

Requesting Organization :	Somali Organic Agriculture Development Organization				
Allocation Type :	Standard Allocation 1 (Jan 2017)				
Primary Cluster	Sub Cluster	Percentage			
Nutrition	Out-patient Therapeutic care Programme (OTP)	100.00			
		100			
Project Title :	Emergency Nutrition Intervention in Jalalaqsi District, Hiraan region				
Allocation Type Category :					
OPS Details					
Project Code :		Fund Project Code :	SOM-17/3485/SA1 2017/Nut/NGO/4605		
Cluster :		Project Budget in US\$:	177,325.96		
Planned project duration :	8 months	Priority:			
Planned Start Date :	13/03/2017	Planned End Date :	13/11/2017		
Actual Start Date:	13/03/2017	Actual End Date:	13/11/2017		
Project Summary :	<p>Somalia is facing its worst humanitarian crisis since 2010/11 which is characterized by failure of three consecutive rainy seasons during 2015-2016, followed by a prolonged harsh Hagaa (July-September 2016) and significantly below-average Deyr rainfall (October-December 2016). Over the past six months, food security and nutrition situation in the country has worsened and malnutrition rates remain high, with 320,000 children under age 5 acutely malnourished, of which 50,000 are severely acutely malnourished and at the risk of death. , food security and nutrition analysis, Hiran region has persistently faced a Humanitarian Emergency Crisis since 2011 due to recurrent droughts, protracted conflict and blockage of movement of goods by insurgent groups. Severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) among children <5 years and pregnant and lactating women is a major concern in Hiran region where the nutrition situation has deteriorated very critical levels</p> <p>The objectives of the project is to reduce the risk of mortality and morbidity associated with moderate and severe malnutrition in 7505 boys and girls under five years, 3377 pregnant and lactating women in Jalalaqsi district and its satellite villages and SOADO seeks to increase access to quality nutrition services through Outpatient therapeutic feeding and supplementary feeding interventions, micronutrient supplementation, deworming and nutrition education programs through the establishment of two fixed outpatient therapeutic program centres and four mobile teams for the satellite villages in Jalalaqsi district. The project will be carried out in Jalalaqsi district and satellite villages under the district. The project will target 7,505 Malnourished Children (3,865 boys, 3,640 girls) and 3,377 pregnant and lactating women (PLWs) as well an estimated SAM caseload of 847 children in the age of 6 59 months in 33 satellite villages in the western part of Jalalaqsi districts of Hiran</p>				
Direct beneficiaries :					
	Men	Women	Boys	Girls	Total
	31	3,402	3,865	3,640	10,938
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
Children under 5	0	0	3,865	3,640	7,505
Pregnant and Lactating Women	0	3,377	0	0	3,377
Staff (own or partner staff, authorities)	31	25	0	0	56
Indirect Beneficiaries :					
The indirect beneficiaries will be willing Husbands/ fathers of children admitted to the program, grand mothers of malnourished children, who will either be caretakers or who will benefit from health education at community level and neighbors of the beneficiaries who might benefit from community based health education					
Catchment Population:					
The catchment population in the project area is estimated 37,525 people (UNFPA 2014)					
Link with allocation strategy :					

Severe drought continues to worsen across Somalia, due to the failure of three consecutive rainy seasons during 2015-2016, followed by a prolonged dry season Hagaa (July-September 2016) and significantly below-average Deyr rainfall (October-December 2016). The scale of the drought in Hiran region call urgent action to the situation and scale up response that focusing on the areas affected by the current drought. This project is responding to the worsening drought condition in Jalalaqsi and its satellite villages in the district and save-life of 7505 Boys and girls, and 3377 pregnant and lactating women in the affected areas. The project will also seek to provide life saving interventions with resilience component with the intention of mitigating shocks either from increased impact of the drought or any other emerging phenomena.

The project will in cooperate basic nutrition service package activities and treatment of uncomplicated severe acute malnutrition with capacity building for both staff and the community thus contributing to cluster objective 1, 2 and 3.

If the project is approved for funding it will go a long way in protecting lives of more than 7000 vulnerable children from morbidity and mortality related to malnutrition, 847 of these who are already at risk of death due to malnutrition. The severity of the situation could be worse considering that the gap in nutrition service provision since April,2016. The project will also assist pregnant and lactating women whose situation has been worsened by gender in equality and changing dynamics as families separate and disintegrate due to the effect of the drought. The project will offer support for them to feed their children appropriately, especially those with children under 5, so as to reduce the risk of increased prevalence of disease and possible death among these children. Mothers and children will also receive primary prevention services like EPI and health education so as to prevent occurrence and severity of disease even with the threat of increased prevalence of water borne and water washed diseases.

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
Dr. Osman Gedow Amir	CEO SOADO	soadongo@hotmail.com	+254723469342

BACKGROUND

1. Humanitarian context analysis

Somalia is facing its worst humanitarian crisis since 2010/11 which is characterized by failure of three consecutive rainy seasons during 2015-2016, followed by a prolonged harsh Hagaa (July-September 2016) and significantly below-average Deyr rainfall (October-December 2016). Severe drought continues to worsen across Somalia and drought conditions exacerbated also expanded to other regions in southern and central Somalia, including Hiraan region (OCHA 2016). Acute food insecurity is expected to continue with increased intensity. Over the last two decades, Somalia has suffered conflict, political instability, natural and economic shocks that have resulted in acute hunger and malnutrition. Famine in 2010/2011, resulted in acute food and nutrition crises that led to the death of over 250 000 people (FSNAU), a situation which should not be repeated.

The humanitarian situation in Hiran has become increasingly fragile towards the end of 2016 (OCHA, 2016). Drought conditions are deepening and have expanded in most areas of including Jalaqsi. OCHA identifies Jalalaqsi as one of the worst affected areas of south central (OCHA pre famine report, 2017). The Deyr rainy season, which usually extends from October to December, has so far been poor, and high temperatures combined with limited amounts of rain in October 2016 that have led to drought conditions. Crop and pasture losses are widespread, and water shortages common. Substantial increases in water prices are being reported in Jalalaqsi, with price hikes of as much as 50% (OCHA,2017).

Worsening drought conditions have increased displacement and put additional pressure on limited services and family structures hence leading to family separation, intimate partner violence and an increase in harmful social norms such as child marriage and child labour. Over the past six months, food security and nutrition situation in the country has worsened and malnutrition rates remain high, with 320,000 children under age 5 acutely malnourished, of which 50,000 are severely acutely malnourished and at the risk of death. The ongoing drought continues to be the main driver of humanitarian crisis in Somalia, and the analysis suggests that the current crisis is likely to intensify during the coming months and due to the projected below-average Gu rainfall 2017. The likelihood of a famine remains real should Gu rainfall fail and delivery of humanitarian assistance is hampered to people in need (FESNET/FSNAU 16 Jan 2017).

Crop production was poor in HirShabelle as the Shabelle River level in Hiraan region has reached the lowest in two consecutive dry seasons of 2015 and 2016 and therefore unable to support irrigation farming. Downstream in Jalalaqsi, Mahaday, Jowhar and Balcaad districts, the river has dried up pushing the prices of water and food up. Of the four main livelihood groups, namely the pastoral, agro-pastoral, riverine

(cropping) and urban, pastoralists are most affected because they have the least options of coping with shocks. Already, some 80,000 pastoralists have migrated from Belet Weyne, Mudug, Galgaduud, Middle Shabelle regions and Zone five of Ethiopia to Matabaan, Maxaas and east of Belet Weyne district of Hiraan region. These areas have some pasture and water as they received some rains in November. However, women, children and the elderly are left behind with no limited or no food and water. Both Hiran and Middle Shebelle have been hotspots for AWD/Cholera outbreak for the last two months. Some 150 cases were recorded in Middle Shebelle while some 60 cases were seen in Hiraan only in the last two weeks o

2. Needs assessment

The 2016 Gu FSNAU biannual Food security and Nutrition assessment surveyed nutritional status of children under the age of 5 indicated that national Global acute Malnutrition and Severe Acute Malnutrition prevalence during Gu 2016 were 14.3 percent and 2.9 percent respectively. Although nutrition information was not collected in Jalalaqsi due to access issue, the situation is predicted as being in critical phase in all 3 livelihood zones cutting across Jalalaqsi. The food security situation has deteriorated in most rural livelihoods of Hiran region in this Gu 2016 season. In July 2016, the acute food insecurity area classification for pastoral livelihoods (Hawd and Southern Inland) of Hiran region remained Minimal (IPC Phase 1) and riverine and agropastoral livelihoods were classified as Stressed (IPC Phase 2), the situation has since rapidly deteriorated to and is predicted to be in crisis state across the 3 livelihood zones (FSNAU,2016). Severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) among children <5 years and pregnant and lactating women is a major concern in Hiran region where the nutrition situation has deteriorated to very critical levels. In Gu 2016 assessment, the nutrition assessment conducted in Beletweyne District, which neighbours Jalalaqsi, showed a GAM prevalence of 15.6 percent and a SAM prevalence of 4.5 percent, indicating Critical levels. GAM prevalence in Jalalaqsi is predicted to be critical to very critical considering the fact that there has been no nutrition intervention in the area since April 2016. Health partners working in the area have do not nutrition integrated in their health services, leaving the population vulnerable to malnutrition (SOADO,2016). SOADO was implementing nutrition interventions in the area but unfortunately, no partner has taken up the role since the program ended in April 2016.

The health service provision in Jalalaqsi district is very weak and lacking an essential preventive efforts such as EPI and health education that covers important aspects like appropriate Infant and young child feeding and hygiene promotion. The measles immunization coverage was very low and seasonal measles outbreak in Jalalaqsi and its rural villages appear too common. In addition, the deepening drought and acute water shortages have led to an increased incidence of acute watery diarrhea (AWD)/cholera outbreaks, which have already been reported in many part of the district. There is gap in health service provision in some parts of the district which is contributing factor to the high malnutrition rates in the areas. This is made worse by the lack of nutrition interventions.

SOADO would therefore like to intervene with integrated nutrition services in the area , through 2 fixed and 4 mobile sites, with strong link with ongoing health , WASH and food security interventions to ensure reduction of morbidity and mortality related to malnutrition even with the backdrop of the impending famine.

3. Description Of Beneficiaries

Beneficiaries will come from among Agro-pastoral, Pastoral, riverine communities and urban poor, who are living in Jalalaqsi district and satellite villages in the rural area. The direct beneficiaries are 7505 of boys and girls, who will benefit from screening and treatment for severe acute malnutrition, and or deworming, micronutrient supplementation and vaccination. 3377 pregnant and lactating women will also benefit from IYCF education and support, micro nutrient supplementation and vaccination. While there is expected some influx from the adjacent rural communities that seek health and nutrition in the project areas. Indirect beneficiaries will mostly benefit from health education , that will be extended to them through the CHW, and to caregivers who will accompany children for treatment.

The project staff (13 female and 27 men) will primarily target children 6-59 months (427 boys and 420 girls) with screening and Treatment of SAM cases, and pregnant and lactating women (PLW) with education, support and micro nutrient supplementation. Our Community health workers (12 female and 4 men) will carry out routine screening , as part of their day to day activities, but will also be involved in mass screening which will be done Quarterly. Project staff and CHW will benefit from training offered by the project.

4. Grant Request Justification

The emergency nutrition intervention for the drought affected areas of Jalalaqsi district is essential to save life of 7505 boys and girls under the age of five as well as 3377 pregnant and lactating women.

The project will cover cluster objective 1,2 and 3, which look at providing life saving interventions, primary prevention of malnutrition and disease and capacity building for communities and staff. These interventions will also work at reducing negative impact of prevailing drought in the district and its satellite villages, thus saving lives and contributing to allocation strategy 1.

Project interventions will include treatment of uncomplicated severe acute malnutrition among children 6-59 months, provision of basic nutrition service package which will include: vaccination with measles, micro nutrient supplementation and deworming for both children and pregnant and lactating women and children 6-59 months, health education including hygiene promotion and infant and young child feeding education and counseling , including breastfeeding support , all these while creating strong linkage with health WASH and food security interventions to address underlying causes contributing to malnutrition.

The project will create job opportunities for qualified personnel in the drought affected areas. We also anticipate hire nutrition staff and community health workers from the local community as per available capacity. If this is done earning from salaries will go along way in enhancing access to food thus reducing household food insecurity, ultimately boosting nutrition status of women and children.

5. Complementarity

SOADO has a food security project in Jalalaqsi district since 2008. The organization is a member of the nutrition cluster since 2008, and has also been running nutrition projects in the area with the last having ended in April 2016 since 2010. During that time SOADO has treated both moderate and severe malnutrition, and promoted infant and child care programmes. SOADO established Burweyne MCH and delivered services for children and mothers in these rural areas. It has therefore gathered enough experience delivering services in challenging environment. To scale up of the humanitarian emergency nutrition interventions in the area by setting up new sites will therefore not be a challenge for the organization. SOADO is conversant with the area and its population having worked there for more than a decade. The organization also has a good relationship with health partners in the area and will refer as appropriate and follow up referrals to ensure treatment for malnutrition continues alongside medical treatment.

SOADO NGO

LOGICAL FRAMEWORK

Overall project objective

To reduce the risk of mortality and morbidity associated with moderate and severe malnutrition in children under five years, pregnant and lactating women in Jalalaqsi district and its satellite villages.

Nutrition							
Cluster objectives		Strategic Response Plan (SRP) objectives			Percentage of activities		
Strengthen lifesaving preventive nutrition services for vulnerable population groups focusing on appropriate infant and young child feeding practices in emergency, micronutrient interventions and optimal maternal nutrition.		Somalia HRP 2017			70		
Strengthening robust evidence based system for nutrition with capacity in decision making to inform need-based programming		Somalia HRP 2017			20		
Establish integrated nutrition programs between and across relevant sectors through enhanced coordination and joint programming including nutrition sensitive actions		Somalia HRP 2017			10		
<p>Contribution to Cluster/Sector Objectives : The nutrition intervention in Jalalaqsi seeks to address the objectives 1,2 and 3 of the cluster objectives, which is live-saving and preventive intervention that focus an infant and child feeding practices and pregnant and lactating women as well as robust implementation capacity to deliver the programme to the vulnerable and affected population. the project will contribute to save-life of 7525 boys and girls under the age of five and 3377 pregnant and lactating women in Jalalaqsi and its satellite villages</p>							
Outcome 1							
Outcome1: Malnourished children under five(427 boys and 420 girls) in eastern and western part of Jalalaqsi district of Hiran region cured.							
Output 1.1							
Description							
Access, identification and treatment of children 6- 59 months (427 boys and 420 girls) with severe acute malnutrition through 2 fixed and 4 mobile OTPs							
Assumptions & Risks							
There will be security and area will be accessible.							
Activities							
Activity 1.1.1							
Standard Activity : Community screening for malnutrition and referral							
Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers							
Activity 1.1.2							
Standard Activity : Treatment of severe acute malnutrition in children 0-59months							
Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	Nutrition	Number of children screened for malnutrition					7,505
Means of Verification : CHW reports Monthly reports							
Indicator 1.1.2	Nutrition	Number of children (6-59months) and pregnant and lactating women admitted in treatment programmes					847
Means of Verification : - Monthly reports							
Outcome 2							
Enhanced Basic Nutrition Service Package to beneficiaries (7505 Boys &Girls and 3377 PLW) OTP in eastern and western part of Jalalaqsi district of Hiran region							
Output 2.1							
Description							
Basic nutrition service package activities provided for 7505 Boys &Girls and 3377 PLW in eastern and western part of Jalalaqsi district of Hiran region							
Assumptions & Risks							
- Security situation will remain stable -supplies will be provided by UNICEF in time							
Activities							
Activity 2.1.1							
Standard Activity : Deworming							

Deworming of 7505 children (boys and girls) > 1 year bi annually							
Activity 2.1.2							
Standard Activity : Infant and young child feeding promotion							
- Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community. -Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding							
Activity 2.1.3							
Standard Activity : Supplementation Vitamin A							
Providing vitamin A supplementation to 7505(3865 boys and 3640girls) children > 6 months							
Activity 2.1.4							
Standard Activity : Multiple micronutrients supplementation for pregnant and lactating women							
- Provision of multiple micro nutrients for 3377 PLW							
Activity 2.1.5							
Standard Activity : Vaccination at nutrition centres							
Vaccination of children (3002 boys and girls) under 2 years with measles and penta 3 vaccines from nutrition sites							
Activity 2.1.6							
Standard Activity : Nutrition health and Hygiene promotion							
Conducting 192 nutrition health and hygiene promotion sessions (1 per week) in all 6 nutrition sites							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	Nutrition	Number of children receiving Albendazole for deworming bi annually					7,505
Means of Verification : -Monthly report -Site reports							
Indicator 2.1.2	Nutrition	-Number of PLW educated and counselled on optimal IYCF in all sites and in the community					3,377
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					7,505
Means of Verification : _ EPI reports - Monthly reports							
Indicator 2.1.4	Nutrition	Number of PLW receiving multiple micronutrients					3,377
Means of Verification : - Monthly reports							
Indicator 2.1.5	Nutrition	Number of children under 2 years vaccinated with measles and penta 3					3,002
Means of Verification : - EPI reports - MOnthly reports							
Indicator 2.1.6	Nutrition	Number of Nutrition, Health and Hygiene Promotion Sessions conducted					192
Means of Verification : - Session briefs - Monthly reports							
Outcome 3							
Capacity of staff to deliver nutrition services to children 6-59 months and PLW developed							
Output 3.1							
Description							
Capacity of staff to deliver integrated nutrition services with basic nutrition service package improved							
Assumptions & Risks							
- Security will be stable - All staff will be available and in good health							
Activities							
Activity 3.1.1							
Standard Activity : Capacity building							
Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)							
Activity 3.1.2							
Standard Activity : Capacity building							

Training of 31 personnel, 15 project staff (6 male and 9 female) and 16 community based (4 male and 12 female) staff on nutrition health and hygiene promotion

Activity 3.1.3

Standard Activity : Capacity building

Training of 31 personnel, 15 project staff (6 male and 9 female) and 16 community based (4 male and 12 female) staff on infant and young child feeding (IYCF) promotion and support

Activity 3.1.4

Standard Activity : Capacity building

Training of 14 project staff (7 male and 7 female) in expanded program for immunization (EPI)

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	Nutrition	Number of male and female Staff/Community Health Workers/outreach workers trained on the management of acute malnutrition					56
Means of Verification : Training and quarterly report							
Indicator 3.1.2	Nutrition	Number of male and female Staff/Community Health Workers/outreach workers trained on Nutrition Health, Hygiene Promotion					31
Means of Verification : Training reports and quarterly reports							
Indicator 3.1.3	Nutrition	Number of male and female Staff and Community Health Workers/outreach workers trained on infant and young child feeding promotion and support					31
Means of Verification :							
Indicator 3.1.4	Nutrition	Number of male and female Staff and Community Health Workers trained on Expanded program for immunization (EPI)					14

Means of Verification : Training reports, photos, quarterly reports

Additional Targets :

Indicator

- 1. < 15% of the annual SAM estimated caseload admitted to SC for management of severely acute nutrition among U5 children.
- Target 127 boys and girls under age of five

M & R

Monitoring & Reporting plan

Monitoring Indicators:

The project outputs and activities will be closely monitored. Monitoring tools indicated will be used for this purpose. Teams will be expected to produce weekly reports, which will later be compiled into monthly reports to be shared with Nutrition cluster, UNICEF and HMIS. these will monitor all program performance indicators , drawing trends and analyzing implication of each. Besides this the monitoring and evaluation officer together with the project manager will ensure quality of services through regular field visits and accompanying mobile teams to their sites. The two will also offer supportive supervision for the teams. Monitoring of quality of service given to beneficiaries will also be done through a feedback and complaint mechanism which seek to determine quality of service being offered by staff. The logistics officer will monitor stock status and report to the project manager on a weekly basis. Monitoring use of RUTF will be done by ensuring beneficiaries return used sachets so limit access of the therapeutic food to the market. All monitoring information will be analyzed periodically and shared with the nutrition cluster and also used by the project to further improve service and operations. Monthly reports will draw lessons learned and share with teams who will scale up the good and correct what was not working well.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers	2017			X	X	X	X	X	X	X			
Activity 1.1.2: Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)	2017			X	X	X	X	X	X	X			
Activity 2.1.1: Deworming of 7505 children (boys and girls) > 1 year bi annually	2017			X	X	X	X	X	X	X			
Activity 2.1.2: - Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community. -Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding	2017			X	X	X	X	X	X	X			

Activity 2.1.3: Providing vitamin A supplementation to 7505(3865 boys and 3640girls) children > 6 months	2017			X	X	X	X	X	X	X				
Activity 2.1.4: - Provision of multiple micro nutrients for 3377 PLW	2017			X	X	X	X	X	X	X				
Activity 2.1.5: Vaccination of children (3002 boys and girls) under 2 years with measles and penta 3 vaccines from nutrition sites	2017			X	X	X	X	X	X	X				
Activity 2.1.6: Conducting 192 nutrition health and hygiene promotion sessions (1 per week) in all 6 nutrition sites	2017			X	X	X	X	X	X	X				
Activity 3.1.1: Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)	2017													
Activity 3.1.2: Training of 31 personnel,15 project staff (6 male and 9 female) and 16community based (4 male and 12 female)staff on nutrition health and hygiene promotion	2017													
Activity 3.1.3: Training of 31 personnel, 15 project staff (6 male and 9 female) and 16community based (4 male and 12 female)staff on infant and young child feeding (YCF) promotion and support	2017													
Activity 3.1.4: Training of 14 project staff (7 male and 7 female) in expanded program for immunization (EPI)	2017													

OTHER INFO

Accountability to Affected Populations

The project has been designed participatory mechanism, where beneficiaries are consulted during the assessment, implementation period. Selected community members will be part of the project management team and SOADO will provide hotline number where any one of the beneficiaries can report any complains during implementation period. The programme will public announced and planned activities will posted in the villages centers.

The project field officers and health workers are based in the project site while other executive staff monitor the program periodically. Project outreach teams will actively be involved in screening the children at village centers in order to find the malnourished individuals and refer them to the most appropriate program. If a child is found to be severely malnourished without any medical complication then should be referred to the nearest OTP center. If a pregnant mother in 2nd or 3rd trimester or a child 6 -59 months is moderately malnourished will be referred to nearest TSFP site. The project performance will be reviewed and analyzed every month and six month by the management team, local community and UNICEF.

Implementation Plan

The project implementing team will establish two fixed site for IMAM/OTP and four outreach OTP service provision benefiting 7505 U5 Children and an estimated SAM caseload of 847 children in the age of 6-59month in Jalalaqsi district and its satellite villages. the project will commence immediately after signing the agreements.

Children identified as severely malnourished (MUAC <11.5cm and/or W/H <-3 z-score) with medical complication or those showing fairlie to respond will be referred to Jowhar SC for rehabilitation. Those without any complication will be admitted for treatment at our sites. the project will integrate basic nutrition service package activities like Micro nutrients supplementation and deworming for PLW and children under 5, Vaccination with penta 3 and measles for children below 24 months , nutrition health and hygiene promotion and YCF promotion and support for PLW and community through both the facilities and CHW. Community component will be strengthened by recruitment of CHWs and working closely with various community groups with great influence.

Project outreach teams will actively be involved in screening the children at community level in order to detect earlier the malnourished cases and refer them to the most appropriate program. The project manager and M and E officer will monitor the teams regularly. The programme performance will be reviewed and analysed monthly, quarterly, and annually by SOADO and community representatives, UNICEF and OCHA.

The project will be implemented in close consideration and collaboration with all relevant local authorities, local communities and NGOs as well as other related projects in the region. SOADO will implement by employing local project personnel, who will assume overall responsibility for successful implementation of the project activities and achievement of planned project outputs. The project board will be responsible for ensuring overall guidance of the project and delivery of its outputs and outcomes. Project manager and Nutrition staffs will implement day to day project activities under the overall guidance of the programme coordinator and executive direct of the organization. The role of PMU will be to a) ensure overall project implementation, management, monitoring b) facilitate communication and networking among key stakeholders c) organize the meetings of the project board, and d) communicate regularly with representative from the funding agencies and local community and regional authorities

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
Mercy-USA	It operates in Bulobutro and shares information with SOADO about the movement of communities living on the border lines between the two districts
WARDI	It majorly works in the health sector and shares information on children under the age 5, pregnant and lactating women
UNICEF	SOADO has been nutrition partner with UNICEF since 2011 and meet regular to implement PCA in Jalalaqsi district
Nutrition cluster	engage with cluster partners and coordination team, especially in information sharing and complementing other partners efforts

SHF	Will report to them directly 2 times during the project period, and monthly through the cluster. The project will be delivered on their behalf
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Environment Marker Of The Project

A: Neutral Impact on environment with No mitigation

Gender Marker Of The Project

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

Justify Chosen Gender Marker Code

The nutrition needs of children under 5 years (both girls and boys) , lactating and pregnant women have been analyzed and integrated well in the activities and outcome of the project. The project therefore will significantly contribute to gender equality. At each stage of response, SOADO team will be as much gender balanced as possible. more than 3/4 of CHW will be women as because they will be visiting households regularly and also reaching women as main targets. This is culturally acceptable. Similarly SOADO will try to ensure that at least 30% of the project staff members will be women. Despite the fact that the main beneficiaries of the project are children under 5 and PLW, the project will strive to reach all community groups as their role in fighting malnutrition is critical. Willing fathers of malnourished children and grandmothers will also be targeted as they remain the main decision makers on matters feeding for children. Religious and community leaders will also be cooperated into project activities as key opinion figures in the community. Siblings of malnourished children will also be targeted with education so that they can reinforce key messages relating to prevention of malnutrition. The project will try to ensure that specific roles of different community groups are in cooperated in the fight against malnutrition.

Protection Mainstreaming

The project incorporates protection principles and promotes meaningful access, safety and dignity in humanitarian aid; it also ensures that protective impact of aid programming is maximized. The project directly addresses Do no Harm principles by ensuring extensive communication with the community (including leaders, women, youth, and children) to determine the needs that can best be supported by SOADO in the implementation period. Additionally, issues such as the hiring of staff, the procurement of materials, and the distribution of nutrition and other items will be looked at in a manner that directly address the context and maintains the Do no Harm principles by not discriminating against any specific populations/clan or group and by being aware of the current situation of the project target areas. The project will also increase access to nutrition services by increasing number of visits by mobile teams to remote communities , so that the vulnerable women and children are not exposed to dangers , including sexual violation as they travel long distances in search of assistance.

Country Specific Information

Safety and Security

Hiran region particularly Jalalaqsi district is one of the areas that the civil war affected. Clashes for the control of the districts occurred between the federal government troops supported by the AMISOM troops and armed Islamist militia. Jalalaqsi district fell in the hands of the AMISOM and government troops in 2013. Since that time, the district and its satellite villages has been under the control of the AMISOM and FG troops although this district has undergone a critical time where insurgents imposed embargo on the population in liberated towns and villages. Within this framework the security situation in Jalalaqsi remains stable and predictable. The road between Mogadishu and Jalalaqsi is open and accessible now and supply can reach safely to the Jalalaqsi district and other project target areas villages.

For risks related to the security situation, SOADO has developed a Contingency Planning Process which contains an analysis of the risk management process. For the risk related to the engagement and collaboration with local authority and community, SOADO will respect the humanitarian principles and organizational commitments to the Code of Conduct.

Access

SOADO is present in Jalalaqsi district, it has recently completed Nutrition project with UNICEF, and has fixed OTP center in Town. rural area along the river bank are accessible and so far four sites identified for the mobile team are accessible. SOADO will monitor the access to the target area and share with the funding and cluster coordinators if any change happens.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
Staff and Other Personnel Costs							
1.1	Nutrition coordinator	D	1	2,000.00	8	50.00	8,000.00
	<i>The person, based in Nairobi will oversee the project providing technical support in project implementation design and redesign if need be. Will also network and partner with key stakeholders at that level, and participate in cluster activities at that level.</i>						
1.2	Qualified Nurses	D	6	400.00	8	100.00	19,200.00
	<i>These will also lead the Outpatient therapeutic programme team. They will oversee the running of the site, Observe children and diagnose medical complications, admit and discharge children, refer and report. The person will oversee Outpatient Therapeutic feeding Program at the site. 1 per team</i>						
1.3	Nutrition Screeners	D	6	150.00	8	100.00	7,200.00

	<i>These will screen all children and Pregnant and lactating women coming to the site using both Mid upper arm circumference and refer to the nurse for decision.</i>						
1.4	Nutrition registrars	D	6	150.00	8	100.00	7,200.00
	<i>These will collect data on all who come to the site and are admitted. They will also ensure the records are updated each time beneficiaries visit the site; all registers relating to Outpatient therapeutic programme activities will be handled by these.</i>						
1.5	Nutrition distributors	D	6	100.00	8	100.00	4,800.00
	<i>These will be in charge of distributing supplies to beneficiaries as prescribed. They will also keep a record of the same and share with the logistics officer daily.</i>						
1.6	Infant and Young child feeding and Nutrition health and hygiene promotion IYCF / NHHP educators	D	6	400.00	8	100.00	19,200.00
	<i>These will give Infant and young child feeding education and provide individual counseling to mothers and care givers. the person will also provide Nutrition health and hygiene education in site. They will also ensure that staff and beneficiaries alike adhere to hygiene and sanitation practices in the site. 1 per site.</i>						
1.7	Community health workers (CHWs)	D	15	150.00	8	100.00	18,000.00
	<i>Community health workers are necessary for campaigning, implementing and community awareness. 15 Community health workers for 8 moths period with 150 US dollars salary each.</i>						
1.8	M&E officer	D	1	600.00	8	40.00	1,920.00
	<i>He will monitor the project and give periodic reports on the progress. He will monitor all aspects of the project from staff attendance , performance indicators,achievement of objectives and use of supplies. He will also do a process evaluation and end term evaluation.</i>						
1.9	Expanded program for immunisation (EPI) supervisor	D	1	400.00	8	20.00	640.00
	<i>S/he will oversee Expanded programme of immunisation (EPI) activities, train the EPI team, request for supplies, provide guidance and supportive supervision and request for supplies from the cold chain managers</i>						
1.10	Logistic officer	D	1	350.00	8	70.00	1,960.00
	<i>S/he will do daily logistic tracking of supplies, equipment, cars and truck. coordinations. one Qualified logistic officer for period of 8 months having a salary of 300 dollars per month</i>						
1.11	Store keepers	D	1	180.00	8	100.00	1,440.00
	<i>Use of a store needs someone responsible for supplies and maintain store records. Storekeeper will also be required to assist in the ware house dispatching and loading of supplies every week. He will also work with the logistics officer to ensure stores in the two fixed sites are well maintained and replenished.</i>						
1.12	Expanded Program for Immunisation EPI auxillary nurse	D	6	250.00	8	100.00	12,000.00
	<i>These will administer vaccines, request for them and report. 1 per team</i>						
1.13	Project manager	D	1	1,000.00	8	100.00	8,000.00
	<i>The person will oversee the day to day running of the project. Ensuring all goes well and coordinating activities. He will be based in Jalalaqsi and also provide technical guidance and direction.</i>						
	Section Total						109,560.00
Supplies, Commodities, Materials							
2.1	Warehouse rental	D	1	500.00	8	100.00	4,000.00
	<i>one warehouse facility in the project area to store Nutrition supply for 8 months.</i>						
2.2	Integrated Management of Acute Malnutriton (IMAM) Training of Community health workers and refreshment courses	D	1	4,282.20	1	100.00	4,282.20
	<i>Training of the new teams on Integrated management of acute malnutrition (IMAM). cost will include cost of venue, food perdiem , facilitator's fee and training material.56 participants will be trained including all project staff 40 , community based staff 15 and Project manager.Please refer to BoQ</i>						
2.3	Infant and Young child feeding (IYCF)Training for he community health workers and refereshment	D	1	3,372.20	1	100.00	3,372.20
	<i>Training of the new teams on Infant and young child feeding (IYCF). cost will include cost of venue, food perdiem , facilitator's fee and training material.Participants will include nurses6,CHW 15,NHHP/IYCF officer 6,Project manager 1,M and E 1, EPI supervisor 1 and facilitator 1. Please refer to BoQ</i>						
2.4	Expanded Program for Immunisation (EPI) training	D	1	1,497.80	1	100.00	1,497.80
	<i>Training of the new team onExpanded programme of immunisation (EPI) and vitamin A supplementation. cost will include cost of venue, food perdiem , facilitator's fee and training material. Participants will include EPI supervisor 1, EPI nurses 6, OTP Nurses (Team leaders) 6, and project manager.Please refer to BoQ</i>						

2.5	Nutrition health and hygiene promotion (NHHP) training	D	1	2,542.20	1	100.00	2,542.20
	<i>Training of the new team, both facility and community based, on nutrition health and hygiene promotion (NHHP). cost will include cost of venue, food per diem, facilitator's fee and training material. Participants will include nurses 6, CHW 15, NHHP/IYCF officer 6, Project manager 1, M and E 1, EPI supervisor 1 and facilitator 1. Please refer to BoQ</i>						
2.6	water for site use	D	1	1,200.00	1	100.00	1,200.00
	<i>Water to be used by beneficiaries and teams for hand washing and drinking. Beneficiaries will need clean water for drinking and for use during appetite test. Each of the 6 teams team will use 250L per week. each liter cost USD0.025. This will cover about 210 beneficiaries per week.</i>						
	Section Total						16,894.40
Equipment							
3.1	Team equipments	D	1	5,596.00	1	100.00	5,596.00
	<i>Requirements to run the sites(Tents, chairs, mats, water storage equipment and tables). See BoQ attached.</i>						
	Section Total						5,596.00
Travel							
5.1	Travel program manager - Nairobi to field for supervision. See BoQ attached.	D	1	1,760.00	1	100.00	1,760.00
	<i>Nutrition coordinator travels to Jalalaqsi for supervision and technical support. He will join with the UNICEF supportive supervision team team during their visits. Visits will be at the onset of the project and at end stage. The visit will also be used a opportunity to evaluate the project.</i>						
5.2	Vehicle for hire	D	2	1,400.00	8	100.00	22,400.00
	<i>Vehicles will be required for mobile team covering Afgooye, Carishley, Dirgoyes and Baqdaad Bari. These will transport both team members and supplies to the various mobile sites, some villages are very far in remote areas.</i>						
	Section Total						24,160.00
General Operating and Other Direct Costs							
7.1	Office rent	D	1	500.00	8	100.00	4,000.00
	<i>Office rent for Jalalaqsi.</i>						
7.2	Office communication and internet	D	1	250.00	8	100.00	2,000.00
	<i>Offices need Telephones and internet to facilitate activities in the Jalalaqsi office. See BoQ attached.</i>						
7.3	Utilities	D	1	189.00	8	100.00	1,512.00
	<i>Electricity and water for jalalaqsi office use so accomplish duty smoothly. See BoQ</i>						
7.4	Office stationery	D	1	369.00	1	100.00	369.00
	<i>Stationery supplies for daily use for office operations. Pleases see BoQ</i>						
7.5	Bank fees	D	1	1,633.80	1	100.00	1,633.80
	<i>bank charges or bank transfer fees from main bank to district level is calculated based on 1% of from the total budget</i>						
	Section Total						9,514.80
SubTotal			72.00				165,725.20
Direct							165,725.20
Support							
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							11,600.76
Total Cost							177,325.96

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Hiraan -> Jalalaqsi -> Afgooye	12	31	587	645	605	1,868	<p>Activity 1.1.1 : Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers</p> <p>Activity 1.1.2 : Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)</p> <p>Activity 2.1.2 : - Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community.</p> <p>-Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding</p> <p>Activity 3.1.1 : Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)</p>
Hiraan -> Jalalaqsi -> Cariishley	13		563	644	607	1,814	<p>Activity 1.1.1 : Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers</p> <p>Activity 1.1.2 : Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)</p> <p>Activity 2.1.2 : - Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community.</p> <p>-Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding</p> <p>Activity 3.1.1 : Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)</p>
Hiraan -> Jalalaqsi -> Dirgoys	10		563	644	607	1,814	<p>Activity 1.1.1 : Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers</p> <p>Activity 1.1.2 : Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)</p> <p>Activity 2.1.2 : - Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community.</p> <p>-Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding</p> <p>Activity 3.1.1 : Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)</p>

Hiraan -> Jalalaqsi -> Jalalaqsi	40	563	644	607	1,814	<p>Activity 1.1.1 : Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers</p> <p>Activity 1.1.2 : Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)</p> <p>Activity 2.1.1 : Deworming of 7505 children (boys and girls) > 1 year bi annually</p> <p>Activity 2.1.2 : - Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community.</p> <p>-Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding</p> <p>Activity 3.1.1 : Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)</p> <p>Activity 3.1.2 : Training of 31 personnel,15 project staff (6 male and 9 female) and 16community based (4 male and 12 female)staff on nutrition health and hygiene promotion</p>
Hiraan -> Jalalaqsi -> Waasame	10	563	644	607	1,814	<p>Activity 1.1.1 : Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers</p> <p>Activity 1.1.2 : Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)</p> <p>Activity 2.1.2 : - Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community.</p> <p>-Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding</p> <p>Activity 3.1.1 : Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)</p>
Hiraan -> Jalalaqsi -> Baqdaad Bari	15	563	644	607	1,814	<p>Activity 1.1.1 : Screen 7505 (boys and girls) for severe acute malnutrition and referral of 1866 to targeted supplementary feeding and 127 to stabilization centers</p> <p>Activity 1.1.2 : Treatment of severe acute malnutrition among children under five 847 (427 boys and 420 girls)</p> <p>Activity 2.1.2 : - Educating 3377 pregnant and lactating women on optimal IYCF in all sites and in the community.</p> <p>-Individual Counseling of 240 pregnant and lactating women with non response children or children with difficulty in feeding</p> <p>Activity 3.1.1 : Training of 56 personelle, 40 project staff (27 male and 13 female) and 16community based (4 male and 12 female)staff on integrated management of acute malnutrition (IMAM)</p>

Documents

Category Name	Document Description
Budget Documents	SAMPLE OF boq.xls
Budget Documents	BOQs table-SOADO.xls
Budget Documents	BOQs table-SOADO.xls
Budget Documents	BOQs table-SOADO revised.xls
Budget Documents	SOADO BoQ revised 16-02-17.xls

Budget Documents	SOADO BoQ revised 20-02-17.xls
Budget Documents	SOADO BoQ revised 23-02-17.xls
Budget Documents	Final revised BOQ SOADO BoQ revised 27-02-17.xls
Budget Documents	Final revised BOQ SOADO BoQ revised 27-02-17-2.xls
Grant Agreement	HC signed SOADO GA 4605.pdf
Grant Agreement	HC & IP signed SOADO GA 4605.pdf