

Project Proposal

| Organization | CARE International (CARE International) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--------------------------|--|---|-----------|--------|-------|--------|-------------------|------------------------|------------|-----------------------------|------------|-----------------------------|------------|---------------------|--------|---|--|--|--|--|--|-----------------------------|---|-----|------|------|------|----------------------------|-----|-----|------|------|------|------------------------------|---|------|---|---|------|
| Project Title | Emergency Nutrition Response To Vulnerable Populations and IDPS In Mayom County and Bentiu POCs Rubkona County Of Unity State, South Sudan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fund Code | SSD-15/HSS10/SA2/N/INGO/530 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cluster | <table border="1"> <tr> <th>Primary cluster</th> <th>Sub cluster</th> </tr> <tr> <td>NUTRITION</td> <td>None</td> </tr> </table> | | Primary cluster | Sub cluster | NUTRITION | None | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Primary cluster | Sub cluster | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NUTRITION | None | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project Allocation | 2nd Round Standard Allocation | Allocation Category Type | Frontline services | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project budget in US\$ | 299,998.54 | Planned project duration | 5 months | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Planned Start Date | 01/08/2015 | Planned End Date | 31/12/2015 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OPS Details | OPS Code | SSD-15/H/72859/R | OPS Budget | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | OPS Project Ranking | | OPS Gender Marker | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project Summary | <p>Unity State is one of the three most affected states (Jonglei, Unity and Upper Nile) caused by the fighting that started in mid December 2013 and still ongoing through 2015. The widespread internal displacement increased vulnerability for all the conflict affected populations in the five counties (Mayom, Abiemnon, Rubkona, Pariang and Guit) where CARE implements nutrition program activities. The Host community has been further burdened by presence of internally displaced persons (IDPs) and disruptions of livelihoods in the above mentioned counties (IPC, 2015). Bentiu POC which is one of the largest IDP camps, has of late (July 2015 IOM estimates) witnessed the highest number estimated at 115,000 persons. Based on the standard Nutrition and Mortality survey results conducted in Mayom Abiemnon and Pariang by CARE in April/May 2015 the prevalence of malnutrition were 30.0%, 26.5% and 23.4% respectively.</p> <p>CARE proposes to implement this project to support the increased number of IDPs at Bentiu POC and both IDP and host communities in Mayom county. CARE wishes to scale-up integrated nutrition services, providing High Impact Nutrition interventions (SC, OTP and TSFP, IYCF, micro nutrient and other preventive services). CARE will work closely with different partners to ensure all activities are done in consultative and coordinated manner. Increased insecurity over the past months in the counties of Guit and Koch has increased IDPs seeking refuge at Bentiu POC. This has increased the number of IDPs 3 fold from previous period in August 2014 of about 40,000 IDPS to current estimate of 120,000 and still the IDPs are streaming in. Mayom County has also witnessed increase in IDP mostly from Koch and the period has been hit by highest malnutrition levels from most previous survey in April 2015. The most vulnerable amongst the population in the two counties are women and children boys and girls (0-59 months). Pregnant and lactating women are particularly affected as they aren't able to access health care for the health and nutritional needs due to insecurity and destruction of existing health facilities. Further, the burden of taking care of children (feeding, cooking, fetching water and firewood etc) is principally the duty of women and is severely affected when normal livelihood activities are completely or partially destroyed. Men on the other hand are on frontline providing security and key men roles like provision of food through casual work and pastoralist activities are highly affected. Inadequacy of food, lack of nutrition treatment and prevention services, lack of immunization services and health services has led to high malnutrition burden especially to Women and children boys and girls 0-59 months.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Direct beneficiaries | <table border="1"> <thead> <tr> <th></th> <th>Men</th> <th>Women</th> <th>Boys</th> <th>Girls</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Beneficiary Summary</td> <td>214</td> <td>2340</td> <td>4986</td> <td>5190</td> <td>12,730</td> </tr> <tr> <td colspan="6">Total beneficiaries include the following:</td> </tr> <tr> <td>Internally Displaced People</td> <td>0</td> <td>889</td> <td>1964</td> <td>2044</td> <td>4897</td> </tr> <tr> <td>People in Host Communities</td> <td>214</td> <td>108</td> <td>3022</td> <td>3146</td> <td>6490</td> </tr> <tr> <td>Pregnant and Lactating Women</td> <td>0</td> <td>1343</td> <td>0</td> <td>0</td> <td>1343</td> </tr> </tbody> </table> | | | | | | Men | Women | Boys | Girls | Total | Beneficiary Summary | 214 | 2340 | 4986 | 5190 | 12,730 | Total beneficiaries include the following: | | | | | | Internally Displaced People | 0 | 889 | 1964 | 2044 | 4897 | People in Host Communities | 214 | 108 | 3022 | 3146 | 6490 | Pregnant and Lactating Women | 0 | 1343 | 0 | 0 | 1343 |
| | Men | Women | Boys | Girls | Total | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Pregnant and Lactating Women | 0 | 1343 | 0 | 0 | 1343 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Indirect Beneficiaries | | | Catchment Population | Bentiu POC, Bentiu Town and Mayom County in the following payams-Kuerbona, Bieh, Kueryek, Ruathinbol, Ngop, Mankien, Riak and Wangkai | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Link with the Allocation Strategy | <p>CARE's emergency Nutrition project will significantly contribute to overall CHF strategies and specifically Nutrition cluster strategies outlined in the strategy paper. The activities proposed are going to directly address the life threatening nutrition needs in the target locations where such needs are greatest. CARE has been implementing Nutrition projects in hard to reach and huge life threatening in Unity State. The proposed activities will contribute to address the malnutrition and disease outbreaks in conflict areas where IDPs settled in POCs, camp setting and host communities</p> <p>CARE will address all the three Nutrition cluster objectives by ensuring the following activities (Outputs) are implemented within the project life span.</p> <ul style="list-style-type: none"> • Identification (active case findings) and treatment of acutely malnourished children 0-59 months and PLWs in Mayom and Rubkona (Bentiu POC) • Integration of nutrition activities in all health facilities • Support CHD to conduct integrated Nutrition outreach activities and referrals • Train health workers, Nutrition staff and Community outreach workers (COWs) CMAM/IM –SAM, • Provide micronutrient supplementations to PLWs and children 6-59 months boys and girls • De-worming of children boys and girls above 1 year • Promote optimal IYCF in the vulnerable populations in the POCs, Host community and IDPS • Participate and support National, State and County Nutrition cluster forums • Monitoring and analysis of nutrition situation on quarterly basis in the five counties <p>All above proposed activities will contribute to the CHF and Nutrition cluster strategic objectives and links well with prioritization of projects. CARE areas with current and proposed activities are within high prioritization rank, Bentiu POCs, and Mayom, counties in Unity State. CARE has been working in the locations for considerable time and has ongoing activities.</p> <p>At Bentiu POC and Bentiu Town CARE will operate Nutrition centers (3 centers will be at Bentiu POC and one center will be located at Bentiu Town to cater for the 20,000 population living there. the following services will be offered there OTP,TSFP (Under fives and PLW) and IYCF services. all the services will be life saving.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sub-Grants to Implementing Partners | | | Other funding Secured For the Same Project (to date) | <table border="1"> <thead> <tr> <th>Source</th> <th>US\$</th> </tr> </thead> <tbody> <tr> <td>UNICEF</td> <td>116,863.00</td> </tr> <tr> <td>WFP</td> <td>39,765.42</td> </tr> <tr> <td></td> <td>156,628.42</td> </tr> </tbody> </table> | | Source | US\$ | UNICEF | 116,863.00 | WFP | 39,765.42 | | 156,628.42 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | 156,628.42 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization focal point contact details | <table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Phone</th> <th>Email</th> </tr> </thead> <tbody> <tr> <td>Christoper Necker</td> <td>Head of Programs/ACD-P</td> <td>0954604620</td> <td>christopher.necker@care.org</td> </tr> <tr> <td>Joel Makii</td> <td>Nutrition Technical Advisor</td> <td>0955221576</td> <td>joel.makii@care.org</td> </tr> </tbody> </table> | | | | Name | Title | Phone | Email | Christoper Necker | Head of Programs/ACD-P | 0954604620 | christopher.necker@care.org | Joel Makii | Nutrition Technical Advisor | 0955221576 | joel.makii@care.org | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | Title | Phone | Email | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Christoper Necker | Head of Programs/ACD-P | 0954604620 | christopher.necker@care.org | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Joel Makii | Nutrition Technical Advisor | 0955221576 | joel.makii@care.org | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

BACKGROUND INFORMATION

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|--|--|
| 1. Humanitarian context analysis.. Humanitarian context: Describe the current humanitarian situation in the specific locations where this project will be implemented | Renewed conflict in April/May 2015 in southern Unity state was accompanied by widespread displacement coupled with increasing food insecurity. Settlements where basic services are available are expected to receive an additional influx of people in coming months. As per UNOCHA report about 1.8 million people have fled their homes. This includes the more than 1.35 million people who have been displaced inside South Sudan and the 453,000 who have fled to neighboring countries. Majority of the people have displaced in major 3 states of Jonglei, Unity and Upper Nile and are living with host communities, within POCs and IDPS settlements and have seen the most active hostilities and displacement throughout the crisis. |
|--|--|

Access to nutrition and health services, remains challenging especially in hard to reach areas of Rubkona/Bentiu and Mayom, Counties in Unity State. The two counties were ranked with high severity score and class by CERF heat map. CARE conducted SMART nutrition survey in Mayom, Abiemnon and Pariang counties and confirmed the same severity. The nutrition needs are currently high and are expected to remain through out wet season and may be intensified by renewed violence and displacement. Hundreds of IDPs streaming to Bentiu POC from neighboring counties particularly Koch and Guit are expected to continue before the flooding on those counties start in mid August. At Mayom county, there are several IDPs and host community has suffered period of food scarcity. Last year the community didn't cultivate and they are dependent on relief food and therefore malnutrition levels are high at GAM 30% and this call for scaling up of nutrition services to address increased malnutrition especially among under fives.

CARE proposes to provide integrated nutrition services in the Bentiu POC, Bentiu Town and Mayom County by providing High Impact Nutrition interventions (SC OTP and TSFP), IYCF, micronutrient and other preventive services). CARE will scale up services by adding one OTP center at Bentiu POC and establishment of nutrition mobile teams at Mayom County.

2. Needs assessment. Explain the specific needs of the target group(s), explaining existing capacity and gaps. State how the needs assessment was conducted, list any baseline data and explain how the number of beneficiaries has been developed. Indicates references to assessments such as Multi-cluster/sector Initial Rapid Assessments (MIRA)

Increased numbers of IDPS at Bentiu POC has had impact on quality of services offered. The staff who offered services for 40,000 IDPS are now offering services for more than 115,000 IDPS. This calls for both scaling up nutrition centers and staff to manage the increased workload. At Mayom County, it is expected to flood mid August Until January 2016 for most of the county and therefore Mobile Nutrition teams will be formed and used to deliver services to wherever the community will be concentrated. Additional staff and resources will be required to effectively enable mobile teams work optimally.

3. Description Of Beneficiaries

A total of 12 730 direct beneficiaries will be targeted by this project which tentatively includes 10176 children under five years of age, 62 men (health and nutrition workers) who will benefit from training from this project, 2232 pregnant and lactating women. The host community, IDPs and returnees will be hundred thousand and above who will benefit either directly or indirectly from the project activities.

In addition 152 community volunteers comprising 108 females and 44 males will be identified and trained to support and conduct IYCF promotion activities in the POCs, IDPs settlements and villages. These community nutrition outreach promoters will be identified through proper consultation with community leaders and support from local authorities such RRC on the ground. Special focus will be given to the persons with disabilities to be included among the nutrition workers within the communities.

4. Grant Request Justification.

CARE proposed project will be implemented in Rubkona County (Bentiu POCs and Bentiu Town) and Mayom County (Kuerbona, Mankien,Bien, Ruathnibul, Riak Kueryiek, Ngop1, Pup and Wangkei) in Unity State. All these locations have been identified, proposed and recommended by Nutrition Cluster as high priority counties for nutrition interventions and at the same time is areas where CARE implements nutrition activities. The prevalence of malnutrition in the 2 counties is at emergency levels (Mayom County GAM 30.0%, Bentiu POC Gam 20.8% (August 2014 CARE SMART survey report) are expected to remain beyond GAM 15% throughout the project implementation period although substantial reduction will be witnessed if the project is funded. CARE has well established offices, Juba level (HQ), field offices (Bentiu POC and Mankieni in Mayom County) and has ongoing nutrition projects funded by other donors. there are gaps due to increased levels of IDPS especially at Bentiu POC and high GAM rate at Mayom County. Thus it would be easy for CARE to implement CHF Nutrition project by integrating into ongoing nutrition projects.

The CHF funding will help CARE to continue its ongoing Nutrition projects as well as expanding to other locations within the counties of Mayom in order to meet the increased nutrition needs of the IDPs and host communities. Additional Nutrition staff are needed in both Bentiu POC and Mayom, the proposed strategy at Mayom is to have mobile nutrition teams to visit far to reach Bomas and ensure all malnourished children are reached. Failure to secure this funds the increased IDPS at Bentiu POC will not receive quality services and the current high mortality rate may continue to catastrophic levels.

5. Complementarity. Explain how the project will complement previous or ongoing projects/activities implemented by your organization.

CARE has UNICEF funded one year program ending in November 2015, the funds from CHF will bridge the gap for the personnel, Training and other inputs.Besides the funds will bridge the gap in December during the time of renewal of the PCA with UNICEF.

LOGICAL FRAMEWORK

Overall project objective

To reduce morbidity and mortality related to acute malnutrition through community-based integrated management of acute malnutrition (CMAM/IMAM) and Infant and Young Child Feeding (IYCF) interventions targeting children under five and Pregnant and lactating women.

Logical Framework details for NUTRITION

| Cluster objectives | Strategic Response Plan (SRP) objectives | Percentage of activities |
|---|---|--------------------------|
| 2015 SSO 1: Deliver quality lifesaving management of acute malnutrition for at least 60% per cent of SAM cases in girls and boys 0-59 months and at least 60 per cent of MAM cases in girls and boys aged 6-59 months, pregnant and lactating women, older people and other vulnerable groups | SO 1: Save lives and alleviate suffering by providing multi-sector assistance to people in need | 80 |
| 2015 SS 3: Ensure enhanced needs analysis of the nutrition situation and enhanced monitoring and coordination of response | SO 1: Save lives and alleviate suffering by providing multi-sector assistance to people in need | 10 |
| 2015 SSO 2: Increase access to integrated programmes preventing undernutrition for at least 30 per cent of girls and boys aged 0-59 months, pregnant and lactating women, older people and other vulnerable groups | SO 2: Protect the rights of the most vulnerable people, including their freedom of movement | 10 |

Outcome 1

Improved and sustained access to OTP services for 4008 severely malnourished and 6168 moderately malnourished under-fives children and 2232 PLW in Mayom County, and Rubkona (Bentiu POCs and Bentiu Town)

| Code | Description | Assumptions & Risks |
|-------------------|--|---------------------------------------|
| Output 1.1 | Active case finding of both Severe and moderate acutely malnourished children under five years of age and PLWs | security situation will be permitting |

Indicators

| Code | Cluster | Indicator | End Cycle Beneficiaries | | | | End-Cycle Target |
|-------------------------------|-----------|--|-------------------------|-------|------|-------|------------------|
| | | | Men | Women | Boys | Girls | |
| Indicator 1.1.1 | NUTRITION | [Frontline services] [Treatment] Number of boys and girls 6-59 and months and PLW screened for acute malnutrition in a community | | 2071 | 4614 | 4802 | 11487 |
| Means of Verification: | | number of community sessions done and children referred to the nutrition centers by community nutrition volunteers | | | | | |

Activities

| | |
|----------------|--|
| Activity 1.1.1 | Daily MUAC screening at community level and at IDPS settlement at Bentiu POC |
| Activity 1.1.2 | Weekly community outreaches through Mobile teams at Mayom county |
| Activity 1.1.3 | Daily Outreach services offered at Bentiu Town clinic |

Output 1.2

Treatment of both Severe acute malnourished and moderately malnourished children

weekly and monthly nutrition reports

Indicators

| Code | Cluster | Indicator | End Cycle Beneficiaries | | | | End-Cycle Target |
|------|---------|-----------|-------------------------|--|--|--|------------------|
| | | | | | | | |

| | | | Men | Women | Boys | Girls | |
|-------------------------------|-----------|--|-----|-------|------|-------|------|
| Indicator 1.2.1 | NUTRITION | [Frontline services] [Treatment] Number of boys and girls aged 0-59 months with severe acute malnutrition newly admitted for treatment | | | 1964 | 2044 | 4008 |
| Means of Verification: | | Monthly reports | | | | | |
| Indicator 1.2.2 | NUTRITION | [Frontline services] [Treatment] Number of boys and girls aged 6-59 months with moderate acute malnutrition newly admitted for treatment | | | 3022 | 3146 | 6168 |
| Means of Verification: | | monthly reports | | | | | |
| Indicator 1.2.3 | NUTRITION | [Frontline services] [Treatment] Number of PLW with acute malnutrition newly admitted for treatment | | 2232 | | | 2232 |
| Means of Verification: | | monthly reports | | | | | |

Activities

| | |
|----------------|--|
| Activity 1.2.1 | Strengthening provision of Nutrition OTP and TSFP services at 13 Nutrition centers |
| Activity 1.2.2 | Provision of Both RUTF and RUSF to SAM and MAM cases respectively |
| Activity 1.2.3 | Establishment of 4 Mobile Nutrition teams to enable outreaches in far to reach areas in Mayom one specifically made for Bentiu Town outreach |
| Activity 1.2.4 | Treatment of malnourished Children 6-59 months boys and girls at Health facilities and Moderately malnourished PLWS |
| Activity 1.2.5 | Rehabilitation of Bentiu POC centers to avoid flooding and provision of clean water |

Outcome 2 Integrate nutrition prevention programs targeting malnourished children 0-59 month's boys and girls and PLWs (IYCF, Vitamin A supplementation and other multiple micro nutrients and De-worming)

| Code | Description | Assumptions & Risks |
|-------------------|---|-----------------------------|
| Output 2.1 | Train Health workers, Nutrition staff and community outreach workers on IMAM, IYCF and micro nutrient supplementation | Security situation allowing |

Indicators

| Code | Cluster | Indicator | End Cycle Beneficiaries | | | | End-Cycle Target |
|-------------------------------|-----------|---|-------------------------|-------|------|-------|------------------|
| | | | Men | Women | Boys | Girls | |
| Indicator 2.1.1 | NUTRITION | [Frontline services] [Capacity and emergency prepare] Number of healthcare workers trained on CMAM according to minimum requirements set by the cluster | 50 | 12 | | | 62 |
| Means of Verification: | | Training reports, monitoring reports | | | | | |

Activities

| | |
|----------------|---|
| Activity 2.1.1 | Training of Nutrition workers and volunteers on management of acute malnutrition |
| Activity 2.1.2 | Training Nutrition care staff on IYCF, Vitamin A and Deworming supplementation |
| Activity 2.1.3 | Supportive supervision and on the job mentoring for Nutrition staff and community Nutrition volunteers on daily basis |

Output 2.2 Provision of Vitamin A to all children 6-59 months and IYCF messages to PLW There will be enough supplies of Vitamin A

Indicators

| Code | Cluster | Indicator | End Cycle Beneficiaries | | | | End-Cycle Target |
|-------------------------------|-----------|---|-------------------------|-------|------|-------|------------------|
| | | | Men | Women | Boys | Girls | |
| Indicator 2.2.1 | NUTRITION | [Frontline services] [Prevention] Number of 6-59 reached with Vitamin A supplements | | | 4986 | 5190 | 10176 |
| Means of Verification: | | monthly reports | | | | | |
| Indicator 2.2.2 | NUTRITION | [Frontline services] [Prevention] Number of pregnant and lactating women and caretakers of children 0-23 months reached with IYCF interventions | 106 | 2340 | | | 2446 |
| Means of Verification: | | Monthly reports | | | | | |

Activities

| | |
|----------------|---|
| Activity 2.2.1 | Daily IYCF messaging at Health facilities and Outreach sites |
| Activity 2.2.2 | Vitamin A supplementation to all children 6-59 months |
| Activity 2.2.3 | Establishment of mother to mother support group to enhance IYCF messaging at Bentiu POC and Mayom county at Health facility level |

WORK PLAN

| Project workplan for activities defined in the Logical framework | Activity Description (Month) | Year | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
|---|------------------------------|---|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | | Activity 1.1.1 Daily MUAC screening at community level and at IDPS settlement at Bentiu POC | 2015 | | | | | | | | X | X | X | X |
| Activity 1.1.2 Weekly community outreaches through Mobile teams at Mayom county | 2015 | | | | | | | | X | X | X | X | X | |
| Activity 1.2.1 Strengthening provision of Nutrition OTP and TSFP services at 13 Nutrition centers | 2015 | | | | | | | | X | X | X | X | X | |
| Activity 1.2.2 Provision of Both RUTF and RUSF to SAM and MAM cases respectively | 2015 | | | | | | | | X | X | X | X | X | |
| Activity 1.2.3 Establishment of 4 Mobile Nutrition teams to enable outreaches in far to reach areas in Mayom one specifically made for Bentiu Town outreach | 2015 | | | | | | | | X | X | | | | |

| | | | | | | | | | | | | | | |
|--|------|--|--|--|--|--|--|--|--|---|---|---|---|---|
| Activity 2.1.1 Training of Nutrition workers and volunteers on management of acute malnutrition | 2015 | | | | | | | | | X | X | X | | |
| Activity 2.1.2 Training Nutrition care staff on IYCF, Vitamin A and Deworming supplementation | 2015 | | | | | | | | | X | X | X | | |
| Activity 2.2.1 Daily IYCF messaging at Health facilities and Outreach sites | 2015 | | | | | | | | | X | X | X | X | X |
| Activity 2.2.2 Vitamin A supplementation to all children 6-59 months | 2015 | | | | | | | | | X | X | X | X | X |
| Activity 2.2.3 Establishment of mother to mother support group to enhance IYCF messaging at Bentiu POC and Mayom county at Health facility level | 2015 | | | | | | | | | X | X | | | |
| Activity 1.2.4 Treatment of malnourished Children 6-59 months boys and girls at Health facilities and Moderately malnourished PLWS | 2015 | | | | | | | | | X | X | X | X | X |
| Activity 2.1.3 Supportive supervision and on the job mentoring for Nutrition staff and community Nutrition volunteers on daily basis | 2015 | | | | | | | | | X | X | X | X | X |
| Activity 1.1.3 Daily Outreach services offered at Bentiu Town clinic | 2015 | | | | | | | | | X | X | X | X | X |
| Activity 1.2.5 Rehabilitation of Bentiu POC centers to avoid flooding and provision of clean water | 2015 | | | | | | | | | X | X | | | |

M & R DETAILS

| | |
|---|--|
| Monitoring & Reporting Plan: Describe how you will monitor the implementation of each activity. Describe the tools you plan to use (checklist, photo, questionnaires, interviews, suggestion box etc.) in order to collect data and how you will store data. Explain the frequency type and protocol of reporting (how often do you report about what to whom?). State if, when and how you plan to evaluate your project . | <p>The Project will be managed and monitored on daily basis nutrition managers one based at Bentiu POC and another at Mayom county at CARE field offices. Nutrition Technioal manager will provide surge capacity to the team while based at Juba. Weekly and Monthly reports will be shared at Bentiu Nutrition sub-cluster meetings and at National nutrition cluster on monthly basis. On Daily basis nutrition staff will be mentored by key technical staff from CARE who included Nutrition manager (international) and deputy nutrition manager (National)</p> <p>CARE will also work in partnership with Nutrition partners working at Bentiu POC (CWW and MSF) and perform periodic/monthly monitoring of the nutrition centers to certify the quality of services is high and maintained there throughout the project lifespan. The progress report will be shared with CHF on quarterly basis to track success.</p> |
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OTHER INFORMATION

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|--|--|
| Accountability to Affected Populations | <p>CARE has ongoing project accountability mechanism to beneficiaries, the current project at inception the community were involved through their leaders, selection of community nutrition volunteers is done through RRC and CHD. during implementation period communities are always updated on the progress. during this period of project implementation communities at Mayom will be informed of mobile nutrition teams that will be visiting them on spevcific dates and services they will be expecting.</p> <p>CARE has feedback mechanism already in place, any complain by Community or beneficiaries is lodged and discussed at community level , field office level or at Juba level and solution provided. In case of non performance of our staff, negligence and abuse of the mandate of CARE in provision of humanitarian nutrition services the remedial actions involves discussion at community level, proper action taken even dismissal of staff, all in view to ensure our clients/beneficiaries receive the highest quality services</p> |
| Implementation Plan: Describe for each activity how you plan to implement it and who is carrying out what. | <p>This project will be implemented as support to the ongoing projects in Bentiu POC, Bentiu Town and Mayom County managed by CARE. due to scale up plans more staff will be employed and nutrition managers will be incharge of implementing the projects at field level. Periodic visits by Nutrition technical advisorr from Juba will be done on monthly basis. At Bentiu POC there is sub cluster meeting on weekly basis, CARE is an active member and will ensure the activities are implemented in coordinated and better way seeking advises from Nutrition partners and stakeholders appropriately.</p> <p>At Mayom County CHD will be involved in implementation of project since our nutrition services are integrated within health facilities managed by CHD while supported by CARE.</p> |

| Coordination with other Organizations in project area | <table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 30%;">Name of the organization</th> <th>Areas/activities of collaboration and rationale</th> </tr> </thead> <tbody> <tr> <td>1. Concern World Wide</td> <td>OTP, TSFP and IYCF services at Bentiu POC will be coordinated between CARE and CWW. CARE manages the Nutrition Rubhaal where nutrition commodities are prepositioned.</td> </tr> <tr> <td>2. MSF-Holland</td> <td>CARE collaborates with MSF in SC referrals to inpatient treatment at Bentiu POC and also at the moment collaborates with treatment of severly malnourished chilren at MSF centre at Agok</td> </tr> <tr> <td>3. UNICEF</td> <td>CARE is the manager of Nutrition rubhall at Bentiu POC and collaborates with UNICEF in ensrng the rubhall has all the commodities prepositioned. if the commodities are nearing out of stock CARE ensures UNICEF replenishes the supply on time.</td> </tr> <tr> <td>4. WFP</td> <td>CARE collaborates with WFP in management of MAM cases, supplies of MAM commodities is done by WFP and care works closely with field level officers for WFP</td> </tr> <tr> <td>5. World Relief</td> <td>At Bentiu POC WR and CARE collaborates in refeerrals of MAM cases and also technical discussions at Bentiu Sub cluster levels</td> </tr> </tbody> </table> | Name of the organization | Areas/activities of collaboration and rationale | 1. Concern World Wide | OTP, TSFP and IYCF services at Bentiu POC will be coordinated between CARE and CWW. CARE manages the Nutrition Rubhaal where nutrition commodities are prepositioned. | 2. MSF-Holland | CARE collaborates with MSF in SC referrals to inpatient treatment at Bentiu POC and also at the moment collaborates with treatment of severly malnourished chilren at MSF centre at Agok | 3. UNICEF | CARE is the manager of Nutrition rubhall at Bentiu POC and collaborates with UNICEF in ensrng the rubhall has all the commodities prepositioned. if the commodities are nearing out of stock CARE ensures UNICEF replenishes the supply on time. | 4. WFP | CARE collaborates with WFP in management of MAM cases, supplies of MAM commodities is done by WFP and care works closely with field level officers for WFP | 5. World Relief | At Bentiu POC WR and CARE collaborates in refeerrals of MAM cases and also technical discussions at Bentiu Sub cluster levels |
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| | |
|-----------------------------------|--|
| Environmental Marker Code | A: Neutral Impact on environment with No mitigation |
| Gender Marker Code | 2a-The project is designed to contribute significantly to gender equality |
| Justify Chosen Gender Marker Code | <p>CARE plans the following on gender consideration:</p> <ul style="list-style-type: none"> • During recruitment CARE will give equal opportunities to male and female • During focus group discussions women will be encouraged to participate • In activities such as IYCF, men will be encouraged to participate • CARE has a gender action plan to ensure the recommendations provided in the blue print are taken into consideration • CARE has a code of conduct that protects both staff and beneficiaries male and female |
| Protection Mainstreaming | All the beneficiaries will be protected from any harm from the commodities we shall give to beneficiaries, those at Mayom will be protected from any interference by ensuring CARE keep talking to government authorities as we carry out our services |
| Safety and Security | Implementation of activities will be in collaboration with government ministry of Health and also with full consent of commissioner and governor of Unity state. in case of any impending insecurity we shall keep our beneficiaries informed in any programming changes |
| Access | Access to Bentiu POC is likely not to be interrupted during implementation period since steps have been made by IOM to ensure rood network is improved within the POC. Howver access to Bentiu town will be via road using CARE vehicles to deliver supplies from Bentiu POC rubhall and staff. Mayom county will have the hugest challenge during rainy season, acces to beneficiaries will involve engagement of mobile team who will use quadbikes combined with trekking to access them. for areas where it will be impossible to reach, use of Chopper will be necessary to reach those areas especially in the wet period. |

BUDGET

1 Staff and Other Personnel Costs (please itemize costs of staff, consultants and other personnel to be recruited directly by the implementing partner for project implementation)

| Code | Budget Line Description | D / S | Unit Quantity | Unit Cost | Duration | Percent Charged to CHF / ERF | Total Cost | 2015 | | | Quarterly Total |
|------|---|-------|---------------|-----------|----------|------------------------------|------------|------|----------|----------|-----------------|
| | | | | | | | | Q3 | Q4 | | |
| 1.1 | Country Director | s | 1 | 17102 | 5 | 5.00% | 4,275.50 | | 2,137.75 | 2,137.75 | 4,275.50 |
| | Country Director (Based in Juba) Salary will be charged on this project as support cost | | | | | | | | | | |
| 1.2 | Assistant Country Director-ACD Program | s | 1 | 15538 | 5 | 5.00% | 3,884.50 | | 1,942.25 | 1,942.25 | 3,884.50 |

| | ACD programs (Juba based) salary will be charged to this project as support cost | | | | | | | | | |
|---|---|-------|---------------|-----------|----------|------------------------------|------------|-----------|-----------|-----------------|
| 1.3 | Assistant Country Director- ACD Program support | s | 1 | 15538 | 5 | 5.00% | 3,884.50 | 1,942.25 | 1,942.25 | 3,884.50 |
| | 5% of ACD programs support (Juba Based) salary will be charged to this project as support cost | | | | | | | | | |
| 1.4 | Finance Director | s | 1 | 12240 | 5 | 5.00% | 3,060.00 | 1,530.00 | 1,530.00 | 3,060.00 |
| | 5% of Finance director (Juba Based) salary will be charged to this project as support cost:Basic salary \$6000 plus 44% benefits plus house allowance \$3600=\$12240 | | | | | | | | | |
| 1.5 | Grants and contracts coordinator | s | 1 | 12240 | 5 | 5.00% | 3,060.00 | 1,530.00 | 1,530.00 | 3,060.00 |
| | 5% of Grants Coordinator (Juba Based) salary will be charged to this project as support cost. This officer is in charge of managing all program grants CHF inclusive:Basic salary \$6000 plus 44% benefits plus house allowance \$3600=\$12240 | | | | | | | | | |
| 1.6 | Nutrition Technical Advisor | D | 1 | 12240 | 5 | 10.00% | 6,120.00 | 3,060.00 | 3,060.00 | 6,120.00 |
| | Nutrition Technical Advisor (Juba Based -International staff)salary will be charged at this project Basic salary \$6000 plus 44% benefits plus house allowance \$3600=\$12240 He will be involved in technical support and management of the project, provision of training to project staff, representation of the project at Cluster level, supporting in quarterly reporting, supportive supervision at field level. He will spent 60% of his time in managing this project | | | | | | | | | |
| 1.7 | Nutrition Program Managers | D | 2 | 7130 | 5 | 30.00% | 21,390.00 | 10,695.00 | 10,695.00 | 21,390.00 |
| | 2 Nutrition Program managers (Field Based -International staff)salary will be charged at this project Basic salary \$4500 plus 44% benefits plus \$650=\$7130 they will be involved in management of the project at field level ,provision of training to project staff, representation of the project at County Cluster level, quarterly reporting, supervision at field level. The will spent 100% of their time in managing this project. One manager will be based at Mankien to manage Mayom program while the other at Bentiu POC to manage POC and Bentiu Town activities | | | | | | | | | |
| 1.8 | Nutrition officers | D | 3 | 2175 | 5 | 30.00% | 9,787.50 | 4,893.75 | 4,893.75 | 9,787.50 |
| | 3 Nutrition officers (field Based -National staff)salary will be charged at this project Basic salary \$1500 plus 45% benefits =\$2175. They will be involved in the implementation of the project at health facility levels and at outreach sites. 2 at Mayom one to lead the mobile teams while the other the static program. 1 will be based at Bentiu POC to coordinate activities for Bentiu town | | | | | | | | | |
| 1.9 | Nutrition assistant officer | D | 99 | 725 | 5 | 30.00% | 107,662.50 | 53,831.25 | 53,831.25 | 107,662.50 |
| | 99 Community Nutrition workers (field Based -National staff)salary will be charged at this project Basic salary \$500 plus 45% benefits =\$725. They will be involved in the implementation of the project at health facility levels and at outreach sites. | | | | | | | | | |
| 1.10 | Community nutrition outreach workers | D | 50 | 100 | 5 | 100.00% | 25,000.00 | 12,500.00 | 12,500.00 | 25,000.00 |
| | Casual nutrition screening staff will be employed to assist in active case finding within the facilities and outreach catchment areas, they will be involved in defaulter tracing activities, follow ups and distribution of commodities during outreaches and some facilities. their incentives will be direct cost charged to the project. each of 18 HF and outreach sites will have 8 community outreach workers, at least a third will be either gender. special groups such as persons with disabilities will be given due consideration. they will be given incentive on monthly basis of \$100. All 50 in a month will receive \$5000 | | | | | | | | | |
| 1.11 | Finance and admin | D | 1 | 5760 | 5 | 15.00% | 4,320.00 | 2,160.00 | 2,160.00 | 4,320.00 |
| | 80% of Grants Manager-Finance (Bentiu Based) salary will be charged to this project as Direct cost. This officer is in charge of managing all program grants-Finances CHF inclusive:Basic salary \$4000 plus 44% benefits =\$5760 | | | | | | | | | |
| 1.12 | Drivers, cooks and cleaners | D | 24 | 300 | 5 | 20.00% | 7,200.00 | 3,600.00 | 3,600.00 | 7,200.00 |
| | 4 drivers, 2 cooks and 18 cleaners will be involved in maintaining the nutrition program centers and compound clean and riving the staff to and from the field. | | | | | | | | | |
| | Section Total | | | | | | 199,644.50 | 99,822.25 | 99,822.25 | 199,644.50 |
| 2 Supplies, Commodities, Materials (please itemize direct and indirect costs of consumables to be purchased under the project, including associated transportation, freight, storage and distribution costs) | | | | | | | | | | |
| Code | Budget Line Description | D / S | Unit Quantity | Unit Cost | Duration | Percent Charged to CHF / ERF | Total Cost | 2015 | | Quarterly Total |
| | | | | | | | | Q3 | Q4 | |
| 2.1 | IMAM, IYCF and Micronutrient training | D | 2 | 2000 | 1 | 100.00% | 4,000.00 | 4,000.00 | 0.00 | 4,000.00 |
| | All nutrition staff will be trained once at two locations at Bentiu POC and Mayom county | | | | | | | | | |
| 2.2 | Transportation of Nutrition supplies | D | 1 | 600 | 5 | 100.00% | 3,000.00 | 1,500.00 | 1,500.00 | 3,000.00 |
| | Secondary transportation of Nutrition supplies within field level Lumpsum figure per month within Mayom county | | | | | | | | | |
| 2.3 | Tents, gumboots, torches, mattresses, Bedsheet and blankets | D | 1 | 3500 | 1 | 100.00% | 3,500.00 | 3,500.00 | 0.00 | 3,500.00 |
| | To operate in all 2 counties tents will be required to facilitate accommodation at Field level by support staff and program staff. the assorted camping equipments will be allocated a lumpsum of \$3500 | | | | | | | | | |
| 2.4 | Mobile Nutrition teams, fuel, accomodation and food | D | 2 | 3300 | 5 | 100.00% | 33,000.00 | 16,500.00 | 16,500.00 | 33,000.00 |
| | Mayom county will have 2 mobile teams while Bentiu town will have 1 mobile team making 2 mobile team. each team with 1 nurse, 3 community nutrition workers, 1 IYCF assistant and one Nutrition officer will require travel to far to reach areas on scheduled days awhile at Bentiu town accessed from Bentiu POC on daily bases. their will be lumpsum allocation of \$3300 per month per team.The bentiu Mobile team will be designed to be static within a short period to have staff available all the time with minimal movement between POC and Bentiu Town | | | | | | | | | |
| 2.5 | Field level Vehicle fuel, Generator Fuel and maintainance | D | 2 | 1000 | 5 | 20.00% | 2,000.00 | 1,000.00 | 1,000.00 | 2,000.00 |
| | Each of the field base will have offices with generators and vehicles for this project, including proposed Quad bikes, fuel and maintenance cost this cost will be charged 20% as support cost | | | | | | | | | |
| 2.6 | Purchase of Nutrition treatment and ration cards | D | 1 | 5000 | 1 | 100.00% | 5,000.00 | 5,000.00 | 0.00 | 5,000.00 |
| | OTP, TSFP and other nutrition cards will be procured to ensure services are provided with highest quality recording standards | | | | | | | | | |
| | Section Total | | | | | | 50,500.00 | 31,500.00 | 19,000.00 | 50,500.00 |
| 3 Equipment (please itemize costs of non-consumables to be purchased under the project) | | | | | | | | | | |
| Code | Budget Line Description | D / S | Unit Quantity | Unit Cost | Duration | Percent Charged to CHF / ERF | Total Cost | 2015 | | Quarterly Total |
| | | | | | | | | Q3 | Q4 | |
| 3.1 | Thuraya satellite phone 2520 with charger XT and pre paid SIM card | D | 3 | 1200 | 1 | 100.00% | 3,600.00 | 3,600.00 | 0.00 | 3,600.00 |
| | 3 thuraya satellite phones will be purchased each for 3 Mobile nutrition teams to facilitate reporting and communication since there are no access to other mobile networks | | | | | | | | | |
| 3.2 | Motorola radios for Bentiu POC communication | D | 6 | 500 | 1 | 100.00% | 3,000.00 | 3,000.00 | 0.00 | 3,000.00 |
| | Communication within Bentiu POC requires Radio calling and thus this project proposes to buy 6 hand sets to help with communication. one at each nutrition centers (sector 1, 5 addd bentiu town), one at Rubhall, one with the driver and one with Nutrition manager | | | | | | | | | |

| | | | | | | | | | | |
|----------------------|--|--|--|--|--|--|----------|----------|------|----------|
| Section Total | | | | | | | 6,600.00 | 6,600.00 | 0.00 | 6,600.00 |
|----------------------|--|--|--|--|--|--|----------|----------|------|----------|

4 Contractual Services (please list works and services to be contracted under the project)

| Code | Budget Line Description | D / S | Unit Quantity | Unit Cost | Duration | Percent Charged to CHF / ERF | Total Cost | 2015 | | Quarterly Total | |
|----------------------|-------------------------|-------|---------------|-----------|----------|------------------------------|------------|------|----|-----------------|------|
| | | | | | | | | Q3 | Q4 | | |
| Section Total | | | | | | | | 0.00 | 0 | 0 | 0.00 |

5 Travel (please itemize travel costs of staff, consultants and other personnel for project implementation)

| Code | Budget Line Description | D / S | Unit Quantity | Unit Cost | Duration | Percent Charged to CHF / ERF | Total Cost | 2015 | | Quarterly Total | |
|----------------------|---|-------|---------------|-----------|----------|------------------------------|------------|-----------|----------|-----------------|-----------|
| | | | | | | | | Q3 | Q4 | | |
| 5.1 | Staff flights outside juba-Field flight Flights cost for direct program staff going to field and from field to juba, 3 international staff, 6 trips per staff= 18 trips each round trip \$400, 100% will be charged to this project | D | 18 | 400 | 1 | 100.00% | 7,200.00 | 3,600.00 | 3,600.00 | 7,200.00 | |
| 5.2 | Staff flights outside juba-International travel Flights cost for direct program international staff going for RnR and leave, 3 international staff (2 Nutrition Managers and 1 Nutrition advisor) 3 trips per staff= 9 trips each round trip \$1500, 50% will be charged to this project | D | 9 | 1200 | 1 | 50.00% | 5,400.00 | 2,700.00 | 2,700.00 | 5,400.00 | |
| 5.3 | Staff per diem Field staff visiting juba for meetings and Juba based staff visiting Field for supportive supervision, lumpsum | D | 1 | 5130 | 1 | 40.00% | 2,052.00 | 1,026.00 | 1,026.00 | 2,052.00 | |
| Section Total | | | | | | | | 14,652.00 | 7,326.00 | 7,326.00 | 14,652.00 |

6 Transfers and Grants to Counterparts (please list transfers and sub-grants to project implementing partners)

| Code | Budget Line Description | D / S | Unit Quantity | Unit Cost | Duration | Percent Charged to CHF / ERF | Total Cost | 2015 | | Quarterly Total | |
|----------------------|-------------------------|-------|---------------|-----------|----------|------------------------------|------------|------|----|-----------------|------|
| | | | | | | | | Q3 | Q4 | | |
| Section Total | | | | | | | | 0.00 | 0 | 0 | 0.00 |

7 General Operating and Other Direct Costs (please include general operating expenses and other direct costs for project implementation)

| Code | Budget Line Description | D / S | Unit Quantity | Unit Cost | Duration | Percent Charged to CHF / ERF | Total Cost | 2015 | | Quarterly Total | |
|----------------------|---|-------|---------------|-----------|----------|------------------------------|------------|----------|----------|-----------------|----------|
| | | | | | | | | Q3 | Q4 | | |
| 7.1 | Internet connection costs-VSAT 1 Vsat internet communication at Mayom, estimated to cost on monthly basis \$500 subscription on monthly basis for communication between field basis and Juba and with partners | D | 1 | 500 | 5 | 20.00% | 500.00 | 250.00 | 250.00 | 500.00 | |
| 7.2 | Stationery for the project lumpsum stationery for each of the four field bases | D | 1 | 300 | 5 | 100.00% | 1,500.00 | 750.00 | 750.00 | 1,500.00 | |
| 7.3 | Office rent at field level 2 field offices based at Bentiu, and Mayom- expenses include generator fuel, food supplies, guesthouse maintenance will charge 30% from this project | D | 2 | 1400 | 5 | 30.00% | 4,200.00 | 2,100.00 | 2,100.00 | 4,200.00 | |
| Section Total | | | | | | | | 6,200.00 | 3,100.00 | 3,100.00 | 6,200.00 |

Sub Total Direct Cost 277,596.50

Indirect Programme Support Cost PSC rate (insert percentage, not to exceed 7 per cent) 7%

Audit Cost (For NGO, in percent) 1%

PSC Amount 19,431.76

| Quarterly Budget Details for PSC Amount | 2015 | | Total |
|---|----------|----------|-----------|
| | Q3 | Q4 | |
| | 9,715.88 | 9,715.88 | 19,431.76 |

Total Fund Project Cost 297,028.26

Project Locations

| Location | Estimated percentage of budget for each location | Beneficiary Men | Women | Boy | Girl | Total | Activity |
|------------------|--|-----------------|-------|------|------|-------|---|
| Unity -> Mayom | 70 | 70 | 1451 | 3022 | 3146 | 7689 | Activity 1.1.1 : Daily MUAC screening at community level and at IDPS settlement at Bentiu POC Activity 1.1.2 : Weekly community outreaches through Mobile teams at Mayom county Activity 1.1.3 : Daily Outreach services offered at Bentiu Town clinic Activity 1.2.1 : Strengthening provision of Nutrition OTP and TSFP services at 13 Nutrition centers Activity 1.2.2 : Provision of Both RUTF and RUSF to SAM and MAM cases respectively Activity 1.2.3 : Establishment of 4 Mobile Nutrition teams to enable outreaches in far to reach areas in Mayom one specifically made for Bentiu Town outreach Activity 1.2.4 : Treatment of malnourished Children 6-59 months boys and girls at Health facilities and Moderately malnourished PLWS Activity 2.1.1 : Training of Nutrition workers and volunteers on management of acute malnutrition Activity 2.1.2 : Training Nutrition care staff on IYCF, Vitamin A and Deworming supplementation Activity 2.1.3 : Supportive supervision and on the job mentoring for Nutrition staff and community Nutrition volunteers on daily basis Activity 2.2.1 : Daily IYCF messaging at Health facilities and Outreach sites Activity 2.2.2 : Vitamin A supplementation to all children 6-59 months Activity 2.2.3 : Establishment of mother to mother support group to enhance IYCF messaging at Bentiu POC and Mayom county at Health facility level |
| Unity -> Rubkona | 30 | 36 | 889 | 1964 | 2044 | 4933 | Activity 1.1.1 : Daily MUAC screening at community level and at IDPS settlement at Bentiu POC Activity 1.1.2 : Weekly community outreaches through Mobile teams at Mayom county Activity 1.1.3 : Daily Outreach services offered at Bentiu Town clinic Activity 1.2.1 : Strengthening provision of Nutrition OTP and TSFP services at 13 Nutrition centers Activity 1.2.2 : Provision of Both RUTF and RUSF to SAM and MAM cases respectively Activity 1.2.4 : Treatment of malnourished Children 6-59 months boys and girls at Health facilities and Moderately malnourished PLWS Activity 1.2.5 : Rehabilitation of Bentiu POC centers to avoid flooding and provision of clean water Activity 2.1.1 : Training of Nutrition workers and volunteers on management of acute malnutrition Activity 2.1.2 : Training Nutrition care staff on IYCF, Vitamin A and Deworming supplementation |

Activity 2.1.3 : Supportive supervision and on the job mentoring for Nutrition staff and community Nutrition volunteers on daily basis
Activity 2.2.1 : Daily IYCF messaging at Health facilities and Outreach sites
Activity 2.2.2 : Vitamin A supplementation to all children 6-59 months
Activity 2.2.3 : Establishment of mother to mother support group to enhance IYCF messaging at Bentiu POC and Mayom county at Health facility level

Project Locations (first admin location where activities will be implemented. If the project is covering more than one State please indicate percentage per State)

DOCUMENTS

