

Requesting Organization :	SOUTHERN AID				
Allocation Type :	Standard Allocation 1 (Jan 2017)				
Primary Cluster	Sub Cluster	Percentage			
Nutrition		100.00			
		100			
Project Title :	Life saving nutrition support to drought affected pastoralist, internally displaced person and returnees in Badhade and kismayo district Lower Juba Somalia.				
Allocation Type Category :					
OPS Details					
Project Code :		Fund Project Code :	SOM-17/3485/SA1 2017/Nut/NGO/4604		
Cluster :		Project Budget in US\$:	211,079.97		
Planned project duration :	9 months	Priority:			
Planned Start Date :	15/03/2017	Planned End Date :	15/12/2017		
Actual Start Date:	15/03/2017	Actual End Date:	15/12/2017		
Project Summary :	<p>The proposed activities is in line with Somalia humanitarian funding strategy response number 2: Improve equitable access to quality lifesaving curative nutrition services through systemic identification,referral,treatment of acute malnourished case boys, girls and pregnant and lactating women.</p> <p>To provide holistic life-saving and life sustaining nutrition intervention Southern aid intends to scale up current nutrition intervention in Kismayo through establishing two new outreach site as well as establishing one fixed and two mobile outpatient therapeutuc program sites in Badahde district hence provide active community case finding, screening, admission and treatment of severe acute malnutrition cases boys and girl 5 children in the targeted internally displaced person . Southern aid shall enhance referral services to the affective and most complicated cases to the nearest stabilization center in Kismayo and Badadhe town to enable provide it adequate attention to the severely malnourished children in Kismayo internally displaced person. Southern aid shall also provide routine immunization, deworming and vitamin A supplementation services to <5 children boys and girls as well as multiple micronutrient to the target beneficiaries. Southern aids shall provide integrated management of acute malnutrition and infant and young child feeding program and basic service for nutrition packages training packages to its technical nutrition staff as well as community health workers to enable them deliver effective management of the IMAM programs in the target Internally dsplaced person in Kismayo.Southern Aid (SA) shall be able to provide integrated management of acute malnutrition and infant and young child feeding program and basic service for nutrition packages training package training packages to its technical nutrition staff as well as community health workers to enable them deliver effective management of the integrated management acute malnuriion programs in the target internally displaced person in Kismayo.The project will integrated with food security cluster in which Southern aid is also intending to undertake the project in the same area hence improving the life of the vulnerable population both Internally dsplaced person s,returnees and drought affected pastoralist in the target area</p>				
Direct beneficiaries :					
Men	Women	Boys	Girls	Total	
18	1,017	2,000	2,000	5,035	
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
Children under 5	0	0	2,000	2,000	4,000
Pregnant and Lactating Women	0	1,000	0	0	1,000
Staff (own or partner staff, authorities)	18	17	0	0	35
Indirect Beneficiaries :					
The project shall also reach a total of 13,280 mainly from the drought affected pastoral drop out as well as the returnees from Dadaab refugee camps as well as the vulnerable internally displaced persons in Kismayo.					
Catchment Population:					

The catchment area is estimated to have a total of 123,895 in the two target district, this figure may raise due to the devastating drought in most part of Kismayo and Badadhe that left many pastoral livelihood displaced to the major towns in Lower Juba this coupled with the returnees as well as the Kenya defence forces and militias in fighting in Badadhe Kolbio areas.

Link with allocation strategy :

Lower Juba regions and more so Kismayo and Badadhe are currently facing severe draught leading to loss of livestock and other social assets in the community hence this has created an adverse effects to the life of the community. However, the returnees and internally displaced person in Kismayo couple with drought in pastoral livehood zones needs urgent lifesaving and life sustaining nutrition intervention in the target area.

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
Abdihakim Aden Abdi	Program manager	southernaid.org@gmail.com	+254726531659

BACKGROUND

1. Humanitarian context analysis

Somalia is currently facing an adverse draught conditions, with a deteriorating humanitarian situation in a protracted crisis environment affected by long-term conflict and cyclical natural hazards, More than 2.5 million people in drought-affected areas in need of health services, including 500,000 children under-5 and 575,000 women of child bearing age. There is need for additional support with life-saving medical supplies to health facilities, especially in drought-affected areas of Lower Juba. Somalia's health sector remains in critical condition with one of the worst health indicators in the world and the 7th largest internally displaced people. The under-five mortality rate is 137 per 1,000 live births while approximately 732 women per 100,000 live births die from pregnancy or childbirth-related complications. An estimated 3.3 million people are in need of health services in 2017. However, Kismayo district in lower Juba have high <5 child maternal and morbidity with poor safe motherhood delivery services this is due the high demand created by the IDPs, returnees and host communities as well as the draught displaced pastoral drop out in the target area and hence there is needs to urgent emergency life-saving primary healthcare to enable provide better healthcare services to the vulnerable population.

According to post Gu 2016, Serious and Critical levels of GAM were observed in Kismayo (14.5%). The reported prevalence from assessments were above the WHO critical thresholds for GAM (>15%). In Gu 2016, Kismayo IDPs had Acceptable CDR (0.49/10 000/day) and Serious U5DR (1.2/10 000/day). Sustained Serious in CDR as well as in U5DR were noted since Gu 2015. Approximately 3.7 million additional people across the country are classified as Stressed (IPC Phase 2) through mid-2016. In total, nearly 4.7 million people or 38 percent of the total population of Somalia are acutely food insecure and will be in need of humanitarian assistance. Alert levels of GAM (12.5%) and SAM (2.9%) were recorded during 2014 Deyr assessment compared to Critical GAM (16.6%) and Serious SAM (3.6%) recorded. Urgent lifesaving humanitarian assistance and livelihood support is required for populations in Emergency and Crisis (IPC Phases 4 and 3). Populations experiencing Stressed (IPC Phase 2) acute food insecurity remain highly vulnerable to shocks that could push them back to Crisis or Emergency (IPC Phases 3 or 4). This should be supported in order to protect their livelihoods and boost their resilience to shocks. Internally Displaced Persons continue to represent a large proportion (60-75%) of the total population in Crisis and Emergency over the past three years. This indicates the protracted nature of the food security crisis among displaced populations and calls for medium to long term food security programme/response, in order to support sustainable and durable solutions. Access to basic nutrition services is minimal due to the reduced humanitarian assistance as well as reduced funding for the interventions as operation is limited hence may worsened the situation of women and children nutrition and health in the region. The chronic nutrition situation in Kismayo districts has a devastating impact on child survival and development. The immediate causes of malnutrition include high morbidity with frequent disease outbreaks, poor dietary diversity leading to high prevalence of micronutrient deficiencies such as anaemia, inadequate feeding and care practices of young children and their mothers, household food insecurity in some areas, and poor access to basic services such as primary health care, clean water, and sanitation facilities. Admission levels in Southern aid supported outpatient therapeutic sites have tremendously increased during the last six months. However, urgent intervention is required to provide adequate life -saving and life sustaining nutrition intervention to enable avert the current situation. The latest findings from Post Deyr

2. Needs assessment

The nutrition situation was projected to deteriorate due to deterioration of nutrition situation in internally displaced camps. Recent health management information system data collected from Kismayo and Badadhe partners nutrition facilities for the month of Oct to Dec 2016, showing high trends of malnutrition where it has shown GAM rate of 14.5, SAM 2.9 and MUAC of 11.9 among <5 children and MUAC of 17.9 among the PLWs in Kismayo IDPs among under-five children seen at the existing OTP/SC Centre and the MCH in Kismayo districts. This increase could also be attributed to the increased outreach activities in the district which attracted more admission with early detection of SAM cases before further deterioration leading to better treatment coverage in the newly accessible sites. There were also cases of malaria, Acute Watery Diarrhea and measles reported. Recent southern aid field monitoring reports indicate increased cases of Acute Watery Diarrhea (AWD) which is a normal seasonal trend during the rainy seasons of Deyr. With already limited health and nutrition services in Kismayo IDPs, concerns are raised that the situation may further worsen due to the likely gap in nutrition intervention in the whole of the region. There is poor practice of exclusive breastfeeding among the targeted IDPs communities which entail further focus on social mobilization and community based IYCF interventions. There is also a high proportion of boys and girls aged 6-59 months are acutely malnourished in Kismayo District due to unmet nutritional requirements. The worrying nutrition situation is mainly related to chronically poor food access, high morbidity due to seasonal disease outbreaks, and inadequate sanitation facilities, safe water and poor access to health care services. Southern Aid (SA) will endeavour to treat 2000 severely acutely and moderately malnourished boys (1000) and girls(1000) aged 6-59 months, and as well provide multiple micronutrient intervention through Basic Nutrition Services Package (BNSP) linking nutrition to health, WASH and food security it shall also identify and screen 1000 PLWs for MAM and make referral to the other partners implementing TSFP. Southern aid will work with the local community to actively identify and treats severely and acute malnourished <5 children boys, girls, It shall also provide screening, identification and referral of moderately malnourished pregnant and lactating women in the IDPs. Southern aid shall coordinate with partners working in Kismayo as SAF-UK, Himilo and Somali aid in Badadhe who are working with OTP and SFP respectively for proper referral services. It shall also coordinates with Somali aid and ARC in terms of referrals, and a coordinated approach in provision of a consolidated health, WASH & livelihood to the project beneficiaries. Technical capacity is lacking, hence capacity building will be prioritized for 20 project staff (10 men and 10 women), 15 CHWs/promoter (8 men, 7 women) and project beneficiaries. Southern Aid intends to complements this projects with its ongoing nutrition interventions in Kismayo IDPs as well as it food security project in Kismayo district thus provide a robust integrated life -saving and life sustaining humanitarian assistant to the draught affected communities.

3. Description Of Beneficiaries

The project shall establish one fixed outpatient therapeutic sites and 3 outreach mobile outpatient therapeutic in Badadhe district and as well scale up the integrated nutrition services 2 Mobile Outpatient therapeutic in Kismayo internally displaced persons Southern aid through this project will provide life-saving and life sustaining therapeutic treatment and preventive services to under five children boys, girls age (0-59) with severely acute malnutrition as well as provide Multiple micro-nutrient to pregnant and lactating mothers. , it shall also improve the coverage of immunization, deworming and Vitamin A supplementation; and support mother to mother support group while also ensuring readiness to prevent and respond to outbreaks such as malaria, measles or acute water diarrhea/Cholera and promote nutrition, health and hygiene promotion through nutrition education and beneficiary sensitization. Southern aid shall however endeavor to capacity build 11 (5 men and 6 women) community health workers/promoters/volunteers as well as 15 technical nutrition staff (5 men and 6 women) to enable them effectively carry out the community nutrition services program as per the agreed donors. The project aims to establish integrated nutrition mobile clinics in Kismayo internally displace sites and scale up the nutrition intervention through skilled healthcare professionals. Southern aid through this project will provide life-saving and life sustaining therapeutic treatment and preventive services to under five children boys, girls age (0-59) with severely acute malnutrition as well as provide Multiple micro-nutrient to pregnant and lactating mothers, Southern aid through one fixed outpatient therapeutic program site and 3 mobile outpatient therapeutic program shall provide referral services to the most complicated severely acute and moderately malnourished <5 children and pregnant and lactating women in Kismayo, it shall also improve the coverage of immunization, deworming and Vitamin A supplementation; and support mother to mother support group while also ensuring readiness to prevent and respond to outbreaks such as malaria, measles or AWD/Cholera and promote nutrition, health and hygiene promotion through nutrition education and beneficiary sensitization.

4. Grant Request Justification

Kismayo Internally displaced persons and Badhade district livelihood show critical nutrition level due to poor child feeding practices, food insecurity unpredictable security coupled with devastating drought that led loss of livestock to the pastoral dependent livelihood of Lower Juba .This has coupled with poor humanitarian funding for the past one year that have led to the disruption of the basic health and nutrition services among the partners in Kismayo and Badadhe. However, Southern aid intends to scale up the nutrition services to Badadhe district draught affected host communities as well the Kismayo Internally displaced persons and returnees to enable it avert the current emergency crisis and as well provide lifesaving and sustaining support to children under five boys, girls and pregnant and lactating mothers in the target location. In view of the above, Southern aid shall be able to support the nutrition cluster objective in providing life saving nutrition support to the vulnerable draught affects population in the target areas.

5. Complementarity

Southern aid organization is currently rolling out livelihood program in Kismayo, Badadhe and Afmadow district of Lower Juba through cash transfer. It is also undertaking active case finding and community referral services in Kismayo rurals hence this project shall be integrated into the existing program in the area to enable realized holistic humanitarian assistance to the drought affected population in Badadhe and Kismayo. Southern aid organization have also a long term partnership with UNICEF, UNOCHA, WFP and other international partners in its operation area hence have the advantage of the cordial communal relationship in the area that will enable implements the project without any hitch and as well use its previous project knowledge to better the services to the target population.

LOGICAL FRAMEWORK

Overall project objective

To provide therapeutic treatment and preventive nutrition intervention to severely and moderately acute malnourished under five children (0-59) and pregnant and lactating women in Kismayo selected Internally displaced person and Badadhe district.

Nutrition							
Cluster objectives		Strategic Response Plan (SRP) objectives			Percentage of activities		
Improve equitable access to quality lifesaving curative nutrition services through systematic identification, referral and treatment of acutely malnourished cases		Somalia HRP 2017			100		
Contribution to Cluster/Sector Objectives : This project shall be able to scale up the integrated lifesaving nutrition activities currently funded under SHF 2016 emergency reserved and also established new outpatient therapeutic program sites in Badadhe district to enable respond to the drought affected population as well as the returnees, host communities and Internally displaced persons in the target district through provision of therapeutic treatment ,dewarming as well vitamin A supplementation thus reducing morbidity and mortality rate and reducing the emergency threshold in line with cluster objective							
Outcome 1							
Improve nutrition status of severely acute malnourished <5 children boys,girls through adequate access to therapeutic treatment in newly Internally displaced persons in Kismayo and drought affected vulnerable communities in Badadhe district Lower Juba regions.							
Output 1.1							
Description							
4000 acutely malnourished 2000 boys and 2000 girls outpatient therapeutic program mobile service provision in Kismayo.							
Assumptions & Risks							
Improved nutrition status in the project site							
Activities							
Activity 1.1.1							
Standard Activity : Treatment of severe acute malnutrition in children 0-59months							
Admission and treatment of severely acute malnourished children under five (2000 boys and 2000 girls) 6-59							
Activity 1.1.2							
Standard Activity : Nutrition health and Hygiene promotion							
Provide 9 nutrition,health and hygiene promotion messages to 1000 pregnant and lactating women and caregivers in the target areas.							
Indicators							
			End cycle beneficiaries				End cycle
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target
Indicator 1.1.1	Nutrition	Number of children (6-59months) and pregnant and lactating women admitted in treatment programmes					4,000
Means of Verification : Monthly Mnutrition report,# of under five admitted in OTP centers							
Indicator 1.1.2	Nutrition	Number of Nutrition, Health and Hygiene Promotion Sessions conducted					1,000
Means of Verification : weekly/ monthly nutrition hygiene and health promotion sessions report.reports.							
Outcome 2							
Improved access to quality basic preventive and promotive nutrition services to acutely malnourished <5 children (2000 boys,2000 girls) and 1000 pregnant and lactating women in Kismayo and Badadhe town.							
Output 2.1							
Description							
4000 children under five boys,girls and 1000 pregnant and lactating women have access to improved quality nutrition services in Kismayo and Badadhe target project area.							
Assumptions & Risks							
Available project supply.							
Activities							
Activity 2.1.1							
Standard Activity : Infant and young child feeding counselling							
Provide infant and young child feeding promotion services to 1000 pregnant and lactating women in the target location.							
Activity 2.1.2							
Standard Activity : Multiple micronutrients supplementation for pregnant and lactating women							
Provision of multiple-micronutrient supplementation to 1000 pregnant and lactating women in Kismayo and Badadhe selected nternally displaced person and drought affect population.							
Activity 2.1.3							
Standard Activity : Supplementation Vitamin A							
Provide vitamin A supplementation to (2000 boys,2000 girls) age 0-59							
Activity 2.1.4							
Standard Activity : Vaccination at nutrition centres							

Provide vaccination to 1000 under one year and 2000 under five children boys, and girls with Penta 3 and measles vaccines.

Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	Nutrition	Number of IYCF promotion sessions held					12
Means of Verification : IYCF session report, Participant list.							
Indicator 2.1.2	Nutrition	Number of PLW receiving multiple micronutrients					1,000
Means of Verification :							
Indicator 2.1.3	Nutrition	Proportion of boys and girls 6 to 59 month receiving bi-annual vitamin A supplementation through campaigns					4,000
Means of Verification :							
Indicator 2.1.4	Nutrition	Number of children under one years boys, girls vaccinated with penta 3 and measles					3,000
Means of Verification :							

Outcome 3
Enhance capacity of community health and nutrition workers and nutritional technical staff (10 men and 10 women) and staff (8 men and 7 women) in the deliver of basic nutrition services Package (BNSP).

Output 3.1

Description
35 project staff and community health workers capacity enhanced for effective management of basic nutrition services packages in Badadhe and Kismayo target location.

Assumptions & Risks
staff capacity enhanced due to trainings conducted.

Activities

Activity 3.1.1

Standard Activity : Capacity building

Capacity build 20 community health workers/promoters/volunteers on nutrition hygiene and health promotion service for 5 days in the project,

Activity 3.1.2

Standard Activity : Capacity building

Provide 5 days training to 15 project staff (8 men and 7 female) on integrated management of malnutrition for effective program delivery.

Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	Nutrition	Number of male and female health facility and community workers trained on IMAM guidelines					20
Means of Verification : Training report, Photos, participant list.							
Indicator 3.1.2	Nutrition	Number of male and female Staff/Community Health Workers/outreach workers trained on the management of acute malnutrition					15
Means of Verification : Training report, training participant list, training photos.							
Additional Targets :							

M & R

Monitoring & Reporting plan

Southern Aid will adopt Participatory Result Based Monitoring and Evaluation (PRBM&E) approach. There will be set indicators for project outputs, objectives (outcomes) and impacts (goal, this will be shared with the other interested stakeholder such as government representatives, other humanitarian actors and the community gatekeepers in the area to help in generating results indicators that suits project context. project manager will have overall responsibility to oversee the monitoring and reporting of the entire project cycle from implementation (data verification and collation) and monitoring and evaluation and reporting. Data collection and validation will be continuous. The project will generate weekly updates from field visits. The updates will be used to prepare project monthly progress reports. The project team will meet on monthly basis to review project progress upon which quarterly project reports will be generated. The organization will upload some of the project photos for the key activities to facilitate project monitoring. Southern aid shall strive to share monthly outpatient therapeutic program report to the nutrition cluster through the HMIS reporting.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Admission and treatment of severely acute malnourished children under five (2000 boys and 2000 girls) 6-59	2017			X	X	X	X	X	X	X	X	X	
Activity 1.1.2: Provide 9 nutrition,health and hygiene promotion messages to 1000 pregnant and lactating women and caregivers in the target areas.	2017			X	X	X	X	X	X	X	X	X	
Activity 2.1.1: Provide infant and young child feeding promotion services to 1000 pregnant and lactating women in the target location.	2017			X	X	X	X	X	X	X	X	X	
Activity 2.1.2: Provision of multiple-micronutrient supplementation to 1000 pregnant and lactating women in Kismayo and Badadhe selected internally displaced person and drought affect population.	2017			X	X	X	X	X	X	X	X	X	
Activity 2.1.3: Provide vitamin A supplementation to (2000 boys,2000 girls) age 0-59	2017			X	X	X	X	X	X	X	X	X	
Activity 2.1.4: Provide vaccination to 1000 under one year and 2000 under five children boys,and girls with Penta 3 and measles vaccines.	2017			X	X	X	X	X	X	X	X	X	
Activity 3.1.1: Capacity build 20 community health workers/promoters/volunteers on nutrition hygiene and health promotion service for 5 days in the project,	2017			X									
Activity 3.1.2: Provide 5 days training to 15 project staff(8 men and 7 female) on integrated management of malnutrition for effective program delivery.	2017			X									

OTHER INFO

Accountability to Affected Populations

Southern Aid prioritizes accountability to the affected populace as a key humanitarian principle in its interventions. The organization will constitute project committees with the support of the community to represent the community interests in every stage of the project. The organization will conduct discussion with the community and the various stakeholders in the choice of the relevant infrastructure and will do sensitization on the project objectives, indicators, targeting criteria and all critical aspects in order to inform the community and the intended beneficiaries. The organization will set up a complaints mechanism in order to address community grievances on the process and provide immediate feedback. The organization will also do a post activity monitoring in every major activity in order to weed out the flaws. The project incorporates the DO NO HARM principle by making sure that there is complaints mechanism and immediate feedback and further enlists community support through the community based participation in order to avoid conflicts on the project. The project sets clear targeting criteria in order to minimize disagreement on the choice of beneficiaries.

Implementation Plan

Southern aid has qualified staff in its project field level and shall engage to deliver the required intervention in its best practices. The organization shall employ nutrition program manager who shall be based in Kismayo regional office and shall be acting as an overall oversight authority in the implementation of the project milestones. He/she shall also provide supervision role through which he/she shall guide the field staff on the proper ethics to deliver the basic service nutrition package.SA shall empower the community unit in order to deliver efficient and effective nutrition service in the target catchment, through this the organization shall endeavor build the capacity of the community health workers in order to understand the nutrition package and motivate them for the same. it shall put focus on both static outpatient therapeutic program and mobile outpatient therapeutic program in the 4 project site and shall engage it through outreach programs in order to achieve greater coverage in the targeted Internally displaced persons s beneficiaries. Southern aid shall provide therapeutic feeding program and shall strengthen the referral system to enable it provide holistic services and this shall contribute to reduce maternal mortality and morbidity in Kismayo .The project staff such as nurses, screeners,registers that shall provide integrated approach in curbing the acute malnutrition. The project shall have nutrition officer/team leader who shall supervise the entire mobile outreach and static team and shall provide both technical and supportive supervision, However, SA shall employ M&E officer who shall do the follow up of the project expected output against the target indicators.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
Somali aid	Southern aid shall be coordinates with Somalia aid in Badhede district to enable refer the SAM cases to their health centers and as well to be able avoid any duplication of work.
MOH-Juba	Southern aid shall coordinate the ministry in terms of leadership support as well as information sharing for the project activities to enable avoid any kind of misunderstanding with the authority.
UNICEF	For supply management and project activities timeline and well as supportive supervision for quality check.
HIMILO	Southern aid shall liase with HIMILO in order to coordinates with them on the referral of Moderately malnourished cases since the are doing TSFP program in Kismayo
SAF-UK	Southern aid shall coordinates with SAF-UK in Kismayo to enable avoid any duplication and also to exchange the information monthly sub cluster meeting in Kismayo.

Environment Marker Of The Project

A+: Neutral Impact on environment with mitigation or enhancement

Gender Marker Of The Project

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

Justify Chosen Gender Marker Code

Since the project main activities is treatment of severely acute malnourished boys,girls as well as preganant and lactating women it shall provide and equal chance to both men and women in the employment of staff as well as the training hence the project is designed to contribute significantly on either gender.

Protection Mainstreaming

In a bid to ensure attention to priority cross cutting issues (sex, age, disability and health), the project will take into consideration gender mainstreaming and will give priority to acutely malnourished pregnant and lactating women and children <5 boys and girls. The project will ensure the significant representation of either sex in project technical staff as well as the community health workers,community promoters and volunteers employed in the project .

Country Specific Information

Safety and Security

The intended project area is within the Kismayo town internally displaced person s that enjoys favorable peace as of now since the Kenya defebce forces and Juba land security forces are manning in the area despite this Southern aid shall initiates the project through the consultation of both community elders as well as the security heads to avoid any victimization of our staff hence anticipating to be save throughout the project implementation. Southern aid shall also intend to established new sites in Badadhe town whcih is quite calm as of now and anticipate the same in the entire project period.

Access

Southern aid organization have fully access to all areas in the proposal and hence have cordial relation with both communities and local authority in charge, however, in case of any evantuality Southern aid shall inform the UNOCHA focal person in Juba as well as up date the nutrition cluster on the progress of the project.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrance	% charged to CHF	Total Cost
Staff and Other Personnel Costs							
1.1	Project manager	D	1	1,800.00	9	80.00	12,960.00
	<i>The program manager will be responsible to provide technical guidance to the project teams.He/she will also provide overall leadership to the program activities as well as coordination with other actors within the regions.He/she will be involved in the planing,implementation and program quality assessment jointly with local ministry of health at Jubaland regions.</i>						
1.2	Nutrition project officer	D	1	800.00	9	100.00	7,200.00
	<i>The project officer will be responsible of day to day project activities and supervision of the outpatient therapeutic treatment nurses and other project cadres to ensure the beneficiaries are attended to.He/she will prepare the weekly and monthly project activities plan and ensure excution of the same plan in the field level both at static and mobile sites.</i>						
1.3	Outpatient therapeutic nurses	D	12	400.00	9	100.00	43,200.00
	<i>Nurses will be responsible in the provision of community traetment and shall be based in the static and the mobile sites.they will also be incharge of screeners,registers and community health workers to ensure they provide the required services within the communities.</i>						
1.4	Outpatient therapeutic registrars.	D	12	300.00	9	100.00	32,400.00
	<i>They will be incharge of registraring the beneficaireis coming to the nutrition static and mobile sites, for proper management of the programs.</i>						
1.5	Community mobilizers	D	20	150.00	9	100.00	27,000.00
	<i>They will be responsible in promoting nutrition activties with the community both at facility and mobile outreach sites.</i>						
1.6	Monitoring officer	D	1	600.00	9	50.00	2,700.00
	<i>He will be incharge of data collection,analysis and liasing with program manager to identify the trends and predicts the project outcome indicators.He/she will carry out baseline and end time project assessment and documents the lesson learnt as well as the challenges and overall program rating.</i>						
1.7	Finance officer	D	1	700.00	9	50.00	3,150.00
	<i>Will be responsible in ensuring the project financial accounting and book keeping.He will prepare monthly expenditure and also ensure to reconcile the project financial documentation.</i>						
1.8	Security Gurds	D	4	150.00	9	100.00	5,400.00
	<i>The security gurds will be tasked to ensure the safety of the project team both at facility and mobile services point and as well gurds the program supply storage sites.</i>						
1.9	Outpatient outreach supervisor	D	2	400.00	9	100.00	7,200.00

	<i>In collaboration with nutrition team he /she will ensure the smooth implementation of the outpatient therapeutic program.He/she will provide support to nutrition staff in the project area.He/she will aslo provide proper coordination,communication and harmonization of tools with different stakeholders involved in the nutrition program.</i>						
	Section Total						141,210.00
Supplies, Commodities, Materials							
2.1	Warehouse cost	D	1	450.00	9	100.00	4,050.00
	<i>warehouse storage facilitation cost at Kismayo project sites.</i>						
2.2	Integrated management of acute malnutrition (IMAM) training for project staff	D	1	3,854.50	1	100.00	3,854.50
	<i>15 Nutrition staff will be capacity builds to ensure the project delivers the expected integrated management of acute malnutrition services .This will also enhance the project staff knowledge and skills in the management of acute malnutrition treatment. The training will be conducted in 5 days.</i>						
2.3	Nutrition,Health and hygiene promotion (NHHP) training for Community health workers	D	1	3,334.50	1	100.00	3,334.50
	<i>20 Community health worker 5 days training aimed to provide effective skills and know how of the community unit in nutrition,hygiene and health promotion activities within the communities.</i>						
2.4	Infant and young child feeding pomotion session(36Pax* 9 session*\$ 11)	D	36	11.00	9	100.00	3,564.00
	<i>Caregivers/family heads will be sensitized on infant and young child feeding best practices.Promotion session will be conducted at every months in the target sites TARGETING 36 CAREGIVERS and pregnant and lactating women for 9 moths.</i>						
	Section Total						14,803.00
Travel							
5.1	vehicle hire for project sites	D	2	1,800.00	9	100.00	32,400.00
	<i>The project will hire two vehicle for outpatient therapeutic program activities one at Kismayo site and another one at Badhade district project sites. The two district are far apart and each site will have its own vehcile for ease of movement within the project area.This will aslo reduce the risk of project movement since kismayo and Badhade .</i>						
	Section Total						32,400.00
General Operating and Other Direct Costs							
7.1	Office rent	D	1	300.00	9	50.00	1,350.00
	<i>This is the monthly rental charges for Badhade Southern aid office.</i>						
7.2	Communication	D	1	350.00	9	50.00	1,575.00
	<i>Internet and air time cost for project staff at Kismayo project location.See attached BOQs for detailed expenditure</i>						
7.3	Utility cost	D	1	200.00	9	50.00	900.00
	<i>The cost will cover Southern aid Kismayo office electericity month bills.See attached BOQs for detailed expenditure.</i>						
7.4	Stationaries.	D	1	200.00	9	50.00	900.00
	<i>Cost for Kismayo office stationaries and will be purchased twice during the project.</i>						
7.5	Bank transfer	D	1	4,133.00	1	100.00	4,133.00
	<i>2% of the overall program cost.</i>						
	Section Total						8,858.00
SubTotal			100.00				197,271.00
Direct							197,271.00
Support							
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							13,808.97
Total Cost							211,079.97

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Lower Juba -> Badhaadhe -> Kolbiyow	25	18	517	25	250	810	Activity 1.1.1 : Admission and treatment of severely acute malnourished children under five (2000 boys and 2000 girls) 6-59 Activity 1.1.2 : Provide 9 nutrition,health and hygiene promotion messages to 1000 pregnant and lactating women and caregivers in the target areas. Activity 2.1.1 : Provide infant and young child feeding promotion services to 1000 pregnant and lactating women in the target location. Activity 2.1.2 : Provision of multiple-micronutrient supplementation to 1000 pregnant and lactating women in Kismayo and Badadhe selected nternally displaced person and drought affect population. Activity 3.1.1 : Capacity build 20 community health workers/promoters/volunteers on nutrition hygiene and health promotion service for 5 days in the project, Activity 3.1.2 : Provide 5 days training to 15 project staff(8 men and 7 female) on integrated management of malnutrition for effective program delivery.
Lower Juba -> Badhaadhe -> Badhaadhe	25		800	1,000	1,000	2,800	Activity 1.1.1 : Admission and treatment of severely acute malnourished children under five (2000 boys and 2000 girls) 6-59 Activity 1.1.2 : Provide 9 nutrition,health and hygiene promotion messages to 1000 pregnant and lactating women and caregivers in the target areas. Activity 2.1.1 : Provide infant and young child feeding promotion services to 1000 pregnant and lactating women in the target location. Activity 2.1.2 : Provision of multiple-micronutrient supplementation to 1000 pregnant and lactating women in Kismayo and Badadhe selected nternally displaced person and drought affect population. Activity 3.1.1 : Capacity build 20 community health workers/promoters/volunteers on nutrition hygiene and health promotion service for 5 days in the project, Activity 3.1.2 : Provide 5 days training to 15 project staff(8 men and 7 female) on integrated management of malnutrition for effective program delivery.

Lower Juba -> Kismayo -> Buulo Xaaji	25	200	300	400	900	<p>Activity 1.1.1 : Admission and treatment of severely acute malnourished children under five (2000 boys and 2000 girls) 6-59</p> <p>Activity 1.1.2 : Provide 9 nutrition,health and hygiene promotion messages to 1000 pregnant and lactating women and caregivers in the target areas.</p> <p>Activity 2.1.1 : Provide infant and young child feeding promotion services to 1000 pregnant and lactating women in the target location.</p> <p>Activity 2.1.2 : Provision of multiple-micronutrient supplementation to 1000 pregnant and lactating women in Kismayo and Badadhe selected nternally displaced person and drought affect population.</p> <p>Activity 3.1.1 : Capacity build 20 community health workers/promoters/volunteers on nutrition hygiene and health promotion service for 5 days in the project,</p> <p>Activity 3.1.2 : Provide 5 days training to 15 project staff(8 men and 7 female) on integrated management of malnutrition for effective program delivery.</p>
Lower Juba -> Kismayo -> Goob Weyn	25	125	200	200	525	<p>Activity 1.1.1 : Admission and treatment of severely acute malnourished children under five (2000 boys and 2000 girls) 6-59</p> <p>Activity 1.1.2 : Provide 9 nutrition,health and hygiene promotion messages to 1000 pregnant and lactating women and caregivers in the target areas.</p> <p>Activity 2.1.1 : Provide infant and young child feeding promotion services to 1000 pregnant and lactating women in the target location.</p> <p>Activity 2.1.2 : Provision of multiple-micronutrient supplementation to 1000 pregnant and lactating women in Kismayo and Badadhe selected nternally displaced person and drought affect population.</p> <p>Activity 3.1.1 : Capacity build 20 community health workers/promoters/volunteers on nutrition hygiene and health promotion service for 5 days in the project,</p> <p>Activity 3.1.2 : Provide 5 days training to 15 project staff(8 men and 7 female) on integrated management of malnutrition for effective program delivery.</p>

Documents	
Category Name	Document Description
Budget Documents	General and admin cost-SA-4604- 2017.xlsx
Budget Documents	Training & General admin cost-SA-4604- 01-03-2017.xlsx
Grant Agreement	HC signed Souther Aid GA.pdf
Grant Agreement	GA SOUTHERN AID NUTRITION 4604.pdf