranking	B - MEDIUM		CAP Gender Marker					
Project Beneficiaries			Men	Women	Total				
	Beneficiary Summary								
			Boys	Girls	Total				
		Total							
	Total beneficiaries inclu	ide the following:							
	Children under 5		2,270	2,754	5,024				
	Women of Child-Bearing	Age	0	8,175	8,175				
	Pregnant and Lactating V	Vomen	0	3,200	3,200				
Implementing Partners									
Organization focal point	Name: Dr. Edward Rick C	Okoth Title: Country Prog	ram Manager						
contact details	Telephone: +254721216	8806 E-mail: e.okoth@hij	ra.or.ke						

1. Project rationale. Humanitarian context: Give a specific description of the humanitarian situation in the target region based on newest data available (indicate source) (Maximum of 1500 characters)

Displacement in Somalia is a phenomenon that is extensive, historic, recurrent and continuous. Somalia is a country in complex emergency due to its long lasting civil war of over 20 years combined with recurrent natural disasters including droughts and floods. The health status of Somalia's estimated 7 million population (UNDP, 2005) has been severely affected by the conflict. Lower Shabelle has an estimated population 850,651 with a rural/urban split of 80/20 per cent (UNDP, 2005). Lower Shabelle has the largest concentration of IDPs with 496,000 people, including 406,000 in Afgoye (UNHCR IDP statistics, July 2012). The urban population of the Nugaal region is 54,749, 6000 of whom are classified as being stressed while 3000 are reported to be in crisis (FSNAU Feb 2013)There has been a near total collapse of the health care system resulting in a health care service in a very profound crisis. The continued conflict, recurrent natural disasters and adverse economic conditions coupled with a near zero investment in health infrastructure and services has led to very limited access to primary health care services in Afgoye and Wanla Weyn districts in the Lower Shabelle region and in Garowe in the Nugaal region. These and other factors including disease outbreaks, poverty and population movements has exacerbated the situation devastating women, men, boys and girls, their families and communities in varying aspects. Partnering with PAH Hijra will use their offices to start operations

2. Needs assessment. Describe the capacities in place, then identify the gaps (previous and new). Explain the specific needs of your target group(s) in detail. State how the needs assessment was conducted (who consulted whom, how and when?). List any baseline data

Though recent data is unavailable due to a previously inaccessible area, the target districts have much lower morbidity and mortality indicators than the ones mentioned for Somalia. According to the FSNAU 2013 report the GAM in most of the accessed rural South central was reported at > 15% while that projected (February - April 2013) for lower Shabelle region is between 10 and 14.9% (classified as serious situation). The GAM reported for Afgoye town was < 10% while SAM for the same town was reported at < 5%. The CDR for Afgoye town in lower Shabelle is reported at roughly 0.7 (per 10,000 per day) while the U5DR is reported at 1.4 (per 10,000 per day). The CDR for Nugaal is reported at 0.15 and the U5DR at 0.35 while the CDR and U5DR in the Garowe IDP camps is 0.2 and 0.49 respectively. A lack of access to health care services coupled with inappropriate health seeking behaviours for IDPs, farmers, returnees and host community living in poverty, present threats and a high risk for occurrence of disease outbreaks and morbidity from preventable illnesses. A recent measles outbreak in Nugaal has further worsened morbidity figures in this region. According to a recent Hijra assessment that interviewed male and female health workers at Afgoye hospital diarrheal diseases accounted for 41.8% of all illnesses seen. Of these 39.4% were males under 5 years while 22.5% were females under 5 years. 5.9% of cases were due to respiratory tract infections. Malaria accounted for 12.9%

3. Activities. List and describe the activities that your organization is currently implementing to address these needs

HIJRA currently undertakes various activities that are geared towards addressing the community's needs. These activities include awareness creation on AWD/cholera transmission patterns. Awareness campaigns are targeted at market places, koranic schools and mosques. Using funds from Oxfam GB and under its WASH sector, Hijra has trained WES committees. Koranic school teachers and water point attendants. Hijra also supplies water through rehabilitation of shallow wells. Construction of new latrines and rehabilitation of existing ones is also undertaken. There is also provision of sanitary tools and materials. Hygiene promotional campaigns are carried out in the villages of Afgoye and Wanla Weyn. While running the MCH clinic with support from CHF, Hijra provided much needed health services in the target district of Afgoye. Health care workers were trained in both Ante-Natal and Post-Natal Care. 3 qualified midwives were employed to offer skilled delivery services. In order to improve on the delivery of quality services health care workers were also trained in basic emergency obstetric care as well as in IMCI. Mobile outreaches were undertaken so as to reach more clients and also to act as platforms for carrying out community sensitization sessions as well as health education sessions. Information on good feeding practices for children and pregnant women is also passed on to the communities

LOGICAL FRAMEWORK

Outcome 1	luar	To increase access to and utilization of maternal, newborn and child care services mproved access to emergency obstetric care services for 11719 women living in Afgooye and Wanla Weyn districts of lower Shabelle and in Garowe n the Nugaal region											
Outcome 1	in the Nugaal region												
Activity 1.1	Provide antenatal and emergency obstetric care services to women in Afgooye, Wanla Weyn and Garowe districts Recruit and train 20 health care workers (of which 50% are females and 50% males) in basic emergency obstetric care (BemOC), focused antenatal care (FANC) and Essential newborn care (ENC)												
Activity 1.2													
Activity 1.3	Train 20 h	ealth care v	workers (of	which 50% are females an	d 50% males) in IYCF								
Indicators for outcome 1		С	luster	Indicator description						Ta	arget		
	Indicator	Indicator 1.1 Health Number of consultations per clinician per day by Health facility 3											
	Indicator	1.2 He	ealth I	Number of male and femal	e health care workers trained in E	BemOC, F	ANC and	ENC		20)		
	Indicator	1.3 He	ealth I	Number of health workers t	trained in IYCF					20)		
Outcome 2	Afgooye, Wanla Weyn and Garowe male (2270) and female (2754) children have improved access to newborn and child care service as well a improved access to immunization services												
Activity 2.1	Train 20 h	ealth care v	workers (of	which 50% are females an	d 50% males) in IMCI, community	y IMCI and	d EPI						
Activity 2.2	Provide ch	ild health o	are services	s to male (2270) and femal	le (2754) children in the targeted	districts							
Activity 2.3	Carry out 1 under 1 ye		ation outrea	aches coupled with defaulte	er tracing in 5 villages of Afgoye, \	Wanla We	eyn and G	arowe dist	tricts to tai	rget 1000	childre		
Indicators for outcome 2		Cluster	Indicato	r description							Targe		
	Indicator 2.1	, g g								illance	20		
	Indicator 2.2	· ·								5024			
	Indicator 2.3	Health	Number of	f children vaccinated							1000		
Outcome 3		*								`			
Activity 3.1													
Activity 3.2													
Activity 3.3				Cluster	Indicator description				Tar	get			
Activity 3.2 Activity 3.3 Indicators for outcome 3	Indicator	3.1		Cluster	Indicator description				Tar	get			
Activity 3.3	Indicator Indicator			Cluster	Indicator description					get			
Activity 3.3		3.2		Cluster	Indicator description				0	rget			
Activity 3.3	Indicator	3.2		Cluster	Indicator description				0	rget			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Indicator	3.2	tion	Cluster	Indicator description	Month 1-2	Month 3-4	Month 5-6	0	Month	Mon1 11-1		
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for	Indicator Indicator Activity	3.2 3.3 Descript			Indicator description				0 0 0 Month	Month			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Indicator Indicator Activity Activity Wanla We Activity	3.2 3.3 Descript 1.1 Provice 1.2 Recrubasic emergence	de antenatal a owe districts and train 2	and emergency obstetric care 0 health care workers (of whi		1-2	3-4	5-6	0 0 0 Month 7-8	Month 9-10			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Activity Wanla Wee Activity males) in Inewborn of	3.2 3.3 Descript 1.1 Provide the second of t	de antenatal a owe districts uit and train 2 gency obstetri	and emergency obstetric care 0 health care workers (of whitic care (BemOC), focused an	e services to women in Afgooye, ich 50% are females and 50%	1-2 X	3-4 X	5-6	0 0 0 Month 7-8	Month 9-10			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Indicator Indicator Activity Activity Wanla We Activity males) in I newborn of Activity Activity	3.2 3.3 Descript 1.1 Provide your and Gar 1.2 Recruit basic emergiare (ENC) 1.3 Train	de antenatal a cowe districts it and train 2 gency obstetricts 20 health car	and emergency obstetric care 0 health care workers (of whi ic care (BemOC), focused an	e services to women in Afgooye, ich 50% are females and 50% ntenatal care (FANC) and Essential	1-2 X	3-4 X	5-6	0 0 0 Month 7-8	Month 9-10			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Activity Activity Wanla We Activity males) in Inewborn of Activity Activity Community	3.2 3.3 Description 1.1 Provide the provided size of the provided size o	de antenatal a cowe districts sit and train 2 gency obstetr 20 health car 20 health car EPI	and emergency obstetric care 0 health care workers (of whi ic care (BemOC), focused an re workers (of which 50% are	e services to women in Afgooye, ich 50% are females and 50% intenatal care (FANC) and Essential de females and 50% males) in IYCF	1-2 X X	3-4 X X	5-6	0 0 0 Month 7-8	Month 9-10			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Activity Activity Activity Manla We Activity	3.2 3.3 Description 1.1 Provide and Gare (ENC) 1.3 Train 2.1 Train (IMCI and IMCI an	de antenatal a cowe districts sit and train 2 gency obstetr 20 health car 20 health car EPI de child healt out 15 immu	and emergency obstetric care 0 health care workers (of whi ic care (BemOC), focused an re workers (of which 50% are re workers (of which 50% are th care services to male (2276)	e services to women in Afgooye, ich 50% are females and 50% itenatal care (FANC) and Essential e females and 50% males) in IYCF e females and 50% males) in IMCI, 0) and female (2754) children in with defaulter tracing in 5 villages	1-2 X X X	x x x x x	5-6 X	0 0 0 Month 7-8 X	Month 9-10 X			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Activity Activity Activity Manla We Activity	3.2 3.3 Descript 1.1 Provide your and Gar 1.2 Recrupt basic emergeare (ENC) 1.3 Train 2.1 Train / IMCI and 2.2 Provided districts 2.3 Carry Wanla Wey	de antenatal a cowe districts sit and train 2 gency obstetr 20 health car 20 health car EPI de child healt out 15 immu	and emergency obstetric care 0 health care workers (of whi ic care (BemOC), focused an re workers (of which 50% are re workers (of which 50% are th care services to male (227) inization outreaches coupled	e services to women in Afgooye, ich 50% are females and 50% itenatal care (FANC) and Essential e females and 50% males) in IYCF e females and 50% males) in IMCI, 0) and female (2754) children in with defaulter tracing in 5 villages	1-2 X X X	x x x x x	5-6 X	0 0 0 Month 7-8 X	Month 9-10 X			
Activity 3.3 Indicators for outcome 3 WORK PLAN Project workplan for activities defined in the	Activity Activity Wanla We Activity Males) in I newborn of Activity Activity Activity Activity Activity Activity Activity of Afgoye,	Jacobs Stricts Descript 1.1 Provide yn and Gar 1.2 Recrubasic emergiare (ENC) 1.3 Train 2.1 Train (IMCI and districts) 2.2 Provided districts 2.3 Carry Wanla Wey 3.1	de antenatal a cowe districts sit and train 2 gency obstetr 20 health car 20 health car EPI de child healt out 15 immu	and emergency obstetric care 0 health care workers (of whi ic care (BemOC), focused an re workers (of which 50% are re workers (of which 50% are th care services to male (227) inization outreaches coupled	e services to women in Afgooye, ich 50% are females and 50% itenatal care (FANC) and Essential e females and 50% males) in IYCF e females and 50% males) in IMCI, 0) and female (2754) children in with defaulter tracing in 5 villages	1-2 X X X	x x x x x	5-6 X	0 0 0 Month 7-8 X	Month 9-10 X			

Activity Description		M & E Tools to use	Means of verification	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1 Provide antenatal a n Afgooye, Wanla Weyn and Garo	and emergency obstetric care services to wome we districts	- Contact details - Data collection - Field visits - Focus group interview - Individual interview - Verification	Facility register records Field visit reports	X	Х	х	х	Х	X	Х	X	Х	X	X	Х
	health care workers (of which 50% are female by obstetric care (BemOC), focused antenatal c e (ENC)		Participants lists Pre- and Post - evaluation forms Training reports Facilitator notes Training curricullum	Х		X									
Activity 1.3 Train 20 health can males) in IYCF	e workers (of which 50% are females and 50%	Field visitsFocus group interviewIndividual interviewVerification	Facility register records Field visit reports	х		X									
Activity 2.1 Train 20 health car males) in IMCI, community IMCI ar	e workers (of which 50% are females and 50% id EPI	- Contact details - Field visits - Individual interview - Remote Call Monitoring - Verification	Participants lists Pre- and Post - evaluation forms Training reports Facilitator notes Training curricullum	X			Х								
Activity 2.2 Provide child health children in the targeted districts	n care services to male (2270) and female (275	- Contact details - Data collection - Field visits - Focus group interview - Individual interview - Verification	Facility register records Field visit reports	Х	X	X	Х	X	Х	х	Х	X	х	х	×
-	nization outreaches coupled with defaulter traci n and Garowe districts to target 1000 children	ng - Data collection - Field visits - Individual interview - Verification	Field monitoring reports Facility immunization register	Х				X				X			
Activity 3.1		- Verification													
Activity 3.2															
Activity 3.3															
THER INFORMATION															

OTTIER INFORMATION								
Coordination with other	Organization	Activity						
Organizations in project area	Health Partners/Swisso Kalmo/MSF Switzerland - Afgooye	Hijra will be part of the health cluster and will attend all cluster meetings where it will share its project progress reports and epidemiological data among other coordination efforts. We will also discuss with other health partners to avoid overlapping during programme implementation. We will support MSF efforts at Afgooye hospital by offering hygiene promotion interventions as well as provide clean water at the hospital. The project will also liaise with other health partners in Afgooye to coordinate responses in case of any disease outbreaks.						
	2. Merlin/IOM/PAH/Other Health Partners in Garowe	Hijra will work with all health care partners offering health services in Garowe including cluster chair, Merlin. Hijra will be part of all coordination meetings and will share information and reports with other partners including IOM so as to promote efficiency in service delivery and to maximize outputs. The organization will work with other partners to develop contingency plans to respond to any health threats in the region. Hijra will also share its reports and evaluations with all partners in the region. Hijra has an agreement with the Polish Humanitarian Action (PAH) organization who will offer WASH services as well as hygiene promotion activities in its facilities.						
Gender theme support	Yes							
Outline how the project supports the gender theme	women, boys and girls and w that accommodate and respo targeted for accellerated imm	and seeks to redress inequalities between men and women, boys and girls and will promote equality between men and will approach gender issues from a human rights perspective. It has been planned to produce outputs and realize outcomes and to the differential needs of men and women, boys and girls. Both male and female children under five years will be nunization campaigns and boys and girls will benefit from age appropriate health education sessions. Women will be and men will be offered all round preventive, promotive and curative services.						
Select (tick) activities that	Activity 1.1: Provide a	antenatal and emergency obstetric care services to women in Afgooye, Wanla Weyn and Garowe districts						
supports the gender theme	Activity 1.2: Recruit and train 20 health care workers (of which 50% are females and 50% males) in basic emergency obstetric care (BemOC), focused antenatal care (FANC) and Essential newborn care (ENC)							
	Activity 1.3: Train 20	health care workers (of which 50% are females and 50% males) in IYCF						
	Activity 2.1: Train 20	health care workers (of which 50% are females and 50% males) in IMCI, community IMCI and EPI						
	Activity 2.2: Provide of	child health care services to male (2270) and female (2754) children in the targeted districts						
	Activity 2.3: Carry out 1000 children under 1 year	t 15 immunization outreaches coupled with defaulter tracing in 5 villages of Afgoye, Wanla Weyn and Garowe districts to target ar of age						

		Activity 3.1:									
		Activity 3.2:									
		Activity 3.3:									
BUDGET											
1.1 Supplies,	1.1.1 Su	upplies (materials and go	ods)								
commodities, equipment and transport	Code Budget Line Description				it Cost	Units	Timeframe	Amount(USD)	Organizatio	on Cl	% of CHF Total
		Purchase of medical devices/ed		25000	1	1	25,000.00	0.0	25,000.	00	
		Purchase of essential medicine	S		62000	1	1	62,000.00	0.0	62,000.	00
		Puechase of laboratory equipm	ent and accessories		1000	5	3	15,000.00	0.0	15,000.	00
		Purchase of cleaning equipmer disinfectants/antiseptics	nt/supplies,		100	5	3	1,500.00	0.0	1,500.	00
		Purchase of medical expendabl	es		300	5	4	6,000.00	0.0	6,000.	00
		Printing of job aids/guidelines	and IEC materials		250	5	3	3,750.00	0.0	3,750.	00
		Subtotal Supplie	es					113,250.00	0.0	0 113,250.	00 38.1
	1.1.2 Tr	ansport and Storage									
	Code	Budget Line Description		Unit	Cost	Units	Timeframe	Amount(USD)	Organizatio	on CF	F % of CHF Total
		Vehicle rental			180	3	8	4,320.00	0.0	4,320.0	0
		Freight and transport			3	240	2	1,440.00	0.0	1,440.0	0
		Storage costs			300	1	8	2,400.00	0.0	2,400.0	0
		Subtotal Transport and	Storage					8,160.00	0.0	8,160.0	0 2.7
1.2	1.2.1 International Staff										
Personnel (staff, consultants,	Code	le Budget Line Description			t Cost	Units	Timeframe	Amount(USD)	Organizatio	on Ch	% of CHF Total
travel and training)		Health Program Manager			1500	1	12	18,000.00	0.0	18,000.	00
ag/		Travel Medical Coordinator(Afgoye and Garowe				1	2	960.00	0.0	960.	00
		Subtotal Internationa	I Staff					18,960.00	0.0	18,960.	00 6.4
	1.2.2 Lc	ocal Staff									
	Code	Budget Line Description		Unit	Cost	Units	Timeframe	Amount(USD)	Organization	n CH	F % of CHF Total
		Medical Coordinator			1500	1	12	18,000.00	0.00	18,000.0	0
		MCH Supervisor			750	1	12	9,000.00	0.00	9,000.0	0
		Midwives			450	2	12	10,800.00	0.00	10,800.0	0
		Qualified nurses			450	6	12	32,400.00	0.00	32,400.0	0
		Auxilaryy nurses			300	12	12	43,200.00	0.00	43,200.0	0
		Labaratory technologist			450	1	12	5,400.00	0.00	5,400.0	0
		cleaners			150	5	12	9,000.00	0.00	9,000.0	0
		security guards			150	5	12	9,000.00	0.00		
		Subtotal Local Sta	ff					136,800.00	0.00	136,800.0	0 46.1
1.3 Training of	Code	Budget Line Description		Uni	t Cost	Units	Timeframe	Amount(USD)	Organizatio	on Ch	% of CHF Total
Counterparts		Training of HCWs in BemOC/FA	ANC/ENC (20 CHW)		1500	3	1	4,500.00	0.0	4,500.	00
		Training of HCWs in IYCF(20CF	HW)		1500	1	1	1,500.00	0.0	1,500.	00
		Training of HCWs in IMCI/CIM			1500	3	1	4,500.00	0.0		
		Subtotal Training of Cou	nterparts					10,500.00	0.0	10,500.	3.5
1.4 Contracts	Code B	udget Line Description	Unit Cost	Units	Time	eframe	Amount	(USD)	rganization	CHF % of C	HF Total
(with											

1.5 Other Direct Costs	Code	Budget Line Description		Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF	% of CHF Total
		Stationary and office ma	iterials	200	3	4	2,400.00	0.00	2,400.00	
		Rent		200	3	4	2,400.00	0.00	2,400.00	
		Communications		150	1	12	1,800.00	0.00	1,800.00	
		Utilities		200	1	12	2,400.00	0.00	2,400.00	
		Bank Transfer Costs		30	1	12	360.00	0.00	360.00	
		Subtotal Other	Direct Costs				9,360.00	0.00	9,360.00	3.2
		TOTAL					297,030.00	0.00	297,030.00	
2.0 Indirect Costs							Amount(USD)	Organization	CHF	% of CHF Total
		Indirect Costs					17,370.00	0.00	17,370.00	5.8479
		GRAND 1	IOTAI				314,400.00	0.00	314,400.00	100.0

Description	Amount	%		
Organization	0.00	0.00		
Community	0.00	0.00		
CHF	CHF			
Other Donors	a)	0.00		
	b)	0.00		
TOTAL	314,400.00			

LOCATIONS

Region	District	Location	Activity	Beneficiary Description	Number	Latitude	Longitude	P.Code
Lower Shabelle	Afgooye	Lafoole	Primary Health Care Services	Men, women, boys and girls plus male and female children	6558	2.09955	45.16352	NA-3807-X04-002
Lower Shabelle	Wanla Weyn	Wanla Weyn	Primary Health Care Services	Men, women, boys and girls plus male and female children	21457	2.61945	44.89357	NA-3806-K31-006
Nugaal	Garowe	Garowe	Primary Health Care Services	Men, women, boys and girls plus male and female children	6844	8.40635	48.48188	NC-3913-Q11-006
TOTAL					34,859			

DOCUMENTS

Document Description

1. Hijra AOP II

2. CHF HEALTH 2013 – BUDGET EXCEL SHEET BOQs PLUS JUSTIFICATIONS