

<b>Requesting Organization :</b>	United Nations Children's Fund				
<b>Allocation Type :</b>	Reserve 2016				
<b>Primary Cluster</b>	<b>Sub Cluster</b>	<b>Percentage</b>			
Nutrition		100.00			
		<b>100</b>			
<b>Project Title :</b>	Lifesaving response for the treatment of severe acute malnutrition among boys and girls aged U-5 living in drought affected hotspots in Somalia				
<b>Allocation Type Category :</b>					
<b>OPS Details</b>					
<b>Project Code :</b>		<b>Fund Project Code :</b>	SOM-16/3485/R/Nut/UN/4479		
<b>Cluster :</b>		<b>Project Budget in US\$ :</b>	800,000.48		
<b>Planned project duration :</b>	12 months	<b>Priority:</b>			
<b>Planned Start Date :</b>	16/12/2016	<b>Planned End Date :</b>	14/12/2017		
<b>Actual Start Date:</b>	16/12/2016	<b>Actual End Date:</b>	14/12/2017		
<b>Project Summary :</b>	This project aims at responding to the most affected communities by drought through scaling up of regular screening and identification of severe acutely malnourished children and provide supplies and logistics to implementing partners providing services for treatment of severe acute malnutrition for 9,000 boys and girls under-5 in facility and community outreach clinics				
<b>Direct beneficiaries :</b>					
<b>Men</b>	<b>Women</b>	<b>Boys</b>	<b>Girls</b>	<b>Total</b>	
0	182,250	4,410	4,590	191,250	
<b>Other Beneficiaries :</b>					
<b>Beneficiary name</b>	<b>Men</b>	<b>Women</b>	<b>Boys</b>	<b>Girls</b>	<b>Total</b>
Children under 5	0	0	4,410	4,590	9,000
Pregnant and Lactating Women	0	182,250	0	0	182,250
<b>Indirect Beneficiaries :</b>					
36000					
<b>Catchment Population:</b>					
2700000					
<b>Link with allocation strategy :</b>					
The project will respond to the high caseload of acutely malnourished children in drought affected areas by providing critical lifesaving core supplies needed for their survival					
<b>Sub-Grants to Implementing Partners :</b>					
<b>Partner Name</b>	<b>Partner Type</b>	<b>Budget in US\$</b>			
<b>Other funding secured for the same project (to date) :</b>					
<b>Other Funding Source</b>			<b>Other Funding Amount</b>		
<b>Organization focal point :</b>					
<b>Name</b>	<b>Title</b>	<b>Email</b>	<b>Phone</b>		
Tsedeye Girma	Emergency Specialist	tgirma@unicef.org	+254 20 762 28530		
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## **BACKGROUND**

### **1. Humanitarian context analysis**

The food security and nutrition outlook for Somalia is gloomy for both the post Deyr 2016/17 period as a result of the combined impact of poor 2016 Gu and 2016/17 Deyr seasonal rainfall forecast. The number of people in 'crisis' and 'emergency' is projected to increase to 1.3 million by May 2017, up from 935,000 one year earlier. The estimated number of malnourished children is up to 323,350 (Gu 2016 IDP Settlements and Rural Livelihood Zones Nutritional Assessment) from 304,700 in 2015.

At the end of 2016, drought conditions continue to worsen with moderate to extreme drought conditions prevalent across the country. The failure of two consecutive rains (Gu' and Deyr in 2015 and also Gu' in 2016) resulted in severe drought. Thousands have been affected, particularly in Puntland, with communities in Bari, Nugaal, Sool, Sanaag and Karkaar regions most severely affected. Other drought affected areas include regions in Somaliland and South-Central.

In Puntland severe drought is directly affecting 150,000 people and has displaced an additional 12,000 people. The continuing drought has led to severe shortage of pasture and water (for humans and livestock), resulting in deterioration in livestock body conditions, declining livestock production and increased livestock deaths. Milk prices have more than doubled putting the lives of children at risk. The cost of water has tripled since June (to \$15/barrel from \$5/barrel – 200 liters); or even increased six-fold to \$30 in some remote pastoral settlements. If drought conditions continue to deteriorate, community coping mechanisms are likely to be abandoned, putting vulnerable households at risk of acute watery diarrhea (AWD) and cholera. Combination of increased malnutrition and low availability of nutritional program are of particular concern in the Bari region where findings showed general acute malnutrition of 33 % for children, with 5 % being severely malnourished. In Somaliland: 31 % of the population or more than one million people will be in need of humanitarian assistance in until the end of 2016. Acute malnutrition has worsened and 248,000 people face acute food security crisis. The prevailing food security crisis could deteriorate to emergency levels. About 84% of households have had their main sources of income affected by drought, 86 % reported that they have lost livestock, their main source of livelihood, in the last season. Lack of water is a major concern with the distance to available water sources increasing given the prolonged drought condition. Prevalence of illness amongst children has increased as the quality of water has diminished with no available alternative.

South-Central (Gedo): Poor Gu and Deyr rains coupled with conflict have affected nearly 79,000 people, including 3,000 who left their homes in search of water. Most of the residents travel between 15 and 35 km in search of water. About 77% of animal deaths in Gedo has been attributed to the drought. Some 89% of households have reduced meals to two per day while 7% have reduced to one meal.

In other areas the drought conditions map and assessment from SWALIM, parts of Juba, pockets in Hiran and Cowpea belt areas in Galgaduud are currently in a severe drought conditions leading to a likelihood of a further deterioration in the food security situation.

### **2. Needs assessment**

Based on the SAM prevalence estimates of 2.6% reported by the 2016 post Gu FSANU assessment, the projected 2017 programme caseload is 150,000 boys and girls of which 75% (112,500) will be targeted by UNICEF. This considers the incidence rate of acute malnutrition and 2012–2014 admission trends by district. Furthermore, caseloads are adjusted for updated population figures of 12.3 million, an anticipated 70% reach for UNICEF and nutrition actors, as well as a subtraction of the estimated 30% reach through non-UNICEF supported actors. Critical levels of GAM (rates exceeding 15%) were found in 21 of 50 population groups surveyed. These include urban parts of Bari and rural parts of Hiraan, Bay, Bakool, Lower Shabelle, Gedo, East and West Golis of Wooqooy Galbeed, Sanaag, and among displaced populations in Mogadishu, Kismayo, Dhobley, Dollow and Dhusamareb. Similarly increasing trends of acute malnutrition from health facilities (>5 percent) and admissions to nutrition centers (>15 percent) has been observed in these regions. Trade disruption and reduced access to seasonal agricultural employment also exacerbate the food insecurity situation in urban areas under government control following AMISOM military offensives. The offensives have created new population displacements with urgent needs for lifesaving interventions in both IDP and host communities. According to FEWS NET, an expected increase in conflict will affect humanitarian access, trade and economic activities and adversely affect poor households' access to food and income.

### **3. Description Of Beneficiaries**

An estimated 450,000 boys and girls under-5 years from targeted drought affected areas will be screened for acute malnutrition through a mixture of fixed, mobile and outreach clinics out of whom 4,410 severely acutely malnourished boys under-5 and 4,590 severely acutely malnourished girls under-5 will be admitted to nutrition centres to receive lifesaving treatment. Additionally, an estimated 182,250 pregnant and lactating women (75% of the target) will receive Infant and Young Child Feeding (IYCF) services including the Basic Nutrition Services Package (BNSP).

### **4. Grant Request Justification**

Provision of services for the management of severe acute malnutrition to save lives remains a central component of the response by Cluster Lead Agency (CLA-UNICEF). Currently the SAM service is suffering from chronic underfunding and critical fall out to core pipeline. In light of this, it is clear that a sustained focus on provision of supplies for life saving treatment, extending service delivery through mobile team to the drought affected areas and strengthen the overall coordination would be the critical areas of engagement using the limited SHF funding while mobilizing other resources to cover the major gap in vast majority of the core pipeline. This continued investment provision of supplies and delivery strategy to reach drought affected populations can make a substantial difference. Thus, in line with UNICEF's core commitments for children (CCC) in emergencies, this funding will contribute to the reduction of mortality and morbidity resulting from severe acute malnutrition among children U5 and pregnant and lactating women resulting from the drought affecting North East regions of Puntland, hotspots areas of Somaliland and Central and South regions.

### **5. Complementarity**

The Basic Nutrition Services Package (BNSP) is centered on a holistic approach, combining treatment, prevention and promotion approaches to achieve maximum impact. In order to strengthen this approach in 2017, UNICEF will continue to evolve from a primarily service delivery to enhancing evidence-based quality improvement for all BNSP components.

The main priorities for 2017 are thus as follows: a) Strengthening provision of IMAM services in order to achieve improved coverage of services in IDP communities and hotspots of worst affected areas; b) Improving quality and case coverage of the minimum BNSP delivered through the IMAM programme; c) Improving quality of community-based prevention and promotion services particularly IYCF and increasing demand for, and utilization of, IMAM services; d) Capacity development and systems strengthening, including supply chain improvements and real time monitoring of BSNP services, through a decentralized online dashboard and bottleneck analysis framework; and e) Enhancing the enabling environment and strategic capacity of the sector for scaling up nutrition. Overall, through SHF, UNICEF aims to ensure the continued and timely provision of essential nutrition supplies and program operational costs for the holistic management of acute malnutrition. It is anticipated that SHF funds will fill critical gaps in the above-mentioned priorities, in addition to enabling continued geographical and case coverage by ensuring pipeline continuity of the nutrition supply chain

## LOGICAL FRAMEWORK

### Overall project objective

To avert excess mortality due to acute malnutrition and associated morbidities for an estimated 9,000 severely acutely malnourished under-5 children (4,410 boys and 4,590 girls) through regular screening and identification of SAM and the provision of high quality lifesaving treatment services as defined in the BNSP by extending services to reach the inaccessible drought affected areas through support to fixed and mobile teams.

### Nutrition

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Reduction of nutrition related morbidity and mortality rates to below emergency thresholds	Somalia HRP 2016	100

**Contribution to Cluster/Sector Objectives :** Through the provision of lifesaving therapeutic supplies to severe acutely malnourished children in order to contribute to reduction of morbidity and mortality rates in communities most affected by drought

### Outcome 1

Strengthened lifesaving preventive nutrition services for vulnerable population groups focusing on appropriate infant and young child feeding practices and optimal maternal nutrition

### Output 1.1

#### Description

Pregnant and lactating women individually counselled at least once on IYCF (-E) at the community and facility level

#### Assumptions & Risks

### Activities

#### Activity 1.1.1

##### Standard Activity : Infant and young child feeding promotion

Deliver individual IYCF counselling to pregnant and lactating women community during mobile outreaches and facility level

### Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	Nutrition	Number of IYCF promotion sessions held					180

**Means of Verification :** Deliver IYCF services to PLW during IMAM sessions at facility and mobile outreach level

Indicator 1.1.2	Nutrition	Number of PLW receiving individual IYCF counselling services					182,250
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**Means of Verification :** Cluster and partner reports

### Outcome 2

Lifesaving supplies are delivered for the treatment of 4,410 severely acutely malnourished boys under-5 and 4,590 severely acutely malnourished girls under-5 affected by SAM.

### Output 2.1

#### Description

Number of boys and girls treated for SAM

#### Assumptions & Risks

### Activities

#### Activity 2.1.1

##### Standard Activity : Community screening for malnutrition and referral

Conduct screening 450,000 boys and girls at facility and community mobile outreaches

#### Activity 2.1.2

##### Standard Activity : Treatment of severe acute malnutrition in children 0-59months

Deliver high quality SAM treatment to 4,410 boys and 4,590 girls under-5 affected by SAM

### Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	Nutrition	Number of children (6-59months) and pregnant and lactating women admitted in treatment programmes					9,000

**Means of Verification** : Cluster and partner reports

**Additional Targets** :

#### M & R

##### Monitoring & Reporting plan

UNICEF holds overall responsibility for programme monitoring and oversight, carried out using a combination of methods in light of the prevailing challenging context. In addition to information sharing through sector coordination platforms, UNICEF collects information through partner reporting, staff visits and triangulates data in an attempt to achieve more reliable verification and monitoring. In inaccessible or partly accessible areas, UNICEF deploys third-party monitoring and verification teams; processes and tools of the third party monitors have been updated to support a more systematized approach.

UNICEF's risk management processes and systems have also been reviewed and strengthened; outputs of these programme assurance and risk management systems, coupled with increased communication and information sharing with other stakeholders have improved partner selection and management practices.

##### Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Deliver individual IYCF counselling to pregnant and lactating women community during mobile outreaches and facility level	2016												X
	2017	X	X	X	X	X	X						
Activity 2.1.1: Conduct screening 450,000 boys and girls at facility and community mobile outreaches	2016												X
	2017	X	X	X	X	X	X						
Activity 2.1.2: Deliver high quality SAM treatment to 4,410 boys and 4,590 girls under-5 affected by SAM	2016												X
	2017	X	X	X	X	X	X						

#### OTHER INFO

##### Accountability to Affected Populations

UNICEF will ensure greater community involvement and participation by working with a network of community health workers for screening, referral and monitoring of children on treatment. UNICEF will ensure that mothers are well informed about the functioning of the program, the state and evolution of their child: their participation in program management.

##### Implementation Plan

SHF-funded program will be delivered primarily through local implementing partners in selected districts, including SHF partners implementing IMAM interventions among both host and IDP populations. UNICEF will utilize its existing logistics, coordination, monitoring and other relevant mechanisms in place for continuation of the existing nutrition program. In light of the lead time estimated at 3 to 6 months between procurement and actual delivery of supplies in-country but also to ensure a timely response, UNICEF will utilize its existing pooled stock of nutrition supplies, which may be procured with funding from other donors. SHF funding will then be used to procure new supplies to replenish this stock in order to ensure continuity in service delivery. The nutrition cluster will monitor and ensure implementing partner compliance with SHF targeted regions. UNICEF will conduct supply chain monitoring through both UNICEF monitors and third party monitors for quality assurance purposes and to ensure that supplies are used as intended.

##### Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
Nutrition cluster	Coordination of service delivery monitoring and activity reporting

##### Environment Marker Of The Project

A: Neutral Impact on environment with No mitigation

##### Gender Marker Of The Project

2a- The project is designed to contribute significantly to gender equality

##### Justify Chosen Gender Marker Code

In regards to mainstreaming gender, UNICEF emphasizes an integrated approach to the nutrition crisis including the expansion of lifesaving activities as well as addressing the underlying causes of malnutrition, such as weak breastfeeding practices attributable to poor maternal knowledge and skills in young child feeding and poor hygiene. UNICEF thus works with partners to strengthen caregiver capacities, especially to empower mothers and male heads of household in decision making on child care. UNICEF is proactive in ensuring that boys and girls are assessed so that sex-preference or bias does not prevent equal access, to ensure that any emerging gender gaps can be identified and assessed in a timely manner.

UNICEF will continue to make efforts to achieve gender balance at all levels of the project cycle in 2017. Final evaluations and assessment methodologies will be inclusive and representative of all eligible children, irrespective of their gender and health status. Special focus will also be given to recruitment of female outreach staff. Support will also be provided to both men and women in all activities that involve community members and government bodies, through appropriate planning of activities with relevant stakeholders.

#### **Protection Mainstreaming**

UNICEF will ensure equal and impartial access for all direct and indirect beneficiaries during screening and treatment. UNICEF will encourage the participation of female community based volunteers to conduct screening and referral of SAM children

#### **Country Specific Information**

#### **Safety and Security**

In accessible areas such as Somaliland and Puntland, UNICEF monitoring staff will monitor project implementing who have undergone SSAFE training supplied with personal protective equipment travelling in armored vehicles. However, in inaccessible areas of Central South Region, third party monitors will be deployed and their reports will be triangulated with partners reports

#### **Access**

UNICEF collects information through partner reporting, staff visits and triangulates data in an attempt to achieve more reliable verification and monitoring. In inaccessible or partly accessible areas, UNICEF deploys third-party monitoring and verification teams; processes and tools of the third party monitors have been updated to support a more systematized approach.

#### **BUDGET**

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
<b>Staff and Other Personnel Costs</b>							
1.1	Nutrition Manager P4	D	1	11,000.00	6	45.00	29,700.00
	<i>Technical support from P4 Nutrition Manager will oversee program implementation</i>						
1.2	Nutrition cluster coordinator P4	D	1	11,000.00	6	45.00	29,700.00
	<i>Technical support from P4 Nutrition cluster coordinator to oversee the overall coordination of the delivery of drought response</i>						
1.3	Nutrition cluster coordinator NOB	D	1	3,000.00	6	27.00	4,860.00
	<i>Technical support from NOB Nutrition cluster coordinator based in Mogadishu to monitor field project implementation</i>						
	<b>Section Total</b>						<b>64,260.00</b>
<b>Supplies, Commodities, Materials</b>							
2.1	Ready To Use Therapeutic Food (RUTF)	D	9000	45.00	1	100.00	405,000.00
	<i>Lifesaving supplies required for the treatment of 9000 SAM children</i>						
2.2	Transportation, freight, storage and distribution costs	D	196	480.00	1	100.00	94,080.00
	<i>International an inland transportation of lifesaving supplies and handling and warehousing costs</i>						
	<b>Section Total</b>						<b>499,080.00</b>
<b>Travel</b>							
5.1	Technical support and field monitoring	D	1	7,708.00	1	100.00	7,708.00
	<i>Field monitoring by UNICEF staff (Nutrition Manager, Cluster coordinator and field based nutrition specialists) once every two months costs covering transportation and DSA</i>						
	<b>Section Total</b>						<b>7,708.00</b>
<b>Transfers and Grants to Counterparts</b>							
6.1	Implementing partners	D	3	26,666.00	1	100.00	79,998.00
	<i>Operational costs for NGO implementing partners one per zone for direct delivery project activities</i>						
	<b>Section Total</b>						<b>79,998.00</b>

General Operating and Other Direct Costs							
7.1	Cross sectoral support costs	D	1	96,618.00	1	100.00	96,618.00
	<p><i>Cross sectoral support costs are assessed on all contributions to UNICEF Somalia and covers costs of security, administration and finance support functions ( both at central Nairobi level and in the zonal offices), operations ( including office rentals, utilities, communication, stationery, fuel, IT, etc, transport, planning, monitoring and evaluation and reporting. Cross sectoral support has a clear and critical impact on the success or failure of programme implementation in Somalia. One of UNICEF's strengths in Somalia is its networks of sub-offices that ensure direct contact with local authorities and communities, enabling strong programming and use of resources. Every tangible programme result is possible because there are staff and support structures in place. (Time Unit: Lumpsum)</i></p>						
	<b>Section Total</b>						<b>96,618.00</b>
<b>SubTotal</b>			9,204.00				<b>747,664.00</b>
Direct							747,664.00
Support							
<b>PSC Cost</b>							
PSC Cost Percent							7.00
PSC Amount							52,336.48
<b>Total Cost</b>							<b>800,000.48</b>
<b>Project Locations</b>							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Bakool -> Xudur -> Banyale	6	10,252	248	258	10,758		
Bari -> Bossaso -> Bossaso	14	25,059	606	631	26,296		
Gedo -> Ceel Waaq -> Ceel Waaq/October	6	10,252	248	258	10,758		
Gedo -> Doolow -> Belet Xaawo/Booc Booc	2	3,417	83	86	3,586		
Hiraan -> Bulo Burto -> Bulo Burto	6	11,391	276	287	11,954		
Lower Juba -> Afmadow -> Baddana	6	11,391	276	287	11,954		
Lower Shabelle -> Kurtunwaarey -> Kurtunwaarey/H/Wadaag	4	7,973	193	201	8,367		
Mudug -> Gaalkacyo -> Balanbal	4	7,973	193	201	8,367		
Nugaal -> Garowe -> Darayle	12	21,642	523	545	22,710		
Sanaag -> Ceerigaabo -> Bixindidibed	11	20,503	496	516	21,515		
Sool -> Laas Caanood -> Buq-Xaar	10	18,225	441	459	19,125		
Togdheer -> Owdweyne -> Bali Obsiye Satellite	19	34,172	827	861	35,860		
<b>Documents</b>							
Category Name		Document Description					
Project Supporting Documents		SHF-\$3.2million_reserve_FINAL.docx					
Grant Agreement		RCHC-LT-016-077.pdf					