

Requesting Organization :	Nile Hope	
Allocation Type :	1st Round Standard Allocation	
Primary Cluster	Sub Cluster	Percentage
NUTRITION		100.00
		100
Project Title :	Provide quality community management of acute malnutrition services, strengthen capacity building and nutrition surveillance in Pigi, Fangak, Akobo (Jonglei) and Leer (Unity) counties.	
Allocation Type Category :	Frontline services	

OPS Details

Project Code :		Fund Project Code :	SSD-16/HSS10/SA1/N/NGO/771
Cluster :		Project Budget in US\$:	267,217.09
Planned project duration :	5 months	Priority:	
Planned Start Date :	01/02/2016	Planned End Date :	30/06/2016
Actual Start Date:	01/02/2016	Actual End Date:	30/06/2016

Project Summary : This project will strive to offer high impact and life-saving nutrition interventions targeting children below five years and PLWs of host communities, IDPs and other vulnerable populations in Fangak, Pigi, Akobo and Leer. The project will have a strong component of community mobilization to enhance active case finding through the screening of PLWs and the under fives and support the necessary referral linkages to the facility/program to ensure treatment of SAM and MAM cases. In the nutrition centres, the nutrition staff will take anthropometric measurements either MUAC or weight and height) and enrol/admit children screened with SAM into the OTP program and receive a week's ration of RUTF, children screened with MAM will be admitted to the TSFP and receive a two weeks ration of RUSF, the green MUAC/median will be educated on good nutrition practices to maintain and/or improve the nutrition status of the children.

Direct beneficiaries :

Men	Women	Boys	Girls	Total
612	5,476	3,636	3,654	13,378

Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Children under 5	0	0	3,636	3,654	7,290
Pregnant and Lactating Women	0	5,476	0	0	5,476
Internally Displaced People	245	2,190	1,454	1,462	5,351
People in Host Communities	367	3,285	2,182	2,192	8,026

Indirect Beneficiaries :
Catchment Population:
Link with allocation strategy :

The project targets high priority locations including Leer- southern unity, piggi and fangak counties of northern jonglei and akobo county which have GAM rates >20% and are classified as IPC 3 or 4 and the nutrition cluster is keen on. The project will offer life-saving interventions, and is feasible since the partner has been operating in the said areas and has a broad understanding of the area and also because it addresses acute needs of children 0-59 months and PLW. There are airstrips in the chosen locations to enable positioning of required supplies. The project largely emphasizes on the treatment of SAM for children (boys and girls) under 5 years and management of MAM for PLW and children (boys and girls) less than 5 years so as to reduce and or prevent morbidity and mortality related to acute malnutrition. Through IYCF counselling and education, the project will basically be targeting mothers and caregivers (male and female) with children 0-23 months. This will involve promoting behavior change through preventive measures on IYCF practices by educating mothers on the importance of exclusive breastfeeding for the 1st six months of life, continued breast feeding for up to at least 2 years, good complementary feeding practices so as to prevent malnutrition in the age group where the severe effects of malnutrition can be reversed. Food demonstrations will be incorporated in the IYCF trainings. Nutrition education sessions will also incorporate basic components on WASH, HIV/AIDs, gender and care for the environment. The project will also enhance weekly data collection analysis and use for action. A SMART survey and mass screening will also guide as a basis to determine nutrition situation in the project areas so as to guide

Sub-Grants to Implementing Partners :

Partner Name	Partner Type	Budget in US\$

Other funding secured for the same project (to date) :

Other Funding Source	Other Funding Amount

Organization focal point :

Name	Title	Email	Phone
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BACKGROUND**1. Humanitarian context analysis**

The recurrent attacks in Leer have caused multiple population displacements from Thornyor, dindin, Gandor, Yang and Rubchai to the swampy islands namely Toyriak, kok, Gaph and Nyoat which are relatively safer. Leer has not been accessible for better part of 2015. Recent joint response missions in Thornyor in December 2015 saw the re-introduction of services by humanitarian actors in some parts of Leer. A UNICEF led RRM in Thornyor and states in part that "The nutrition and food security situation in Thornyor can best be considered to be at/ close to a Catastrophe food security level as was predicted by the September 2015 Integrated Food Security Phase Classification (IPC)." The report estimated proxy GAM of about 32%; a catastrophic level in the making. As other areas open and the need to roll out service provision in the previous locations become eminent, the project will play a big role in ensuring service provision at local areas and reduce the risk of defaulting associated with accessing services from far off areas as has been the case with most parts of Thornyor for the last one month of 2015. While access challenges are expected, Nile Hope will continue in Nyal and other accessible areas for coordination while mobile services (OTP/TSFP/IYCF/micronutrients) are offered in the swampy islands. Local authorities and the CHD will continue to be involved in needs assessment and in joint monitoring field visits. CHD personnel will be beneficiaries of all nutrition capacity building activities and will act as the link between the community and Nile Hope. This will create a suitable feedback and accountability mechanism to Nile Hope.

In Fangak, the situation remains tense with civilians being internally displaced several times and are currently concentrated in Nyalual, Kuernyang, Koat Nyakoang, Keew, Jeybuor and Paguir areas. With an Increase in disease prevalence, over reliance on dirty swamp water and inadequate health services, decreased access to food and disruptions in the supply chain; the rate of malnutrition and related complications are expected to rise. Hand washing facilities will be availed in all nutrition centers for use especially during the appetite test & key WASH messages delivered as part of nutrition education. On site and mobile nutrition outreach activities will take place. Against a background that prior to the attack in March 2015, New Fangak was the administrative center for Fangak and the most populous of them all, recent resettlement patterns confirm the same and point to a need for scaling up nutrition services since most returnees do not have any significant form of livelihood to depend on and most humanitarian actors are yet to restore critical services. Nile Hope is on the ground and was the first organization to re-introduce services in New Fangak. Expanding community outreach and strengthening the nutrition program infrastructure was thought to be significant way forward and Nile Hope seeks to include these recommendations as action points for this project.

In Pigi, walking for long distances, a broken supply chain for basic consumables and a vulnerable food security situation pose continued threat to a normal nutrition situation. Strengthening IYCF component and re-establishing effective services in Kaldak remains critical for Nile Hope as the organization on the ground. Pigi is classified as IPC phase 3 (critical). Indications on the ground are that Pigi has suffered several spats of insecurity since the onset of turbulence between the opposition troops and the government of South Sudan. Currently populations are in Korwai, kolapach, kaldak and canal. Joint UNICEF/WFP RRM September 17 28th registered 9,800 people in Kaldak

Akobo has felt the sting of inflation which has consistently gone from bad to worse, transport of food commodities to the area has become challenging and with limited food in the market, food prices have sky rocketed hence the needs.

2. Needs assessment

Nile Hope as the focal point organization in Fangak for emergency nutrition interventions holds that geographically, New Fangak is seriously in need. After the attacks in Phom in March 2015, civilians fled to the southern parts of Fangak but started trooping back in September 2015. As at 31st December 2015, Nile Hope was running the emergency outpatient nutrition services in Phom, New Fangak. Based on the RRM report for New Fangak in October 2015 that established proxy GAM of 13.1% and proxy SAM of 3.3%, the situation warrants continuity and further enhancement of service provision. On the other hand, IRNA report for Keew 16th 18th June 2015 revealed proxy GAM and SAM rates of 28.3% and 11.5% respectively among the sampled children (boys and girls) under five years. September 2015 IPC report classified Leer as IPC phase 4 (emergency) while level of malnutrition according to region characterization by livelihood zones Mayom reveal GAM 30.0%, SAM 7.5%, MAM 22.5% & a prevalence of 20.7% among PLW. September 2015 IPC, "Conditions are likely to deteriorate into famine in the absence of urgent and immediate humanitarian access". Nile Hope Rapid Assessment in Pigi 8th 17th February estimated proxy GAM rates at 16.9 %, MAM at 15.6 % & SAM at 1.3 % signalling an urgent need for nutrition intervention.

An RRM team report for a 20th to 23rd October 2015 mission in Korwai in Pigi holds that the population have suffered multiple displacements and that people continue to move into Korwai especially from the neighbouring Kaldak, Khorflus, Atar and Canal. It confirms that Korwai is a safe haven for a majority of the populations in Pigi. The report further elucidates that nutrition services are available, provided by Nile Hope and make a significant contribution but points at the fragile WASH situation and high illiteracy rates as compounding factors that continually reduce the nutrition gains achieved. Proxy SAM was 1.4% and proxy MAM was 9.4% and 2.4% of PLWs screened were found to have MUACs of less than 21cm. A similar RRM mission in Kaldak, Pigi between 2nd and 13th 2015 established proxy SAM of 0.5% and proxy MAM of 3.5%. September 2015 IPC report labelled Akobo as IPC phase 3 (critical). The rapid increase in population is stressing the existing limited services. IMC SMART survey May 2015 in Akobo East established a GAM rate of 22.1% (critical) according to WHO standards. Though within normal levels, Kaldak has in the recent past witnessed mass resettlement of returnees who had moved on to Korwai. Nutrition team will work closely with GBV teams to create SGBV awareness, with health teams to create awareness on HIV/AIDS, with WASH to provide soap to MSGs for hygiene promotion and with FSL to educate on dietary diversity. Nile Hope has a PCA with UNICEF and an FLA with WFP (under review) thus supplies will be available. Being a national organization, Nile Hope has a better understanding of the local context as local capacity is utilized enhancing resilience of the communities to cope during emergencies.

3. Description Of Beneficiaries

The project will seek to reach out to pregnant and lactating mothers, males and females below five years of age, for both host and IDP communities in the various locations. Currently in Leer and continue to flow back from panyikang, paloich and Wau shilluk as the hostilities in malakal continue to subside. There are several returnees in Pigi and host communities in both Pigi and Leer (New Fangak area). PLW and children under 5 (boys and girls) will suffer most in the phase of food shortage. Kalazar incidences, fragile health and WASH infrastructure as is the case currently among the general population including under fives in Akobo, Pigi, Leer and Fangak has also aggravated the nutrition status of the target population hence increased needs for nutrition interventions.

4. Grant Request Justification

The project seeks to provide services across the key nutrition cluster objectives for 2016 by providing management of SAM/MAM services to children (boys and girls) below five years and MAM management for PLWs, enhance preventive measures to curb malnutrition through IYCF promotion, vitamin A supplementation and deworming of children 6-49 months and through continuous monitoring and evaluation of nutrition situation by collecting program data and through SMART survey. The project will roll out a comprehensive CMAM package that emphasises community participation in the management of malnourished children in the community and will seek to entrench sustainability by enlisting qualified and trainable members of the community into various program activities as agents of the desired change.

5. Complementarity

Nile Hope has a strong presence in the proposed project areas and implements projects in other sectors namely FSL, Health, GBV, WASH and Education and would strongly build on the synergies created by the concerted project activities to ensure maximum value for resources deployed. The human resource especially in CP's PHCCs and PHCUs where the TSFP, OTP and SC are proposed will add value especially in the management of medical complications associated with malnutrition. Appropriate referral links will be established with the livelihood projects to ensure that conscious steps are taken towards realizing food and nutrition security as the long term goal.

LOGICAL FRAMEWORK

Overall project objective

To prevent morbidity and mortality related to acute malnutrition among children(boys and girls) under 5 years and PLW in Pigi, Fangak, Akobo & Leer through provision of curative and preventive nutrition services.

NUTRITION

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
CO1: Deliver quality lifesaving management of acute malnutrition for the most vulnerable and at risk	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	60
CO2: Increased access to integrated programmes preventing under-nutrition for the most vulnerable and at risk	HRP 2016 SO2: Ensure communities are protected, capable and prepared to cope with significant threats	30
CO3: Ensure enhanced needs analysis of nutrition situation and robust monitoring and effective coordination of responses	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	10

Contribution to Cluster/Sector Objectives : The project seeks to address all 3 cluster objectives; management of SAM among children boys and girls 0-59 months, MAM among children 6-59 months and PLW. The project seeks to enhance preventive measures for acute malnutrition including Vitamin A supplementation for children 6-59 months, deworming services among children 12-59 months, IYCF promotion through MSGs and training of nutrition center staff. Nutrition SMART survey will be conducted in Fangak county and also a mass screening in Pigi county to establish the nutrition situation which will in turn guide response.

Outcome 1

Reduced malnutrition related morbidity and mortality rates among children 6-59 months and Pregnant and Lactating Women in Fangak, Pigi and Akobo counties in Jonglei State and Leer county in Unity State South Sudan

Output 1.1

Description

7290 children (3636 boys and 3654 girls) 6-59 months and 3000 PLWs screened, 3416 children(1696 girls and 1720 boys) 6-59 months provided with SAM treatment, 6332 children (3162 girls and 3170 boys) provided with MAM treatment and 1456 PLWs provided with MAM treatment services and 53 nutrition center staff trained on CMAM

Assumptions & Risks

Nutrition supplies will be available, security situation will be favorable

Activities

Activity 1.1.1

Community screening and appropriate referral of children 6-59 months reaching 7290 (3636 girls and 3654 boys) pregnant and lactating 3000 PLW in Fangak, Leer, Pigi and Akobo counties.

Activity 1.1.2

Provide SAM (severe acute malnutrition) management services to children under 5 years reaching 3416 (1720 boys and 1696 girls) of IDPs and host communities in Fangak, Leer, Pigi and Akobo counties.

Activity 1.1.3

Provide MAM (Moderate Acute Malnutrition) management services to children below 5 years reaching 6332 (3170 boys and 3162 girls) of IDPs and host communities in Fangak, Leer, Pigi and Akobo. And Leer

Activity 1.1.4

Provide CMAM training to 53 nutrition center staff in piggi, fangak, akobo and leer

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	NUTRITION	Frontline services # of children screened in the community			3,636	3,654	7,290

Means of Verification : monthly reports, community mobilizers screening report

Indicator 1.1.2	NUTRITION	Frontline services # of children (under-5) admitted for the treatment of SAM			1,720	1,696	3,416
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Means of Verification : OTP registers, stabilization center records, monthly reports, quarterly reports

Indicator 1.1.3	NUTRITION	Frontline services # Children (under-5) admitted for the treatment of Moderate Acute Malnutrition (MAM)			3,170	3,162	6,332
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Means of Verification : TSFP registers, monthly reports, quarterly reports

Indicator 1.1.4	NUTRITION	No.of PLW admitted for the management of MAM					1,456
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Means of Verification : TSFP registers, monthly reports

Outcome 2

Strengthened implementation of activities that contribute to the prevention of acute malnutrition among children <5 years, PLW and other vulnerable groups among the host and IDP community in Pigi, Fangak, Akobo and Leer Counties

Output 2.1

Description

1835 (1600 women and 235 men) mothers and caretakers of children 0-23 months of IDPs and the host community in Fangak, Leer, Pigi and Akobo reached with IYCF messages

Assumptions & Risks

IEC training material will be available, security will be favorable to conduct trainings

Activities

Activity 2.1.1

Provide IYCF education to 2435 (2100 women and 335 men) mothers and caretakers of children 0-23 months in piggi, fangak, akobo and leer.

Activity 2.1.2

Provide IYCF promotion training to 53 (27 men and 26 women) nutrition center staff

Activity 2.1.3

Establish 2 MSG in each static site

Activity 2.1.4

IYCF promotion/training among 90 women of MGS in Pigi, fangak, akobo and leer

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	NUTRITION	Frontline services # of pregnant and lactating women and caretakers of children 0-23 months reached with IYCF-E interventions	235	1,600			1,835

Means of Verification : nutrition center records, IYCF registers, monthly reports

Indicator 2.1.2	NUTRITION	Frontline services # of health workers trained in Infant and Young Child Feeding	27	26				53
Means of Verification : training attendance sheets, monthly reports								
Indicator 2.1.3	NUTRITION	Frontline services # of functional mother-to-mother support groups						8
Means of Verification : nutrition center records, monthly reports								
Indicator 2.1.4	NUTRITION	Number of mothers trained on IYCF promotion						90
Means of Verification : nutrition center records, monthly and quarterly reports								
Output 2.2								
Description								
7290 children (3636 boys and 3654 girls) <5years reached with Vitamin A supplementation and 3533 children (1770 boys & 1763 girls) reached with de-worming services								
Assumptions & Risks								
supplies will be available								
Activities								
Activity 2.2.1								
Provide micro-nutrient supplementation services (Vitamin A) to 7290 children (3636 boys and 3654 girls) under 5 years								
Activity 2.2.2								
Provide micro-nutrient supplementation services (de-worming) to 3533 children (1770 girls and 1763 boys) 12-59 months								
Indicators								
			End cycle beneficiaries				End cycle	
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target	
Indicator 2.2.1	NUTRITION	Frontline services # of children (under -5) supplemented with Vitamin A			3,636	3,654	7,290	
Means of Verification : OTP admission cards, monthly reports								
Indicator 2.2.2	NUTRITION	Frontline services # of children (12 -59 months) dewormed			1,770	1,763	3,533	
Means of Verification : OTP admission cards, monthly reports								
Outcome 3								
Enhanced nutrition situation analysis through Nutrition SMART survey and mass screening in Pigi and Fangak Counties								
Output 3.1								
Description								
One Nutrition SMART survey in Fangak County and mass screening in Pigi County								
Assumptions & Risks								
Funds will be available, security will be favorable for training of enumerators and data collection								
Activities								
Activity 3.1.1								
Conduct one SMART survey in Fangak County								
Activity 3.1.2								
Conduct mass screening in Pigi County								
Indicators								
			End cycle beneficiaries				End cycle	
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target	
Indicator 3.1.1	NUTRITION	Frontline services # of SMART surveys undertaken - Pre-harvest					1	
Means of Verification : SMART survey report								
Indicator 3.1.2	NUTRITION	Number of mass screening activities conducted					1	
Means of Verification : mass screening report								
Additional Targets :								
M & R								
Monitoring & Reporting plan								

Nile Hope will ensure that there is continuous collection and analysis of programmatic data to monitor and evaluate progress of the project as designed. Mass screening of the under fives and a SMART survey will also be undertaken to establish the prevailing malnutrition rates in the program areas and to assess progress or otherwise. Feedback generated will be integrated into the programs and the desired changes implemented to eliminate or mitigate identified bottlenecks. The M & E focal person together with the nutrition team will continually track the achievement of the project goals as set out in the log frame to ensure that all activities are fast-tracked where necessary. CP will also participate in joint monitoring visits by partners and donors in the project areas and to also continuously play a critical role in generating useful programming information as may be required in joint response missions in the project locations.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Community screening and appropriate referral of children 6-59 months reaching 7290 (3636 girls and 3654 boys) pregnant and lactating 3000 PLW in Fangak, Leer, Pigi and Akobo counties.	2016	X	X	X	X	X	X						
Activity 1.1.2: Provide SAM (severe acute malnutrition) management services to children under 5 years reaching 3416 (1720 boys and 1696 girls) of IDPs and host communities in Fangak, Leer, Pigi and Akobo counties.	2016	X	X	X	X	X	X						
Activity 1.1.3: Provide MAM (Moderate Acute Malnutrition) management services to children below 5 years reaching 6332 (3170 boys and 3162 girls) of IDPs and host communities in Fangak, Leer, Pigi and Akobo. And Leer	2016	X	X	X	X	X	X						
Activity 1.1.4: Provide CMAM training to 53 nutrition center staff in pigi, fangak, akobo and leer	2016		X			X							
Activity 2.1.1: Provide IYCF education to 2435 (2100 women and 335 men) mothers and caretakers of children 0-23 months in pigi, fangak, akobo and leer.	2016	X	X	X	X	X	X						
Activity 2.1.2: Provide IYCF promotion training to 53 (27 men and 26 women) nutrition center staff	2016		X			X							
Activity 2.1.3: Establish 2 MSG in each static site	2016		X										
Activity 2.1.4: IYCF promotion/training among 90 women of MGS in Pigi, fangak, akobo and leer	2016	X	X	X	X	X	X						
Activity 2.2.1: Provide micro-nutrient supplementation services (Vitamin A) to 7290 children (3636 boys and 3654 girls) under 5 years	2016	X	X	X	X	X	X						
Activity 2.2.2: Provide micro-nutrient supplementation services (de-worming) to 3533 children (1770 girls and 1763 boys) 12-59 months	2016	X	X	X	X	X	X						
Activity 3.1.1: Conduct one SMART survey in Fangak County	2016					X							
Activity 3.1.2: Conduct mass screening in Pigi County	2016					X							

OTHER INFO

Accountability to Affected Populations

Nile Hope will seek to adopt a collaborative approach with the populations in the project locations. Locals with no special skills will be enlisted for non-specialized assignments while qualified persons will be given a chance to work in the project to enhance project ownership at the community level. Right from project initiation, measures will be taken to ensure that the communities through its leadership and key stakeholders are fully aware of the project goals and lifespan and to enlist their support and contribution in kind to help in sustaining the project. Regular meetings to update the community on project progress, the changing needs and other key issues affecting the project will be done. Through liaison with the county health departments in the various locations, Nile Hope will be in constant communication and engagement to ensure that arising community needs and apt use of resources allocated for the project is properly done.

Implementation Plan

Nile Hope will work through normal nutrition programming in emergency guidelines to ensure that the program activities are done sequentially and in a manner that seeks to reach out to the maximum number of beneficiaries in the targeted areas. Particular emphasis will be on proper community mobilization through enhanced supervision and community awareness campaigns using the community nutrition volunteers and community mobilizers. Screening activities to identify cases and proper referral mechanisms will be put in place as has been done before to ensure that there is proper linkage between the identified cases in the community and those admitted in the program at the various facilities. Trainings to improve the capacity of organization staff will also be conducted to ensure that service provision adheres to the IMSAM and related guidelines. A robust supply chain management plan with emphasis on continuity of supply provision on sites, security of supplies and optimizing the use of the same will be put in place. Treatment of SAM children with and without medical complications and MAM cases will be implemented according to the south Sudan nutrition guidelines and necessary interventions for IYCF, vitamin A supplementation, deworming, Iron folate supplementation and provision of basic hygiene kits where possible will be embraced to ensure the project achieves its collective goal in the long run.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
UNICEF & WFP	Nile Hope will avail well trained staff to participate in other inter-agency initiatives in the project area including IRNAs and RRM to optimize generation of updated information that guide program implementation in the areas it operates.
Concern Worldwide, MSF and Medair in Leer	Share programming information and emerging issues through the sub-cluster coordination arrangement in Leer

Environment Marker Of The Project

Gender Marker Of The Project

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

Justify Chosen Gender Marker Code

The project will enlist women through the MTMSGs that will play a key role in the realization of the project's IYCF targets.

Protection Mainstreaming

CP will take conscious measures to safeguard beneficiaries from any form of harm that can emerge directly from the program. All the RUTFs and other consumables distributed to beneficiaries will be ascertained and the expiry dates checked before distribution. All expired supplies will not be distributed and will be reported as such to contributing partners. Services will be offered in adherence with the expected sphere standards and will not discriminate based on age, gender, religion or any other form of biasness that may deny qualified beneficiaries a chance at project benefits. Girls and boys will be targeted equally and community involvement especially on the nutrition education components and mobilization shall involve both male and female as well as elderly and persons with disability in the community. The community through sensitization campaigns will be involved fully in the project; details of the project will be divulged so that they are empowered enough to know what their stake, rights and entitlements are in the project for sustained implementation and to curb potential abuse.

Country Specific Information**Safety and Security**

CP is aware of the fragile security situation in most of its proposed project locations and will put in place measures to ensure proper storage facilities with guards in all locations. Continuous monitoring and engagement with the local security agents will also be enhanced to keep the organization updated about the day to day changes in security situation in areas of project implementation. Staff will be required to have their work IDs and other visibility materials such as organization apparel for identification and connected security purposes. All organization staff in the project sites will fill in movement sheets so that all the field coordinators are aware of staff movement at any particular time. Where possible, the organization will impose curfews to control movement especially at night and in volatile areas in the project locations.

Access

In Leer, Nile Hope will continue to monitor the situation and assess the possibility of having a vehicle in Leer but will in the meantime use motorbikes to move around in the project sites to monitor and coordinate activities. Pigi remains a difficult terrain for now but Nile Hope will continue to use locally available means of transport such as porters, animals and where possible charters to deploy project materials and staff to the sites without hampering project implementation. Fangak and Akobo areas will benefit from the vehicles and speedboat means of transport that the organization has continued to use in the areas for the previous projects and will make the necessary adjustments to reach difficult locations where need calls.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
1.1	Nutrition Technical Lead	D	1	6,000.00	5	45%	13,500.00
	<i>1 Nutrition Technical Lead at \$ 6000 per month for a period of 5 months charging 45% to CHF Location: Juba with frequent visits to the field. He will be responsible in coordination of all activities being implemented in this project, Monitoring the project using log frame and Reporting all activities to the donor and MoH.</i>						
1.2	Nutrition Coordinator	D	1	5,000.00	5	44%	11,000.00
	<i>1 Nutrition Coordinator at \$ 5000 per month for a period of 5 months charging 44% to CHF Location: Juba with frequent visits in the field, He/She will be responsible in coordination of field activities and building the capacities in the field to be able to offer quality services.</i>						
1.3	County Project Manager	D	3	1,500.00	5	100%	22,500.00
	<i>3 County Project Manager at \$ 1500 per month for a period of 5 months charging 100% to CHF Location: Pigi and Leer. He/ She responsible in ensuring that OTP centres are running according to Nile Hope mandates and should be in constant communication with the Nutrition Coordinator</i>						
1.4	Supervisors	D	3	1,200.00	5	100%	18,000.00
	<i>3 Health Supervisor Leer at \$ 1200 per month for period of 5 months charging 100% to CHF Oversee the day-to-day management of the health facility in Leer. He gathers and analyse data and using it to plan and manage the health facility in Leer. He also ensures that there are sufficient drugs and quality health administration to the patients. He is a qualified medical officer with extensive work experience</i>						
1.5	Clinical Officer	D	1	1,000.00	5	100%	5,000.00
	<i>1 Clinical Officers at \$1000 per month for period of 5 months charging 100% to CHF The staff will be in-charge of managing Stabilization center where he will consult the malnourished children with medical complication who will be referred from OTPS center or from the village. He/she will also be responsible person for daily follow up of the malnourished child who is admitted for medical treatment in the stabilization center</i>						
1.6	Nurses	D	8	800.00	5	100%	32,000.00

	8 Nurses at \$800 per month for period of 5 months charging 100% to CHF The nurses will work in stabilization center to provide nursing care to children that are identified with medical complication are are malnourished						
1.7	IYCF Facilitators	D	7	300.0 0	5	100%	10,500.00
	7 IYCF facilitators- Facilitate IYCF education sessions for the mother to mother support groups, offer IYCF and other nutrition education at the nutrition centers and in the community monthly afforded at \$ 300 for a period of 5 months charging 100% to CHF						
1.8	Nutrition Assistants	D	7	300.0 0	5	100%	10,500.00
	7 Nutrition assistants- charged with taking anthropometric measurements of children and PLW at the nutrition center, record keeping of program beneficiaries, offering nutrition education with a mothly remuneration of \$ 300 per month for a period of 6 months charging 100% to CHF						
1.9	Registrars	D	7	300.0 0	5	100%	10,500.00
	10 Registrars - charged with taking anthropometric measurements and to keep nutrition centre records with a monthly remuneration of \$ 300 per month for a period of 5 months						
1.10	Community Mobilizers	D	14	300.0 0	5	100%	21,000.00
	14 Community Mobilizers at \$ 300 per month for a period of 5 months charging 100% to CHF Location: Pigi, Fangak, Akobo and Leer. He/ She raise awareness to the communities by mobilizing parents with children suffering from acute malnutrition to visit OTP and Stabilization centres.						
1.11	Inpatient Attendants	D	2	400.0 0	5	100%	4,000.00
	2 Inpatient Attendants at \$ 300 per month for a period of 5 months charging 100% to CHF Location: Fangak, He/ She will provide supportive care to children who are admitted in the stabilization centres"						
1.12	Cleaners & Cooks	D	9	200.0 0	5	100%	9,000.00
	9 Cleaners for the Facilities at \$ 200 per month for a period of 5 months charging 100% to CHF Location: Pigi, Akobo, Leer and Fangak. He/ She ensures that the OTP and Stabilization Facilities are clean. She ensures that equipments are cleaned and always are in sterilised."						
1.13	Guards	D	8	200.0 0	5	100%	8,000.00
	8 Guards for the Facilities at \$ 200 per month for a period of 5 months charging 100% to CHF Location: Pigi, Akobo, Leer and Fangak. He/ She ensures that the OTP and Stabilization Facilities are clean. She ensures that equipments are cleaned and always are in sterilised."						
1.14	Executive Director	S	1	6,500 .00	5	10%	3,250.00
	1 Executive Director @\$6500 per months for 5 months ,12% charged to CHF activities, Locations:Juba. He oversee the organization policies ,top management,administrative and partners and donors coordination and meetings.He travels to the field frequently for program monitoring and encourage the team						
1.15	Human Resource & Partner Relations Manager	S	1	5,000 .00	5	10%	2,500.00
	Human Resources & Partner Relations Manager based in Juba with frequent field visit with responsibility of staff recruitment, annual appraisals and performance evaluations. He ensure that there is staff welfare and HR policies are well adhered to. He maintains the data base of staff and ensure that there are constant capacity building of staff. Monthly afforded at \$ 4000 with 12% charged to CHF						
1.16	Juba and Field Accountants	S	2	2,000 .00	5	10%	2,000.00
	Accountant based in Juba and Field Accountants to be based in Akobo and Leer charged with respponsibility of posting and balancing ledgers in the accounting software, banking and cash flow monitoring, monthly afforded is \$ 2,000 per month for 5 months 12% charged to CHF						
1.17	Program Coordinator	S	1	6,000 .00	5	10%	3,000.00
	Programme Coordinator @ \$6000 per month for 5 months , 12% charged to CHF activities Location: Juba. He is incharge of all programs and he has responsibilities of ensuring that the projects are implemented in accordance with the donors mandate, he will support the health team in monitoring and evaluation						
1.18	Grants Manager	S	1	5,000 .00	5	10%	2,500.00
	1 Grant Manager @\$5000 per month for 5 months 12% charged to CHF Locations: Juba with frequent travel to the field and oversee the budget preparation , management and monitoring process. Monitor and manage all expenses within the allotted budget. The Grants Manager has over 7 years working experience and is an accountant by profession.						

1.19	Field Coordinators	S	2	2,000.00	5	20%	4,000.00
<p>2 Field Coordinators at \$ 2000 per month for 5 months charging 40% to CHF Locations: Pigi and Fangak. He/ She will work closely with the Health and Nutrition Program Manager and Program Coordinator and other staff on the field. She/He actively collaborate with other partners and/or Donors as required. plan, implement, monitor/evaluate and report projects on behalf of the Programme Coordinator"</p>							
1.20	Liaison & Compliance Officer	S	1	4,000.00	5	12%	2,400.00
<p>Liaison & Compliance Officer has the responsibility of checking donors regulations and updating risk log and reporting to the management. The total afforded for this budget is \$ 2880</p>							
Section Total							195,150.00
Supplies, Commodities, Materials							
2.1	Procurement of stabilization center drugs	D	1	1,000.00	1	100%	1,000.00
<p>"Procurement and preposition of drugs in 1 locations, i.e. Pigi, Fangak and Leer. Purchase of Acetylsalicylic Acid (ASPIRIN, ASA) 500 mg1000 tabs @ \$3, Amodiaquine 153 mg/ Artesunate 50mg24 (blister packs) @\$65, Atropine 1mg/mL1 ml Amp. (100) @\$2, Amoxicillin 250 mg1000 Packs @\$ 15, Adrenaline 1mg/ml1 MI Amp. (100 amp) @\$ 1, Albendazole 400mg tabs500 tabs @ \$ 28, Ampicillin 500 mg100 vials @\$ 6.50, Azithromycin 500mg @\$31.40 , Benzathin penicillin 2.4Mu 50 vials @\$0.50, Benzyl penicillin 600mg(1MU)100 vials @\$0.10, Calamine lotion 100 mLs @\$ 12, Ceftriaxone powder 1g1 vials @\$0.55, Cotrimoxazole (480 mg)1000 @ \$8, Cotrimoxazole junior (120 mg)1000 @ \$5, Codeine 30mg100 tabs @ \$ 6.95, Cotrimoxazole susp(5 ml) @\$ 10.16, Clotrimazole 100 mg vaginal tab @\$62, Cloxacillin 500mg50 vials@\$35, Cloxacillin 250mg100 caps @ 17.85, Chlorpheniramine 4mg1000 tabs@\$0.770, Chloraphenicol 250mg 1000 caps @\$20.35, Chloraphenicol 1g powder for inj 50 vials @\$1, Chloraphenicol 125mg/5mLs100 ml susp. @ \$0.50, Ciprofloxacin 500mg100 tabs @\$2.67, Doxycycline 100mg1000 caps @\$ 11.20, Diazepam 5mg/mL2 ml Amp (100)@\$0.50, Diclofenac sodium 50mg1000 tabs @\$3.50, Erythromycin 500mg1000 tabs @ \$ 7.70, Gentamycin 40mg/ml 2 mL 100 Amps. @\$ 12.80, Metronidazole 200mg/5mLsusp. @\$0.36, metronidazole 5mg/ml(100ml) IV @\$0.25, Griseofulvin 500mg100 tabs @\$7.0, Nystatin oral 500.000IU tab100 tabs@\$20, Nystatin susp @ \$12, Quinine 300mg/ML100 2ml Amp. @ \$ 1.50, Quinine 300mg tabs1000 tabs @\$61.20, Coartem24 blister packs @\$2.00, Clotrimazole creame 1% creame 24g @ \$ 1.00, Salbutamol 4mg tabs1000 tabs @ \$ 3, Salbutamol inhaler 200 doses @\$ 13.00, Salbutamol inhaler 200 doses @\$24, 50% Dextrose IV @\$3, 5% Dextrose IV @\$3, Normal saline IV @\$3, Ringer's lactate IV @\$3, water for injection 10 ml vial 100 vials @\$3.50, Hydrocortisone 1% ointement @\$3, Zinc oxide 200mg ointement @ \$ 5, Chlorhexidine/cetrimide 1.5/15%1 L @ \$18, Promethazine 25mg/ml100 2ml Amp. @ \$ 10, Promethazine 25mg 1000 tabs @ \$5, oxytocin 10iu/ML100 Amps @\$30, Ergometrine 200mcg10 Amp @ \$3, Aminophylline 25mg/ml10 (10 ml Amp) @\$ 1, Fansidar (Sulfadoxine + Pyrimethamine) 100 tabs @\$5.50, prednisolone 5mg1000 tabs @ \$10.50, Phenobarbitone 30mg1000 tabs @\$7.50, Ferrous Sulphate 200mg 1000 @ \$ 6, Folic acid 0.25 mg 1000 @\$2, Hydrocortisone Injection (100mg)48 vials @\$73, Ibuprofen 200mg 1000 tabs @\$7.15, Lignocaine 2% Injection20 ml vials @\$21.60, Mebendazole 100 mg 1000 @ \$13.65, Metronidazole 200 mg1000 @ \$ 12.62, ORS 25 pkts @ \$1.80, Paracetamol adult 500mg 1000 tabs @\$7.20, Praziquantel 600mg 500 tabs @ \$100, Procaine benzyl penicillin 4 MU vials 100 vials @ \$58.79, Retinol (Vit. A) 200.000 U1000 caps @ \$ 57.36, Nalidixic Acid 500mg100 tabs @ \$ 64.15, Zinc 20 mg100 tabs @\$4.50, Gentian violet 25 gram1 pc @\$6.34, Povidon iodine 10%100 mls @\$ 1.00, Whitfield 25 g tube @\$ 12.7,</p>							
"							
2.2	Transportation of stabilization center supplies	D	1	8,800.00	1	100%	8,800.00
<p>This includes transportation of stabilization centre supplies and equipment from Juba Fangak. 1 Charter carrying 2 Ton from Juba to the field where there are SC centres @ \$8800. The charter will transport cooking pots, Thermos, buckets and cooking equipments.</p>							
2.3	CMAM Training	D	4	400.00	1	100%	1,600.00

	<i>It is meant to build the capacity of local staff to be able to provide quality services. The targeted number to be trained are 75 participants in 4 Locations , Pigi , Fangak, Akobo and Leer.</i>						
2.4	In Patient management of SAM training	D	1	400.00	1	100%	400.00
	<i>It is meant to build the capacity of local staff to be able to provide quality services. The targeted number to be trained are 75 participants in 4 Locations , Pigi , Fangak, Akobo and Leer.</i>						
2.5	ICYF Staff Training	D	4	400.00	1	100%	1,600.00
	<i>This training course aims to enhance the competencies and build capacity of Nile Hope nutrition staff who are involved in Infant and Young Child Feeding (IYCF) programmes in Pigi,. This includes programme development, programme implementation, programme evaluation, and other related activities for improving nutrition and health outcomes of infants and young children.</i>						
2.6	IYCF training Mother Support	D	4	400.00	1	100%	1,600.00
	<i>To train 120 mothers on proper IYCF Practices</i>						
2.7	Printing of T-shirt promoting good nutrition practices	D	100	10.00	1	100%	1,000.00
	<i>200 T Shirts will be printed with health promotion messages in local language, mostly targeting the importance of feeding children with balance diet meals and also sensitising the communities on the issues of malnutritions and the dangers to children. Each T shirt will costs approx \$ 10.</i>						
2.8	Offloading and Loading of nutrition supplies	D	3	1,000.00	1	100%	3,000.00
	<i>The funds allocated for offloadig and loading nutrition supplies and other nutrition materials to OTPs and SC, the amount will be paid for loaders and offloaders</i>						
2.9	Construction of New OTP Centres	D	1	3,000.00	1	100%	3,000.00
	<i>Construction of OTP Centres in Kolapach and Canal. The cost is for clearing the land where OTP will be built, purchase of around 200 poles @\$5, 400 rafters @\$2, Plastic Sheets @ \$ 500, labourers for construction and mudding approx \$2000</i>						
2.10	Purchase of Chairs, Tables and Mats	D	2	300.00	1	100%	600.00
	<i>This is the cost of purchase of tables, mats and mats for the new OTPS i.e. Keew, Jueybor and Koat and Kuernyang and Thonyor Stabilisation Centres</i>						
	Section Total						22,600.00
Equipment							
3.1	Laptop	D	1	800.00	1	100%	800.00
	<i>1 Laptop for Nutrition Coordinator each costed @ \$ 800</i>						
	Section Total						800.00
Contractual Services							
4.1	SMART Survey	D	1	13,500.00	1	100%	13,500.00
	<i>SMART Survey to determine the nutrition in Fangak County which will guide response</i>						
	Section Total						13,500.00
Travel							
5.1	Flight cost for Nutrition staffs(Akobo, Leer, Pigi and Fangak)	D	4	400.00	2	100%	3,200.00
	<i>This is travel cost for Nutrition staff and other supporting staff to travel to the field during the implementation of the project in Akobo, Leer, Pigi and Fangak facilitated through UNHAS.</i>						
5.2	Boat Fuel	D	2	1,650.00	2	100%	6,600.00
	<i>This cost is allocated for preposition and purchase of fuel for the boat. Most Nutrition facilities in Pigi and Fangak are accessible through the river which will require boat transport.</i>						
	Section Total						9,800.00
General Operating and Other Direct Costs							
7.1	Compound Supplies	D	1	650.00	4	100%	2,600.00

	<i>Compound supplies for field staff in Pigi, Fangaka, Leer and Akobo</i>						
7.2	Stationery	S	1	542.80	2	100%	1,085.60
	<i>This is cost for stationeries to be used in trainings and office use. The total afforded is \$ 8000</i>						
7.3	Bank charges	S	1	600.00	2	100%	1,200.00
	<i>This amount is charged on transfer of funds. It is estimated that a total of \$ 3000 will be incurred as bank charged and ledger fees</i>						
7.4	Communication	S	1	600.00	5	100%	3,000.00
	<i>Communication costs i.e. for buying calling cards for satellite and other networks estimated to be \$6000 in relation to nutrition budget</i>						
	Section Total						7,885.60
SubTotal			213.00				249,735.60
Direct							224,800.00
Support							24,935.60
PSC Cost							
PSC Cost Percent							7%
PSC Amount							17,481.49
Total Cost							267,217.09
Grand Total CHF Cost							267,217.09
Project Locations							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Jonglei -> Akobo	10						
Jonglei -> Canal	35						
Jonglei -> Fangak	25						
Unity -> Leer	30						
Documents							
Category Name				Document Description			