

Requesting Organization :	CARE International	
Allocation Type :	1st Round Standard Allocation	
Primary Cluster	Sub Cluster	Percentage
NUTRITION		100.00
		100
Project Title :	Integrated Emergency Nutrition Services to Malnourished Children Under Five Years of Age and Pregnant and Lactating Mothers in Four Counties (Mayom, Rubkona, Abiemnon and Pariang) and in Bentiu POC in Northern Unity State	
Allocation Type Category :	Frontline services	

OPS Details

Project Code :		Fund Project Code :	SSD-16/HSS10/SA1/N/INGO/795
Cluster :		Project Budget in US\$:	721,582.00
Planned project duration :	6 months	Priority:	
Planned Start Date :	01/02/2016	Planned End Date :	31/07/2016
Actual Start Date:	01/02/2016	Actual End Date:	31/07/2016

Project Summary :

Since the outbreak of the conflict in December 2013, millions of people in South Sudan remain engulfed in a protracted humanitarian crisis. Though the security situation in much of the country has stabilized, conflict has persisted in three states – Unity, Jonglei and Upper Nile. The widespread internal displacement and increased vulnerability to malnutrition is evident in all the conflict affected populations in the four counties (Rubkona, Mayom, Abiemnon and Pariang) where CARE International implements emergency nutrition programming.

CARE is currently providing nutrition services in Bentiu POC, a location which has seen a significant influx of IDPs in 2015 and where the nutrition situation remains at critical levels, according to the IPC update undertaken in December 2015. The malnutrition levels in the counties of Mayom, Pariang and Abiemnon counties are also above emergency levels, with Mayom County reaching a GAM of 30%. Ongoing nutrition activities undertaken by CARE have succeeded in minimizing morbidity and mortality associated with malnutrition; nevertheless, more resources are needed to address and reduce the current levels of malnutrition. CHF funding will enable CARE to maintain the high quality of interventions, particularly in the high-needs localities of Mayom and the Bentiu POC.

In light of the high malnutrition burden as described above, CARE is proposing a series of interventions aimed at providing life-saving nutrition assistance to pregnant and lactating women and infants and children under five years of age. The services will be delivered at the primary health care centers/units in four counties (Mayom, Abiemnom, Pariang and Rubkona, including Bentiu POC) in Unity State, as well as through a mobile team designed to provide outreach to remote areas of the designated counties. CARE has been working in these four counties since 2011 and this project will build on CARE's ongoing nutrition programming, and its strong presence and knowledge of the proposed geographical locations.

Direct beneficiaries :

Men	Women	Boys	Girls	Total
60	866	11,002	11,451	23,379

Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Children under 5	0	0	5,252	5,466	10,718
Internally Displaced People	0	200	0	0	200
Pregnant and Lactating Women	0	626	0	0	626
Trainers, Promoters, Caretakers, committee members, etc.	60	40	0	0	100

Indirect Beneficiaries :

Indirect beneficiaries include, all pregnant and lactating women receiving IYCF messaging at Nutrition centers on daily basis.

Catchment Population:

All payams (4) in Abiemnon County= 23796
 8 payams in Mayom County =144046
 5 Payams in Pariang County (Host community) =101004
 Bentiu POC- Half of the beneficiaries with SAM and MAM
 Rubkona and Bentiu Towns and Accessible surroundings villages/Bomas =84000

Link with allocation strategy :

CARE's emergency nutrition project will significantly contribute to the overall CHF strategies and more specifically, to the Nutrition Cluster strategies outlined in the Sstrategy Ppaper. The activities proposed will directly address the life threatening nutrition needs in the target locations where such needs are greatest (high priority counties). The interventions will also contribute to addressing the malnutrition and disease outbreaks in conflict areas where IDPs have settled in POCs, camp settings and host communities. CARE will address all of the three Nutrition Cluster objectives by ensuring that the following activities (Outputs) are implemented within the project life span: • Identification (active case findings) and treatment of acutely malnourished children 0-59 months and PLWs in four counties (Mayom, Abiemnom, Pariang and Rubkona including Bentiu POCs) of Unity State; • 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) on IYCF-E and some IMAM refresher; , • Provide Vitamin A supplementation to boys and girls 6-59 months; • 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, and; • Monitoring and analysis of nutrition situation on a quarterly basis in the five counties and ; • Integration of Vitamin A supplementation in National Immunization Days (NIDS). All of the above proposed activities will contribute to the CHF and Nutrition Cluster strategic objectives and links strongly with the prioritization of projects. CARE has been working in the proposed project locations since 2011 and has ongoing nutrition and health activities.

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
WFP	132,839.50
General Electronics	19,844.00
	152,683.50

Organization focal point :

Name	Title	Email	Phone
Joel Makii	Nutrition Advisor	joel.makii@care.org	0955221576
Fredrick Mccray	Country Director	fredrick.mccray@care.org	+211-956021580

BACKGROUND

1. Humanitarian context analysis

According to Integrated Food Security Phase classification analysis report released in December 2015, Rubkona and Mayom counties were classified at Phase 4 (Very Critical), while Abiemnon and Pariang Counties were classified at Phase 3 (Critical). The projection of severity for the first quarter in 2016 shows the four counties will remain at, or deteriorate to, Phase 4. Additionally, survey results done by CARE in the countries of Mayom, Abiemnon and Pariang during the pre-harvest period in April and May 2015 show high malnutrition rates with GAM rates of 30.0% (25.9-34.5 95% CI) in Mayom County, 26.5% (22.4-31.1 95% C.I) in Abiemnon county and 23.4% [19.1-28.3 95% C.I] in Pariang. The impact of both the high level of displacement and the disruptions of livelihoods is a major contributing factor to high burden malnutrition.

Unity State, where CARE proposes to implement this project, is among the states with the highest malnutrition rates. The most vulnerable among the population in the four counties targeted by this intervention are women and children – both boys and girls – of 0-59 months. Pregnant and lactating women are particularly affected as they are not able to access health care for their health and nutritional needs due to insecurity and the destruction of health facilities as a result of the conflict. Further, the burden of taking care of children (feeding, cooking, fetching water and firewood etc) is principally the role of women and this is severely affected when normal livelihood activities are completely or partially destroyed. Men, on the other hand, are on the front line providing security and key male roles such as the provision of food through casual work and pastoralist activities, which have also been affected by the conflict. Inadequacy of food, inadequate nutrition treatment and prevention services, lack of immunization services and health services have resulted in a high malnutrition burden, especially for women and boys and girls of 0-59 months.

2. Needs assessment

According to data collected and tracking undertaken at the nutrition centers managed by CARE, the counties of Abiemnon, Mayom and Pariang are facing increasing nutrition-related needs and the numbers of malnourished children are expected to increase with the onset of the lean season (hunger gap). This information is in line with the data provided in the IPC report released in September 2015 and the IPC December 2015 update, as well as analysis undertaken by the Nutrition Cluster. At the Bentiu POC, the staff members who offered services for 40,000 IDPS earlier in 2015 are now offering services for more than 120,000 IDPS according to latest January IOM Bentiu POC population update. The increased number of IDPS has, in tandem, increased the challenge of meeting the high level of need while maintaining quality programming.

According to Integrated Food Security Phase classification analysis report released in December 2015, Rubkona and Mayom counties were classified at Phase 4 (Very Critical), while Abiemnon and Pariang Counties were classified at Phase 3 (Critical). The projection of severity for the first quarter in 2016 shows the four counties will remain at, or deteriorate to, Phase 4. Additionally, survey results done by CARE in the counties of Mayom, Abiemnon and Pariang during the pre-harvest period in April and May 2015 show high malnutrition rates with GAM rates of 30.0% (25.9-34.5 95% CI) in Mayom County, 26.5% (22.4-31.1 95% C.I) in Abiemnon county and 23.4% [19.1-28.3 95% C.I] in Pariang. The impact of both the high level of displacement and the disruptions of livelihoods is a major contributing factor to high burden malnutrition

3. Description Of Beneficiaries

A total of 23,379 direct beneficiaries will be targeted through this project which includes 22,453 children under five years of age, 626 pregnant and lactating women. In addition, 100 health and nutrition workers (60 men and 40 women) will benefit from training from this project. More than 150,000 host community members, IDPs and returnees will benefit either directly or indirectly from the proposed activities. In addition, 50 community volunteers comprising 20 females and 30 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 consultation with community leaders and support from local authorities (such as the RRC) on the ground. Special attention will be given to including persons with disabilities among the nutrition workers within the communities.

4. Grant Request Justification

In light of the significant humanitarian needs in Unity State, CARE is requesting funds (having already secured supplies from UNICEF and WFP) to provide emergency integrated nutrition services to the conflict affected populations of Rubkona/Bentiu PoC, and the counties of Abiemnon, Pariang (host community) and Mayom in Unity State. The proposed project will build on CARE's existing operational capacities, strong presence on the ground, and ongoing projects and programs in nutrition. The widespread internal displacement has increased vulnerability to malnutrition for all of the conflict affected populations in the four counties (Rubkona, Mayom, Abiemnon and Pariang) which calls for continued nutrition interventions targeting the most vulnerable children under five years of age, pregnant and lactating women elderly, within Bentiu POC. According to the Integrated Food Security Phase classification analysis report released in September 2015, the four counties remain at Critical Levels (Phase three). An update of the IPC in Dec 2015 show the four Counties remain at critical phases of Three and Four according to classification system. Similarly, from data produced by nutrition centers managed by CARE, the number of malnourished children remains high although stable, but seasonally, the numbers in January to June are expected to rise significantly as we approach the lean season and planting season.

As mentioned earlier, results from surveys undertaken by CARE in Mayom Abiemnon and Pariang during the pre-harvest period in April and May 2015 shows high malnutrition rates with GAM rates of 30.0% (25.9-34.5 95% CI) in Mayom County, 26.5% (22.4-31.1 95 C.I) in Abiemnon county and 23.4% [19.1-28.3 95% C.I] in Pariang. Additionally, the SMART survey done within Bentiu POC in August 2015, recorded the highest GAM rates in the country at 34.1%. All these locations have been identified, proposed and recommended by the Nutrition Cluster as high priority counties for nutrition interventions.

Potential aggravating factors to malnutrition include sub-optimal IYCF practices, poor hygiene and sanitation and limited access to health care. In addition, the deteriorating household food security as a consequence of displacement, as well as high food prices caused by rising inflation and depreciation of the local currency, are further increasing the risk of acute malnutrition and associated mortality. The CHF funding will enable CARE to continue its ongoing nutrition interventions, as well as expand to other locations within each county in order to meet the increased nutrition needs of the IDPs and host communities. As part of this strategy, mobile nutrition teams will be assigned to reach further bomas in the interior of Mayom, Abiemnon and Pariang to ensure more malnourished children in need of services are reached.

5. Complementarity

CARE has UNICEF- funded 10 month programming, which will end in November 2016 and GE funding for Mayom and Abiemnon ending in December 2016. The funds from CHF will provide a complement to these projects, bridging the gap for the personnel, program materials, training and other inputs. WFP funding for Bentiu and Rubkona County TSFP activities will also complement funding from CHF for the provision of quality services by ensuring that needed additional staff and inputs are sourced for the program.

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.

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 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity			30		
CO3: Ensure enhanced needs analysis of nutrition situation and robust monitoring and effective coordination of responses		HRP 2016 SO2: Ensure communities are protected, capable and prepared to cope with significant threats			10		
<p>Contribution to Cluster/Sector Objectives : This project will help to save lives of malnourished children under 5 years and malnourished PLWs. Provision of integrated nutrition services will enable malnourished children and PLW access services within their locality which will help in the protection of communities from life threatening effects of malnutrition. Nutrition pPreventive services of IYCF, Micro nutrient supplementation will help control malnutrition in the four counties.</p>							
Outcome 1							
Improved and sustained access to OTP services for severely malnourished under-fives children in Mayom, Abiemnon, Pariang, and Rubkona counties (Bentiu POCs and Bentiu Town) and and moderately malnourished Under fives and PLW in Benttiu POC and Rubkona County only							
Output 1.1							
Description							
Active case finding of both Severe and moderate acutely malnourished children under five years of age							
Assumptions & Risks							
security situation remaining neutral							
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							
Activity 1.1.3							
Daily Outreach services offered at all health facilities in our catchment areas							
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			10,5 51	10,7 26	21,277
<p>Means of Verification : Weekly and Monthly screening reports</p>							
Output 1.2							
Description							
Treatment of both Severe acute malnourished and moderately malnourished children							
Assumptions & Risks							
all counties will be accessible during project period							
Activities							
Activity 1.2.1							
Provision of OTP services at Health facility level, Bentiu sectors and mobile sites							
Activity 1.2.2							
Provision of Both RUTF and RUSF to SAM and MAM cases respectively							
Activity 1.2.3							
Establishment of 2 Mobile Nutrition teams to enable outreaches in far to reach areas in Abiemnon and Pariang counties							
Activity 1.2.4							
Establishment of two SC centers (one at Abiemnon PHCC, Abiemnon County and the second at Mankien PHCC Mayom County)							
Activity 1.2.5							
Continuation of Mobile team activities in Mayom County							
Indicators							

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	NUTRITION	Frontline services # of children (under-5) admitted for the treatment of SAM			3,176	3,305	6,481
Means of Verification : Monthly nutrition reports							
Indicator 1.2.2	NUTRITION	Frontline services # Children (under-5) admitted for the treatment of Moderate Acute Malnutrition (MAM)			2,076	2,161	4,237
Means of Verification : Monthly reports							
Indicator 1.2.3	NUTRITION	Frontline services # of nutrition sites - No of stabilisation centres supported (new and existing)					2
Means of Verification : monthly reports and quarterly reports							
Indicator 1.2.4	NUTRITION	Frontline services # of nutrition sites - No of OTP sites (new and existing)					3
Means of Verification : Quarterly Progressive reports							
Indicator 1.2.5	NUTRITION	Frontline services # of nutrition sites - No of TSFP sites established/maintained supported (new and existing)					6
Means of Verification : Monthly and Quarterly progressive reports							
Outcome 2							
Integrate nutrition prevention programs targeting malnourished children 0-59 month's boys and girls and PLWs (IYCF, Vitamin A supplementation and De-worming) in National immunization days and in nutrition treatment centers							
Output 2.1							
Description							
Train health workers, nutrition staff and community outreach workers on IYCF-E							
Assumptions & Risks							
there will be no interruption due to insecurity							
Activities							
Activity 2.1.1							
Training sessions held							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	NUTRITION	Frontline services # of health workers trained in Infant and Young Child Feeding	60	40			100
Means of Verification : Training reports, monthly reports							
Output 2.2							
Description							
Formation of mother to mother support group							
Assumptions & Risks							
security will remain normal							
Activities							
Activity 2.2.1							
Training mothers on IYCF -E							
Activity 2.2.2							
Recruitment of lead mothers							
Activity 2.2.3							
Weekly counseling sessions							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.2.1	NUTRITION	Frontline services # of functional mother-to-mother support groups					40
Means of Verification : monthly reports							
Indicator 2.2.2	NUTRITION	Frontline services # of pregnant and lactating women and caretakers of children 0-23 months reached with IYCF-E interventions	20	846			866

Means of Verification : monthly IYCF reports														
Output 2.3														
Description														
Increased access to Vitamin A supplements (6-59 months) and de worming to children 12-59 months														
Assumptions & Risks														
children will be availed by mothers during NIDS and also at health facilities														
Activities														
Activity 2.3.1														
Vitamin A supplementation during NIDs and during facility visits by 6-59 months aged children														
Activity 2.3.2														
Deworming of children aged 12-59 months within the community and at health and nutrition centres														
Activity 2.3.3														
Community mobilization messages delivered during National Immunization days (NIDS)														
Indicators														
			End cycle beneficiaries				End cycle							
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target							
Indicator 2.3.1	NUTRITION	Frontline services # of children (under -5) supplemented with Vitamin A			11,02	11,451	22,453							
Means of Verification : monthly reports														
Indicator 2.3.2	NUTRITION	Frontline services # of children (12 -59 months) dewormed			7,057	7,057	14,114							
Means of Verification : Monthly reports														
Outcome 3														
Nutrition survey information available for use by CARE and National Nutrition cluster for planning and case load calculation, HRP etc														
Output 3.1														
Description														
Access to timely nutrition information for need analysis, monitoring and coordination of nutrition emergency responses.														
Assumptions & Risks														
Accessibility to the counties will not be interrupted by insecurity														
Activities														
Activity 3.1.1														
Recruitment of Survey Consultants														
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					4							
Means of Verification : Survey reports														
Additional Targets :														
M & R														
Monitoring & Reporting plan														
The Project will be managed and monitored on a daily basis by nutrition managers in Bentiu POC, (Rubkona County), Mayom, Abiemnon and Pariang Counties at the CARE field offices. A Nutrition Technical Advisor based in Juba will provide surge capacity to the team as needed. Weekly and monthly reports will be shared at the Bentiu Nutrition sub-cluster meetings and with the National Nutrition Cluster on a monthly basis. On a daily basis, the nutrition staff will be mentored by key technical staff from CARE which includes a Nutrition Manager (international) and four Deputy Nutrition Managers (National). CARE will also work in partnership with nutrition partners working at the Bentiu POC (CWW and MSF) and perform periodic/monthly monitoring of the nutrition centers to certify the quality of services is high and maintained throughout the project lifespan. The progress report will be shared with CHF on a quarterly basis to track success.														
CARE will also involved the CHD in the three counties in monitoring the implementation of the projects. CARE will also provide regular update to the CHD where applicable.														
Workplan														
		Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Daily MUAC screening at community level and at IDPS settlement at Bentiu POC		2016		X	X	X	X	X	X					

Activity 1.1.2: Weekly community outreaches through Mobile teams	2016	X	X	X	X	X	X											
Activity 1.1.3: Daily Outreach services offered at all health facilities in our catchment areas	2016	X	X	X	X	X	X											
Activity 1.2.1: Provision of OTP services at Health facility level, Bentiu sectors and mobile sites	2016	X	X	X	X	X	X											
Activity 1.2.2: Provision of Both RUTF and RUSF to SAM and MAM cases respectively	2016	X	X	X	X	X	X											
Activity 1.2.3: Establishment of 2 Mobile Nutrition teams to enable outreaches in far to reach areas in Abiemnon and Pariang counties	2016	X	X															
Activity 1.2.4: Establishment of two SC centers (one at Abiemnon PHCC, Abiemnon County and the second at Mankien PHCC Mayom County)	2016	X	X															
Activity 1.2.5: Continuation of Mobile team activities in Mayom County	2016	X	X	X	X	X	X											
Activity 2.1.1: Training sessions held	2016	X	X															
Activity 2.2.1: Training mothers on IYCF -E	2016	X	X	X														
Activity 2.2.2: Recruitment of lead mothers	2016	X	X															
Activity 2.2.3: Weekly counseling sessions	2016	X	X	X	X	X	X											
Activity 2.3.1: Vitamin A supplementation during NIDs and during facility visits by 6-59 months aged children	2016	X	X	X	X	X	X											
Activity 2.3.2: Deworming of children aged 12-59 months within the community and at health and nutrition centres	2016	X	X	X	X	X	X											
Activity 2.3.3: Community mobilization messages delivered during National Immunization days (NIDS)	2016	X	X	X	X	X	X											
Activity 3.1.1: Recruitment of Survey Consultants	2016		X															

OTHER INFO

Accountability to Affected Populations

CARE has a series of ongoing project mechanisms to ensure accountability to beneficiaries. As an example, for the 2015 project, community members were involved during the inception phase through their leaders and the selection of community nutrition volunteers was undertaken through RRC and CHD. During the project implementation period, communities are provided with updates on the progress of the project. Communities at Mayom, Pariang and Abiemnon Counties will be informed about Mobile Nutrition Teams that will be visiting them on specific dates and the services they can expect before the services commence.

CARE has feedback mechanism already in place, and complaints lodged by community or beneficiaries are discussed at the community level, field office level or at Juba level and solutions sought. In case of non-performance of our staff, negligence and abuse of the mandate of CARE in the provision of humanitarian nutrition services, the remedial actions involve discussion at the community level, and proper action is taken -- even dismissal of staff, all in the view of ensuring our clients/beneficiaries receive the highest quality services.

Implementation Plan

This project will be implemented in alignment with the ongoing projects in Bentiu POC, Bentiu and Rubkona towns, and the counties of Pariang, Abiemnon and Mayom managed by CARE. Due to scale up plans, more staff will be employed and nutrition managers will be in charge of implementing the projects at field level. Periodic visits by the Nutrition Technical Advisor will be done on monthly basis. At the Bentiu POC, there are sub cluster meetings on a weekly basis; CARE is an active member and will ensure the activities are implemented in a coordinated manner seeking advice from nutrition partners and stakeholders appropriately.

In the counties of Mayom, Abiemnon and Pariang, the CHD will be involved in the implementation of the project since our nutrition services are integrated within health facilities managed by CHD while supported by CARE. The inputs from this grant will also complement the ongoing projects supported by GE, WFP and UNICEF in all the counties.

Nutrition Surveys will be carried out in coordination with partners on ground and NIWG at national level cluster to provide validation for the surveys

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
Concern World Wide	OTP, TSFP and IYCF services at Bentiu POC will be coordinated between CARE and CWW. CARE manages the Nutrition Rubhall where nutrition commodities are prepositioned.
MSF-Holland	CARE collaborates with MSF in SC referrals to inpatient treatment at Bentiu POC
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

UNICEF	CARE is the manager of the nutrition rubhall at Bentiu POC and collaborates with UNICEF in ensuring the rubhall has commodities prepositioned as needed. If the commodities are nearing out of stock, CARE coordinates with UNICEF to ensure that the supplies are replenished on time.
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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 proposed project will significantly contribute to gender equality by incorporating men, women and children in all activities.

- During recruitment CARE will give equal opportunities to males and females
 - 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
- .Project data will be dis aggregated by gender and each activity will ensure gender participation.
CARE plans the following on gender consideration:

Protection Mainstreaming

Women are particularly affected by the current nutrition crisis. Their nutrition status affects breastfeeding activities, and within the family unit, they are the primary caregivers, responsible for the overall health and nutrition care for children. To address gender-related nutrition concerns, CARE mainstreams gender and protection considerations in all of its program work. As an example, CARE ensures the inclusion of both male and female staff and volunteers, implements feedback mechanisms and seeks out opportunities to include the voices of women and girls in a consultative manner.

Country Specific Information

Safety and Security

Implementation of activities will be in collaboration with government Ministry of Health and with full consent of the commissioners of each of the counties. In case of any impending insecurity, CARE will endeavor to keep beneficiaries informed of any programming changes.

Access

Access to Bentiu POC is likely not to be interrupted during the implementation period since steps have been taken by IOM to ensure the road network is improved within the POC. Access to Bentiu town will be via road using CARE vehicles to deliver supplies from the Bentiu POC Rubhall and transport staff. Mayom, Abiemnon and Pariang access roads to the beneficiaries are expected to be clear until the onset of rains in early June 2016. During the wet period, access to mobile sites will need to undertaken by Quad bikes. There is no major concern regarding the access to the beneficiaries, apart from unforeseen insecurity incidents.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
Staff and Other Personnel Costs							
1.1	Country Director	s	1	16,900.00	6	8%	8,112.00
	<i>Country Director (Based in Juba) Salary will be charged on this project as support cost</i>						
1.2	Finance Director	s	1	11,090.00	6	8%	5,323.20
	<i>8% of Finance director (Juba Based) salary will be charged to this project as support cost. Basic salary \$6000 plus 44% benefits plus house allowance \$2450=\$11090</i>						
1.3	Grants and contracts coordinator	s	1	9,650.00	6	8%	4,632.00
	<i>8% 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 \$5000 plus 44% benefits plus house allowance \$2450=\$9650</i>						
1.4	Nutrition Technical Advisor	D	1	10,370.00	6	65%	40,443.00
	<i>Nutrition Technical Advisor (Juba Based -International staff)salary will be charged at this project Basic salary \$5500 plus 44% benefits plus house allowance \$2450=\$10370 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 65% of his time in managing this project</i>						
1.5	Nutrition Program Managers	D	3	6,912.00	6	65%	80,870.40
	<i>3 Nutrition Program managers (Field Based -International staff)salary will be charged at this project Basic salary \$4800 plus 44% benefits =\$6912 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 another at Pariang to manage pariang, another at Bentiu to manage Bentiu and lastly one at Bentiu POC</i>						
1.6	Nutrition officers	D	4	2,645.00	6	65%	41,262.00

	4 Nutrition officers/deputy Managers (field Based -National staff)salary will be charged at this project Basic salary \$1824 plus 45% benefits =\$2645. 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 and the other at Pariang County						
1.7	Nutrition assistant	D	60	653.00	6	65%	152,802.00
	60 Community Nutrition assistant (field Based -National staff)salary will be charged at this project Basic salary \$400 plus 45% benefits =\$653. They will be involved in the implementation of the project at health facility levels and at outreach sites. <i>Breakdown</i> Mayom County has 8 facilities each with 3 nutrition assistants=24 plus one mobile 3- total 27 Abiemnon County has 3 facilities each with 3 Nut assistants = 9 plus one mobile 3 total 12 Pariang county has 5 facilities each with 3 Nut assistants =15 plus one mobile 3 total =18 Rubkona county is divided in to two Bentiu POC - Sector 1=16, sector 5 =19 total =35 Outside bentiu POC- Bentiu Hospital=7 Rubkona PHCC 7 and Dare A mobile clinic 7 total 21 The overall number of Nutrition assistants =113. This project will support 60 Nut assistants at 65% of their salaries while remaining will be supported by WFP and GE grants already CARE has secured						
1.8	Community Nutrition outreach workers	D	1	4,000.00	6	100%	24,000.00
	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 20 HF and outreach sites will have 2 community outreach workers, at least a third will be either gender. special groups such as persons with disabilities will be be given due consideration. they will be given incentive on monthly basis of \$100. All 40 in a month will receive \$4000						
1.9	Finance and admin	D	1	2,645.00	6	100%	15,870.00
	Finance and admin officer (Bentiu Based) salary will be charged to this project as Direct cost. This officer is in charge of managing Nutrition program grants-Finances CHF inclusive:Basic salary \$1824 plus 45% benefits =\$2645						
1.10	Nutrition Centers cleaners	D	10	135.00	6	45%	3,645.00
	10 cleaners will be involved in maintaining the nutrition program centers and compound clean. They will be employed on casual basis at 135USD per month. <i>Breakdown of the cleaners</i> CARE has three Stabilization Centers and each centre will have one cleaner=3 Bentiu POC CARE has two hge nutrition centers in Sector 1 and sector 5 each will have 2 cleaners =4 Outside Bentiu POC care has three big nutrition centers each will have 1 cleaner =3 Grand total 10						
1.11	program support manager	s	1	6,912.00	6	10%	4,147.20
	One program support manager field base-International staff)10% salary will be charged at this project Basic salary \$4800 plus 44% benefits =\$6912 He will be involved in managing the field based support staff who will support in the implementation of this project.						
1.12	Juba support staff	s	1	59,214.00	6	10%	35,528.40
	Juba office has several support staff who will be key to facilitating smooth operation of the project. They include logistics, Procurement, HR, Drivers, Finance, IT, and security officers. the total months fee for all amount to 59214\$ per month. this project will be charged 10% of Juba support staff see attached document						
1.13	Field level support staff	s	1	16,324.00	6	15%	14,691.60
	At the three operational bases (Mankien, Pariang and Bentiu) there are support staff. They include Drivers, Area managers, log and admin officers, cleaners, guards and security officers). all together in a month cost estimated cost is 16324\$. this project will be charged 15% for their salaries in a month see attached document						
	Section Total						431,326.80
Supplies, Commodities, Materials							
2.1	IYCF-E trainings	D	4	4,000.00	1	100%	16,000.00
	All nutrition staff will be trained on IYCF. There will be four training for 4 days. the venue will be Bentiu POC, Pariang, Mankien and Abiemnon. Each training will cost approximately 4000USD						
2.2	Transportation of Nutrition supplies	D	4	600.00	6	100%	14,400.00
	Secondary transportation of Nutrition supplies within field level Lumpsum figure per month within Mayom, Rubkona, Abiemnom and Pariang county						

2.3	Publicity materials and camping materials- T-shirts, banners, flags Tents, gumboots, torches, mattresses, Bedsheet and blankets	D	3	3,500.00	1	100%	10,500.00
<i>To operate mobile teams in Three counties (Mayom, Abiemnon and Pariang) tents will be required to facilitate accommodation at Field level by support staff and program staff. the assorted camping equipment will be allocated a lump sum of \$3500 per county.</i>							
2.4	Mobile Nutrition teams, fuel, accomodation, transport and food	D	3	2,850.00	6	100%	51,300.00
<i>Each county Mayom, Abiemnon and Pariang will have one mobile team to serve the far to reach areas and increase the coverage of nutrition services. each team with 1 nurse, 2 community nutrition workers and 1 IYCF assistant . Their will be lumpsum allocation of \$2850 per month per team.(this included hiring of vehicle, fuel, food and accommodation)</i> <i>vehicle hire approximately 700USD per day minus the driver, this translated to 1400 in a week and for a month is 5600USD, since this is expensive CARE will subsidize and have a lumpsum of 2850 per month charged to this project for all the three mobile teams. the other cost like meal allowances, and accommodation is taken care in the lumpsum</i>							
2.5	Field level Vehicle and Generator Fuel and maintainance	D	3	2,200.00	6	20%	7,920.00
<i>Each of the field base (Bentiu, Pariang and Mayom) with office will get fuel for generators and vehicles for this project. Fuel and maintenance cost will be charged 20% as support cost</i>							
2.6	Timber and nails for constructing pallets	D	22	350.00	1	100%	7,700.00
<i>Storage facilities have no pallets in all the 22 health facilities. a lumpsum of 350\$ is set aside for each facility to purchase nails and timber for construction as well as paying the service provider</i>							
2.7	Air transport for nutrition materials from juba to Mankien, Parinag and Bentiu- one trip each	D	3	6,000.00	1	100%	18,000.00
<i>To deliver nutrition materials to field locations, the only convenient way is via freight services. three trips are proposed each costing about 6000\$ for 1 tonne chartered flight.</i>							
2.8	Refresher IMAM training	D	3	3,000.00	1	100%	9,000.00
<i>Due to inclusion of national deputy managerrrs in management of nutrition teams, there will be training conducted in each county on CAM/IMAM. They will be refresher trainings and will be conducted by Nutrition Advisor supported by Nutrition managers in all locations apart from Rubkona County. In total 3 training will be conducted for 3 days at an approximate cost of \$3000 per training- The cost for training include transport and accommodation for staff, food allowances, training materials and hiring of training hall.</i>							
2.9	T-shirts for Mother to Mother support groups	D	200	15.00	1	100%	3,000.00
<i>IYCF support groups will have some T-Shirts and Banners designed to help pass key information to members within their communities. an estimated 200 mothers will benefit from this round of support.</i>							
Section Total							137,820.00
Equipment							
3.1	Mats and other sitting materials	D	3	1,000.00	1	100%	3,000.00
<i>Taperins and mats for mothers sitting during outreach sessions. a lumpsum of 100\$ is proposed per team.</i>							
3.2	Sanitation equipments- Buckets, towels, soap, jerricans	D	25	350.00	1	100%	8,750.00
<i>During out reach services as well in the static health centers, infection prevention equipment will be procured to keep safe water for appetite testing, drinking water, cleaning water and also for hand washing. a lumpsum of 300\$ is proposed for each of 25 nutrition centers (22 static facilities and 3 mobile outreaches)</i>							
3.3	ARI meters	D	25	50.00	1	100%	1,250.00
<i>to measure respiratory rates for malnourished children each facility and mobile site would like one ARI Meter. each meter cost 50\$ thus for 25 centers cost will be 1250\$</i>							
3.4	2 laptop computers for deputy nutrition managers	D	2	1,500.00	1	100%	3,000.00
<i>2 laptop computers with a bag and mouse will be procured for deputy manager for Abiemnon and Paring Counties</i>							
Section Total							16,000.00
Contractual Services							
4.1	SMART survey consultants	D	4	350.00	25	50%	17,500.00
<i>4 SMART survey consultants will be engaged to carry out nutrition survey at a cost of 350\$ per day for 25 days. they will carry out four nutrition surveys in the four counties (Mayom, Abiemnon, Pariang and Rubkona (outside the POC) during pre-harvest period (April to June)</i>							
Section Total							17,500.00
Travel							
5.1	Staff flights outside juba-Field flight	D	24	400.00	1	100%	9,600.00

	<i>Flights cost for direct program staff going to field and from field to Juba, 4 international staff, 6 trips per staff= 24 trips each round trip \$400, 100% will be charged to this project</i>						
5.2	Staff flights outside juba-International travel	D	12	700.00	1	100%	8,400.00
	<i>Flights cost for direct program international staff going for RnR and leave, 4 international staff (3 Nutrition Managers and 1 Nutrition advisor) 3 trips per staff= 12 trips each round trip \$800, 100% will be charged to this project</i>						
5.3	Staff per diem	D	1	5,000.00	1	100%	5,000.00
	<i>Field staff visiting juba for meetings and Juba based staff visiting Field for supportive supervision, lumpsum</i>						
	Section Total						23,000.00
General Operating and Other Direct Costs							
7.1	Internet connection costs-VSAT	D	3	500.00	6	100%	9,000.00
	<i>Vsat internet communication at Mayom abiemnon and Pariang, estimated to cost on monthly basis \$500 subscription on monthly basis for communication between field basis and Juba and with partners</i>						
7.2	Sationery for the project	D	1	3,008.90	1	100%	3,008.90
	<i>lump sum stationery for each of the four field bases</i>						
7.3	Office rent at field level	D	3	4,850.00	6	40%	34,920.00
	<i>2 field offices at Bentiu Humanitarian hub, and Mankien base - expenses at Mayom include generator fuel, food supplies, guesthouse maintenance while at Bentiu POC -Food accommodation fee for staff and Hub office rent and will charge 40% from this project</i>						
7.4	Communication- Airtime for phones and thurayas	D	1	300.00	6	100%	1,800.00
	<i>Communication in the field level is limited to Thuraya satellite phones and only phones access is while at Juba. a lumpsum of 500\$ per month is required for communication for all field bases.</i>						
	Section Total						48,728.90
SubTotal			435.00				674,375.70
Direct							601,941.30
Support							72,434.40
PSC Cost							
PSC Cost Percent							7%
PSC Amount							47,206.30
Total Cost							721,582.00
Grand Total CHF Cost							721,582.00

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Unity -> Abiemnhom	10	20	10	246	256	532	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 Activity 1.1.3 : Daily Outreach services offered at all health facilities in our catchment areas Activity 1.2.1 : Provision of OTP services at Health facility level, Bentiu sectors and mobile sites Activity 1.2.2 : Provision of Both RUTF and RUSF to SAM and MAM cases respectively Activity 1.2.3 : Establishment of 2 Mobile Nutrition teams to enable outreaches in far to reach areas in Abiemnon and Pariang counties Activity 1.2.4 : Establishment of two SC centers (one at Abiemnon PHCC, Abiemnon County and the second at Mankien PHCC Mayom County) Activity 2.1.1 : Training sessions held Activity 2.2.1 : Training mothers on IYCF -E Activity 2.2.2 : Recruitment of lead mothers Activity 2.2.3 : Weekly counseling sessions Activity 2.3.1 : Vitamin A supplementation during NIDs and during facility visits by 6-59 months aged children Activity 2.3.2 : Deworming of children aged 12-59 months within the community and at health and nutrition centers Activity 2.3.3 : Community mobilization messages delivered during National Immunization days (NIDS) Activity 3.1.1 : Recruitment of Survey Consultants
Unity -> Mayom	40	20	10	1,267	1,319	2,616	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 Activity 1.1.3 : Daily Outreach services offered at all health facilities in our catchment areas Activity 1.2.1 : Provision of OTP services at Health facility level, Bentiu sectors and mobile sites Activity 1.2.2 : Provision of Both RUTF and RUSF to SAM and MAM cases respectively Activity 1.2.3 : Establishment of 2 Mobile Nutrition teams to enable outreaches in far to reach areas in Abiemnon and Pariang counties Activity 1.2.4 : Establishment of two SC centers (one at Abiemnon PHCC, Abiemnon County and the second at Mankien PHCC Mayom County) Activity 2.1.1 : Training sessions held Activity 2.2.1 : Training mothers on IYCF -E Activity 2.2.2 : Recruitment of lead mothers Activity 2.2.3 : Weekly counseling sessions Activity 2.3.1 : Vitamin A supplementation during NIDs and during facility visits by 6-59 months aged children Activity 2.3.2 : Deworming of children aged 12-59 months within the community and at health and nutrition centers Activity 2.3.3 : Community mobilization messages delivered during National Immunization days (NIDS) Activity 3.1.1 : Recruitment of Survey Consultants

Unity -> Pariang	15	10	5	628	654	1,297	<p>Activity 1.1.1 : Daily MUAC screening at community level and at IDPS settlement at Bentiu POC</p> <p>Activity 1.1.2 : Weekly community outreaches through Mobile teams</p> <p>Activity 1.1.3 : Daily Outreach services offered at all health facilities in our catchment areas</p> <p>Activity 1.2.1 : Provision of OTP services at Health facility level, Bentiu sectors and mobile sites</p> <p>Activity 1.2.2 : Provision of Both RUTF and RUSF to SAM and MAM cases respectively</p> <p>Activity 1.2.3 : Establishment of 2 Mobile Nutrition teams to enable outreaches in far to reach areas in Abiemnon and Pariang counties</p> <p>Activity 1.2.4 : Establishment of two SC centers (one at Abiemnon PHCC, Abiemnon County and the second at Mankien PHCC Mayom County)</p> <p>Activity 2.1.1 : Training sessions held</p> <p>Activity 2.2.1 : Training mothers on IYCF -E</p> <p>Activity 2.2.2 : Recruitment of lead mothers</p> <p>Activity 2.2.3 : Weekly counseling sessions</p> <p>Activity 2.3.1 : Vitamin A supplementation during NIDs and during facility visits by 6-59 months aged children</p> <p>Activity 2.3.2 : Deworming of children aged 12-59 months within the community and at health and nutrition centers</p> <p>Activity 2.3.3 : Community mobilization messages delivered during National Immunization days (NIDS)</p> <p>Activity 3.1.1 : Recruitment of Survey Consultants</p>
Unity -> Rubkona	35	25	10	1,035	1,077	2,147	<p>Activity 1.1.1 : Daily MUAC screening at community level and at IDPS settlement at Bentiu POC</p> <p>Activity 1.1.2 : Weekly community outreaches through Mobile teams</p> <p>Activity 1.1.3 : Daily Outreach services offered at all health facilities in our catchment areas</p> <p>Activity 1.2.1 : Provision of OTP services at Health facility level, Bentiu sectors and mobile sites</p> <p>Activity 1.2.2 : Provision of Both RUTF and RUSF to SAM and MAM cases respectively</p> <p>Activity 1.2.3 : Establishment of 2 Mobile Nutrition teams to enable outreaches in far to reach areas in Abiemnon and Pariang counties</p> <p>Activity 1.2.4 : Establishment of two SC centers (one at Abiemnon PHCC, Abiemnon County and the second at Mankien PHCC Mayom County)</p> <p>Activity 2.1.1 : Training sessions held</p> <p>Activity 2.2.1 : Training mothers on IYCF -E</p> <p>Activity 2.2.2 : Recruitment of lead mothers</p> <p>Activity 2.2.3 : Weekly counseling sessions</p> <p>Activity 2.3.1 : Vitamin A supplementation during NIDs and during facility visits by 6-59 months aged children</p> <p>Activity 2.3.2 : Deworming of children aged 12-59 months within the community and at health and nutrition centers</p> <p>Activity 2.3.3 : Community mobilization messages delivered during National Immunization days (NIDS)</p> <p>Activity 3.1.1 : Recruitment of Survey Consultants</p>

Documents	
Category Name	Document Description
Project Supporting Documents	CARE support cost staff salaries.xls