Project Proposal

Organization	CW (Concern Worldwide)							
Project Title	Improved Nutrition Interventio	ns for the Treatment of Acute Ma	alnutrition in Unity and C	entral Equator	ia States			
Fund Code	SSD-15/HSS10/SA2/N/INGO	654						
Cluster	Primary cluster			Sub cli	uster			
Project Allocation	2nd Round Standard Allocation	n	Allocation Category T	уре				
Project budget in US\$	500,000.00		Planned project durati	ion	6 months			
Planned Start Date	01/08/2015		Planned End Date		31/01/2016			
OPS Details	OPS Code	SSD-15/H/80812/R	OPS Budget		0.00			
	OPS Project Ranking		OPS Gender Marker					
Direct beneficiaries	complications. The children at IYCF-E interventions through malnutrition amongst children deteriorating further and also The community outreach com in order to identify children with malnutrition within the commu mobilisers in the centres. The and defaulting as well as educ	one additional OTP. The OTPs in dipregnant and lactating womer IYCF messages, trainings and in 0 to 23 months. BSFP will also be prevent the others from acute migronent, which entails the recruit hacute malnutrition on time and nity through use of MUAC tapes will also do home follow up for the tation on key hygiene messages vide integrated nutrition intervention.	n with moderate acute monother to mother group se implemented in Juba fall nutrition, especially tho ment of Community Nutrefer them to the nutrition and referral forms. This nose in the program to in to improve linkages bet	alnutrition are sessions and I for children 6 to ose who are murition Voluntee on OTP and TS is the active of actude defaulte tween WASH a	treated in TS hygiene educ o 59 months halnourished rs (CNVs), w BFP centres. case finding i er tracing and and nutrition	SFP centres. In addition cation to help prevent di- to help prevent children as a result of inadequat will be implemented on a The CNVs will both traine in which CNVs will work d gather information on re for better health outcom	beneficiaries will recesseases and acute who are malnourishe e dietary intake. large scale within the ed on identification of a closely with the come easons for absenteein	POC: acute
Direct Beneficialities	Beneficiary Summary	100	3971		11033	11066	26,170	
	Total beneficiaries include							
	Internally Displaced People	the following.	3971		11033	11066	26170	
	internally Diophassa i sopie	100			11000	11000	20.10	
Indirect Beneficiaries			Catchment Population	1				
Link with the Allocation Strategy	Concern is focused on service reduction of morbidity and malnutrition, treating moderate POCs Provide access to integrated This project aims to prevent in This will focus on screening a Ensure enhanced needs anal While a SMART survey has be	, management of acute malnutrities that are most crucial for ensurtality caused by malnutrition are and severe acute malnutrition a programs preventing undernutrition land trition, particularly for those not referral for malnutrition and programs of the nutrition situation and een carried out in Juba in June4, eresults and best practices are	uring the survival of disploongst children under 5 y and promotion of infant a display to the first and promotion of the first and promoting appropriate IYO enhanced monitoring alpropriate IYO enhanced monitoring induly, Concern will conductive and proper and the first and the firs	laced people a years of age a ind young child ent of girls and in community CF-E practices and coordination	and host com nd pregnant d feeding pra boys aged 0 outreach and s.	imunities. Nutrition active and lactating women (Postices to prevent malnum objectives to prevent malnum objectives to pregnant and behaviour change contest to the contest of the contest	LW) through screenin trition in the Juba and und lactating women, nmunication messagir	ng for Bentin
			Other funding Secure	d For the	Source		116	S\$
Sub-Grants to Implementing Partners			Same Project (to date	1			U	_
Sub-Grants to Implementing Partners			Same Project (to date	e)	OFDA		336,677	7.00
Sub-Grants to Implementing Partners			Same Project (to date	e)	OFDA UNICEF			
Sub-Grants to Implementing Partners			Same Project (to date	e)			336,677	8.00
Sub-Grants to Implementing Partners Organization focal point contact details	Name	Title	Same Project (to date	(a)		ı	336,677 394,968	8.00
	Name Feargal O'Connell	Title Country Director	Same Project (to date	(3)	UNICEF	l nsudan.cd@concern.ne	336,677 394,968 731,648	8.00

BACKGROUND INFORMATION

 Humanitarian context analysis.. Humanitarian context: Describe the current humanitarian situation in the specific locations where this project will be implemented

Since the outbreak of the on-going conflict in December 2013, millions of people in South Sudan remain engulfed in a protracted humanitarian crisis. Though the security situation in much of the country has since stabilized, conflict has persisted in three states – Jonglei, Upper Nile and Unity. The situation has deteriorated significantly in Unity in recent weeks and months, as armed conflict in the south of the state around Nhialdiu, Koch, Leer and Adok towns resulted in the evacuation of humanitarian agency staff while taking a significant toll on civilian life and property. As a consequence of the continued violence, the number of displaced people continues to grow. By May 2015, 1.52 million people had been internally displaced, including 437,600 in Unity State and 74,100 in Central Equatoria State, where Concern has been providing multi-sectoral humanitarian assistance since early 2014. A verification exercise conducted in May indicated that the registered population in the Bentiu PoC sites in Rubkona County, Unity State, has grown from 43,000 in December 2014 to 62,747 (19,737 households), largely as a result of new arrivals from Rubkona (49%) and Guit (35%) counties, while the population in the Juba PoC sites is 34,420. Currently, the population is estimated to have reached 105,000 people in July.

While famine was narrowly averted in South Sudan in 2014, food insecurity remains a significant challenge in 2015. In the conflict-affected states, crop production and market functioning have been severely disrupted by the conflict and cereal deficits are significant - according to the 2015 FAO and WFP Crop and Food Security Assessment report, 34% of households did not cultivate staple crops in Unity in 2014, and the harvested cereal area in the state dropped by around 73%. The Famine Early Warning System Network (FEWS NET) projects that the size of the population in need of emergency food assistance will increase to 3.5 million between April and June, representing a 40% increase from March. Juba was classified at the 'stressed' level of food insecurity during the January to March period. Moreover, there are concerns that urban food insecurity may increase significantly in the context of a rapidly deteriorating macro-economic environment. In combination with the related disruptions in the supply of imported fuel and associated increases in transport costs, inflation has caused above-average staple food price increases which are likely to remain between June and September. The FEWS NET report also highlighted the risk that a major macroeconomic shock may occur between now and September as a result of a balance of payments crisis or the depletion of foreign currency reserves. Food shortages, along with poor health and water systems, are a significant driver of malnutrition, which is a primary cause of mortality among children under five.

In May 2014, Concern conducted a Rapid Nutrition Assessment (RNA) in Juba UN House (PoC1). The MUAC assessment revealed a GAM and SAM of 14.2% and 3.5% respectively. Currently, Concern is operating three OTPs/TSFPs in PoC 1, PoC 2 and PoC 3 in UN House. While current data on malnutrition rates in Juba is ladking (Concern conducted a SMART survey in Juba and data will be available after validation), admissions remain relatively high (50 severely malnourished children and 106 moderately malnourished children were admitted to Concern's Juba program in April). Moreover, given the aforementioned

macroeconomic developments, it is likely that mainutrition prevalence will increase. The SMART survey results will give an indication of the situation in the POCs in

The situation in Bentiu was assessed by an Inter-Agency Rapid Needs Assessment (IRNA) conducted in January 2014 and by Concern's own Rapid Needs Assessment (RNA) in February 2014.

2. Needs assessment. Explain the specific needs of the target group(s), explaining existing capacity and gaps. State how the needs assessment was conducted, list any baseline data and explain how the number of beneficiaries has been developed. Indicates references to assessments such as Multi-cluster/sector Initial Rapid Assessments (MIRA)

Food insecurity and the lacking availability of adequate sanitation and safe water services are key drivers of malnutrition in South Sudan, and both these drivers are being exacerbated by the on-going conflict and displacement. In Rubkona County, a mid-upper arm circumference (MUAC) assessment conducted in the PoC sites by UNICEF in February indicated a global acute malnutrition rate (GAM) of 9.3%, including a severe acute malnutrition (SAM) rate of 3.2%, among children of 6.59 months, and a SAM rate of 19.2% and MAM rate of 22% among pregnant and lactating women (PLW). A SMART survey led by Care International showed a GAM and SAM rates of 30.0% and 7.5%, respectively, in Mayom, 26.5% and 8.8% in Abiemnhom, and 23.4% and 5.3% in Pariang, It is likely that these high rates of malnutrition are linked to a reported increase in under-five mortality (in absolute terms) in the Bentiu PoC sites, where admissions to the outpatient therapeutic program (OTP) and targeted supplementary feeding programs (TSFP) have drastically increased in recent months. Note that a SMART survey planned by Concern for Bentiu in August will provide more definitive data on malnutrition and mortality. Moreover, it is anticipated that living conditions in Juba may deteriorate significantly, with growth in urban food insecurity, if the macro-economic context continues to decline. Concern will integrate nutrition interventions at the community level with a special focus on maternal and child health & nutrition, Infant & Young Child Feeding – in Emergency (IYCF-E), and community screening and referral, for better program outcomes. In addition to the high prevalence of malnutrition, capacity in the prevention and treatment of malnutrition is significantly lacking in South Sudan as a result of decades of conflict, which have undermined the training and education of health professionals and prevented the establishment of an effective, wide-reaching health system. Consequentially, there exists an urgent need to train and build the capacity of national staff among conflict-affected populations.

3. Description Of Beneficiaries

The nutrition beneficiaries will be identified in the community by the CNVs who will be trained by Concern Worldwide staff and who will work closely with the The nutrition beneficiaries will be identified in the community by the CNVs who will be trained by Concern vortowing start and who will work closely with the community mobilisers on active case finding. Children 6 to 59 months with acute mainutrition will be identified by MUAC screening using the CMAM guidelines cutoffs of <115mm as SAM, 115-<125mm as MAM and <230mm for PLWs. In the nutrition centres, further examination will be done for WHZ-scores where <-3z-scores will be admitted into OTP as SAM, between -3 and <-2z -scores will be admitted into TSFP as MAM and MUAC as explained above. Children with Oedema grade 1 (+) and grade 2 (++) will be admitted into OTP regardless of their WHZ scores. Children with odema grade 3 will be referred to the inpatient facility in POC1, IMC hospital in Juba and to the MSF and IRC stabilization centres in Bentiu.

The total number of beneficiaries targeted in the POCs in Un House are 8555 with the breakdown as below:

- SAM children 6-59 months=379, boys=190, girls=189
- MAM children 6-59 months=758, boys =379, girls=379
- MAM PLWs =216
- IYCF beneficiaries=1440 (pregnant women and mothers of infants 0 to 23months)

- Mother to mother leaders=80
 Mothers participating in mother to mother group sessions= 860
 Community Nutrition Volunteers=30 (15 male and 15 female where possible)
 CMAM and IYCF staff trainings= 25 (Male=20, female =5)
 Number of children screened for MAM and SAM in the community=6120

The total number of beneficiaries targeted in the Bentiu POCs are 17615 with the breakdown as below:
• SAM children 6-59 months=2493, boys=1294, girls=1199
• MAM Children 6-59 months=4917, boys =2343, girls=2574

- MAM PLWs =501
- IYCF beneficiaries=1440 (pregnant women and mothers of infants 0 to 23months)
- Mother to mother leaders=75
- Mothers participating in mother to mother group sessions= 1000
 Community Nutrition Volunteers=50 (25 male and 25 female where possible)
 CMAM and IYCF staff trainings= 50 (Male=40, female =10)

 Number of children screened for MAM and SAM in the community=15,000
 Children identified with SAM will be referred to the OTP centres where a nurse will do further medical and nutrition examinations, and those with complications will be referred to the stabilization centre-inpatient facility in POC 1. Those without complications will be admitted in the OTP and given treatment for a period of 6 to 8 weeks and be discharged on attaining the discharge criteria. Children and PLWs identified with moderate acute malnutrition will equally be referred to the TSP centres and be treated for moderate acute malnutrition. OTP management will be done according to the IPSAM guidelines for South Sudan, and TSFP management will be in accordance with CMAM guidelines.

Through the house to house active case finding, children identified with special conditions will be referred and followed up by the community mobilisers to ensure they get the appropriate treatment and management. Children with disabilities will be referred to Handicap international next to Concern Worldwide centres for further management as they continue to receive nutrition treatment.

4. Grant Request Justification

Food insecurity and the lacking availability of adequate sanitation and safe water services are key drivers of malnutrition in South Sudan, and both these drivers are being exacerbated by the on-going conflict and displacement. In Rubkona County, a mid-upper arm circumference (MUAC) assessment conducted in the PoC sites by UNICEF in February indicated a global acute malnutrition rate (GAM) of 9.3%, including a severe acute malnutrition (SAM) rate of 3.2%, among children of GAM and SAM rate of 19.2% and MAM rate of 22% among pregnant and lactating women (PLW). A SMART survey led by Care International Showed a GAM and SAM rates of 30.0% and 7.5%, respectively, in Mayom, 26.5% and 8.8% in Abiemnhom, and 23.4% and 5.3% in Pariang. It is likely that these high rates of malnutrition are linked to a reported increase in under-five mortality (in absolute terms) in the Bentiu PoC sites, where admissions to the outpatient therapeutic program (OTP) and targeted supplementary feeding programs (TSP) have increased in recent months. Note that a SMART survey planned by Concern for Bentiu in August will provide more definitive data on malnutrition and mortality

While current data on malnutrition rates in Juba is lacking (Concern has conducted a SMART survey in Juba in June/July), admissions remain relatively high (50 severely malnourished children and 106 moderately malnourished children were admitted to Concern's Juba program in April). Moreover, given the aforementioned macroeconomic developments, it is likely that malnutrition prevalence will increase, Concern is working with UNICEF and OFDA funding in both Bentiu and Juba. UNICEF is funding the majority of our critical life-saving nutrition services in Juba POCs. The funds requested from the CHF will be used to fill the funding gap and there will be no double-costing

5. Complementarity. Explain how the project will complement previous or ongoing projects/activities implemented by your organization.

Inside the Bentiu PoC sites Concern coordinates with other nutrition actors, and each PoC is assigned to different agencies. Concern will conduct nutrition activities in sectors 3 and 4 and 5 (we are awaiting confirmation for allocation of space in sector 5). Currently MSF is operating the only stabilization centre for all PoC sites. In Juba POC sites, Concern collaborated with the Ministry of Health in capacity building and the health partner, IMC, to refer SAM children with complications.

UNICEF is responsible for monitoring the overall nutrition response in Unity. All nutrition partners share weekly nutrition reports, and a summary of these is shared during the weekly Nutrition Cluster meeting at Bentiu level. All agencies conducting nutrition or related activities attend these meetings and share their weekly achievements and discuss the challenges faced. Action points and plans for upcoming activities are also compiled and shared through these meetings.

Concern will ensure that nutrition services are integrated with WASH and NFI/Shelter activities where possible. This will enhance the hygiene practices of mothers and caregivers of children in the nutrition program. In Bentiu, once security improves and activities resume can resume in town, Concern will ensure that nutrition activities are well coordinated and integrated with health partners and inclusive of the CHD.

In Juba, Concern collaborates with UN agencies and NGOs at national and sub-national level through the various clusters, working group and camp management meetings but also within the IDP camps mainly through referrals of patients from one to the other treatment type, joint assessment and screening exercises. Concern is also a member of the Nutrition Information Working Group.

LOGICAL FRAMEWORK

Overall project objective

The overall objective of this project is to contribute to a reduction of excess morbidity and mortality caused by malnutrition amongst children under 5 years of age and pregnant and lactating women (PLW) over a period of 6 months in Juba and Bentiu POCs. Concern Worldwide's strategy for this project will be to strengthen current project activities as well as scaling up in the Bentiu POC, with a strong focus on ensuring coordination with other relevant partners to achieve measurable and long-term sustainable results in the POCs. The project is strongly informed by both cluster and response plan objectives, and all components align with the strategic response plan. The project aims to provide SAM and MAM children under five years and MAM PLWs with life saving treatment in OTP and TSFP (with BSFP in UN House only). The project will focus on building the capacity of staff through various CMAM and IYCF trainings and supportive supervision. The project aims to reach caregiver's of children under five and PLWs with effective behaviour change communication to enhance mainutrition prevention knowledge amongst

Logical Framework details for NUTRITION

g		
Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
2015 SSO 1: Deliver quality lifesaving management of acute malnutrition for at least 60% per cent of SAM cases in girls and boys 0-59 months and at least 60 per cent of MAM cases in girls and boys aged 6-59 months, pregnant and lactating women, older people and other vulnerable groups	SO 1: Save lives and alleviate suffering by providing multi-sector assistance to people in need	40
2015 SSO 2: Increase access to integrated programmes preventing undernutrition for at least 30 per cent of girls and boys aged 0-	SO 2: Protect the rights of the most vulnerable people,	40

		older people and other vulnerable groups sis of the nutrition situation and enhanced monitoring and coordination of response	SO 3: Improv	r freedom of move self-reliance do by protecting ds	and coping o		20
itcome 1		ving management of acute malnutrition for at least 90% per cent of SAM cases in girls an ind pregnant and lactating women in the POCs in Juba and Bentiu	d boys 6-59 mo	nths and at leas	st 90% of MA	AM cases in gi	rls and boys
de	Description		ptions & Risks				
itput 1.1	Severely acute male	nourished children 6-59 months have access to quality in- and outpatient					
	treatment services	is a long simulation of the many many accounts to quality in the suspension					
Indicators	<u> </u>						
Code	Cluster	Indicator	End Cyc	le Beneficiarie	s		End- Cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	NUTRITION	Number of sites managing severe acute malnutrition without complications					5
	Means of Verification:	Weekly/monthly reports					
Indicator 1.1.2	NUTRITION	[Frontline services] [Treatment] Number of boys and girls aged 0-59 months with sevel acute malnutrition newly admitted for treatment	re		189	190	379
	Means of Verification:	OTP admission registers, Weekly and monthly reports					
Indicator	NUTRITION	% of children with SAM without complications treated in UN House and Bentiu POC					90
1.1.3	Means of Verification:	Admission OTP registers					
Indicator 1.1.4	NUTRITION	[Frontline services] [Treatment] Number of boys and girls 6-59 and months and PLW screened for acute malnutrition in a community		717	3060	3060	6837
1.1.7	Means of Verification:	,					
Indicator 1.1.5	NUTRITION	Programme Quality is within SPHERE standards - cure rate is above 75%					75
1.1.5	Means of Verification:	Weekly/monthly programme reports					
Indicator 1.1.6	NUTRITION	Programme Quality is within SPHERE standards - defaulter rate is below 15%					15
	Means of Verification:	Weekly/Monthly Programmatic reports					
Indicator 1.1.7	NUTRITION	Programme Quality is within SPHERE standards - death rate is below 10%					10
	Means of Verification:	Weekly/monthly programmatic reports					
Activities							
Activity 1.1	.1 Treatment of seve	re acute malnutrition without complications (OTP management)					
Activity 1.1	.2 Community outrea	ch activities (Active case finding, referral, follow up & home visits, mobilization, defaulter t	racing)				
tput 1.2	Moderately acute m	alnourished children 6-59 months and pregnant and lactating women have to					
Indicators							
Code	Cluster	Indicator	End Cyc	le Beneficiarie	s		End-
			Men	Women	Boys	Girls	Cycle Target
Indicator	NUTRITION	Number of sites managing moderate acute malnutrition without complications					5
1.2.1	Manage of Manifications	Washington with a second					
Indicator	Means of Verification:	Weekly/monthly reports % of children with MAM treated in UN House					90
1.2.2							· •
Indicator	Means of Verification:	Admission TSFP registers [Frontline services] [Treatment] Number of boys and girls aged 6-59 months with mode	erate		379	379	758
1.2.3		acute malnutrition newly admitted for treatment					1
	Means of Verification:	TSFP admission registers, Weekly and monthly reports					
Indicator 1.2.4	NUTRITION	Number of children screened within the community for SAM and MAM					6120
	Means of Verification:	, ,					
Indicator 1.2.5	NUTRITION	[Frontline services] [Capacity and emergency prepare] Number of healthcare workers trained on CMAM according to minimum requirements set by the cluster	5	20			25
	Means of Verification:						
Indicator 1.2.6	NUTRITION	Number of Community Nutrition Volunteers trained on identification and referral of acute malnourished individulas	ely				30
	Means of Verification:	Training reports					
Indicator 1.2.7	NUTRITION	Programme Quality is within SPHERE standards - cure rate is above 75%					75
	Means of Verification:	Weekly/Monthly Programmatic Reports					
Indicator 1.2.8	NUTRITION	Programme Quality is within SPHERE standards - defaulter rate is below 15%					15

Indicator	Means of Verification:	Weekly/Monthly Programmatic reports Programme Quality is within SPHERE standards - death rate is below 3%						3
1.2.9								3
	Means of Verification:	Weekly/Monthly Programmatic Reports						
Activities								
Activity 1.2.	Treatment for mode	erate acute malnutrition at TSFP centres.						
Activity 1.2.2	Capacity building for	r Concern nutrition staff on management of acute malnutrition						
come 2	Increase access to i	ntegrated programmes preventing under nutrition for at least 30 per cent of girl ups	s and boys a	ged 6-59 mor	nths, pregnant	and lactating	g women, olde	er people ar
le	Description		Assumption	ns & Risks				
put 2.1		en under five and pregnant and lactating women are reached with effective behavior change communication.						
Indicators								
Code	Cluster	Indicator		End Cycl	e Beneficiarie	es		End- Cycle
				Men	Women	Boys	Girls	Target
Indicator 2.1.1	NUTRITION	[Frontline services] [Prevention] Estimated number of children (6-59 months) supplementary foods through Blanket Supplementary Feeding Programmes (1260	1260	2520
	Means of Verification:	BSFP registers Monthly food distribution reports						
Indicator 2.1.2	NUTRITION	Number of Concern staff trained on IYCF						25
	Means of Verification:	Training Reports						
Indicator 2.1.3	NUTRITION	Number of mothers participating in Mother to mother group sessions						860
	Means of Verification:	Monthly reports Mother to mother registers						
Indicator 2.1.4	NUTRITION	Number of lead mothers trained on Key IYCF messages						80
	Means of Verification:	Monthly reports						
Indicator 2.1.5	NUTRITION	Number of care givers attending individual and group counselling sessions						1440
	Means of Verification:	Monthly reports						
Activities								
Activity 2.1.	Blanket supplemen	tary feeding for children 6 to 59 months with monthly rations in POC1 UN Hous	е					
Activity 2.1.2	2 IYCF activities (indi	vidual counselling sessions, group counselling sessions and mother to mother	support grou	ps).				
put 2.2	Ensure enhanced ne coordination of response	reds analysis of the nutrition situation and enhanced monitoring and onse						
Indicators								
Code	Cluster	Indicator		End Cycl	e Beneficiarie	s		End-
				Men	Women	Boys	Girls	Cycle Target
Indicator 2.2.1	NUTRITION	Attending Nutrition Coordination Meeting						6
	Means of Verification:	Cluster meeting minutes		'		1		
Indicator 2.2.2	NUTRITION	[Frontline services] [Capacity and emergency prepare] dness# of SMART su undertaken	rveys					1
	Means of Verification:	SMART survey report						

WORK PLAN

Project workplan for activities defined in the Logical framework

Activity 2.2.2

Conduct SMART survey

Activity Description (Month)	Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	De
Activity 1.1.1 Treatment of severe acute malnutrition without complications (OTP management)	2015							х	Х	X	х	х	Х
Activity 1.1.2 Community outreach activities (Active case finding, referral, follow up & home visits, mobilization, defaulter tracing)	2015							х	Х	Х	Х	Х	Х
Activity 1.2.1 Treatment for moderate acute malnutrition at TSFP centres.	2015							Х	Х	Х	Х	Х	Х
Activity 1.2.2 Capacity building for Concern nutrition staff on management of acute malnutrition	2015							х	Х	Х	Х	Х	Х
Activity 2.1.1 Blanket supplementary feeding for children 6 to 59 months with	2015							х	Х	х	Х	Х	Х

monthly rations in POC1 UN House										
Activity 2.1.2 IYCF activities (individual counselling sessions, group counselling sessions and mother to mother support groups).	2015				Х	Х	Х	Х	Х	X
Activity 2.2.1 Coordinating with Nutrition cluster and other sectors in order to pevent and improve services on management of acute malnutrition	2015				Х	Х	Х	Х	Х	Х
Activity 2.2.2 Conduct SMART survey	2015				Х	Х				

M & R DETAILS

Monitoring & Reporting Plan: Describe how you will monitor the implementation of each activity.

implementation of each activity.
Describe the tools you plan to use (checklist, photo, questionnaires, interviews, suggestion box etc.) in order to collect data and how you will store data. Explain the frequency type and protocol of reporting (how often do you report about what to whom?). State if, when and how you plan to evaluate your project.

Concern is committed to regular monitoring and evaluation (M&E) to ensure effective program management. In Unity State, an Area Coordinator (AC) has overall management for the achievement of deliverables, whilst maintaining quality, and retaining the strategic oversight of developments at the field site. Under the AC, an Emergency Nutritionist retains control of the project activities, managing the Project Officers and providing technical programmatic support. The program area also has a Base Manager, who is responsible for operational support to the project. In Juba, the programme is managed by an Emergency Nutritionist under direct supervision of the Programme Director – Emergency.

Standardized data collection tools and databases are developed and managed by the Emergency Nutritionist. Training, supervision and regular follow up support is given to field based staff to ensure quality data collection and feedback from supervision is shared with project staff to continue performance improvement. For all sectors, quantitative data, disaggregated by sex, age and IDP/host when relevant, will be collected and recorded on a weekly basis, and this is supplemented through qualitative data gained through focus group discussions with beneficiaries and stakeholders.

Concern has its own internal mechanisms for monitoring progress, and this will be bolstered by national Cluster-level reporting requirements. Monthly nutrition program review meeting with Concern's national staff will take place, in addition to a Concern mid-year program review by key management staff. An on-going monitoring and review of project progress will occur, with visits from Juba office (including the Programme Director - Emergency, Emergency Nutritionist, and Health & Nutrition Advisor, as well as Finance and Logistics support staff). Donor visits to review the project will also be supported, as will timely submission of all donor reporting requirements.

To strengthen the overall nutrition intervention, Concern is in close collaboration with other nutrition partners and under the leadership of UNICEF will conduct rapid MUAC assessments in Bentiu so that data on the prevalence of moderate and severe acute malnutrition is available on a monthly basis. This will ensure trends are visible and any deterioration of the situation can be responded to timely.

OTHER INFORMATION

Accountability to Affected Populations

Community consultation and participation are crucial aspects of Concern programme design processes and are critical in terms of ensuring success and promoting future sustainability. To this end, all potential interventions are discussed with community members in structured and non-structured forums. Concern's staffing structure is based largely on local staff, with the employment of international staff and relocatable national staff in strategic leadership and capacity building roles. This approach fosters community ownership and enables Concern to focus on the sustainability and appropriateness of interventions.

Concern's integrated CMAM program provides communities with the knowledge and tools needed to assume management of preventative and curative activities for acute malnutrition and to reduce the impact of any future nutrition crisis as well as assisting with the immediate response and the re-construction of temporary nutrition structures. Sustainability within the nutrition project is increased through a training and education program provided to CNWs, caregivers, traditional healers and local leaders. Concern also employs staffs from the target community who are expected to be a vital reference resource after the end the project. The education program includes critical subjects such as essentials of breast feeding, food preparation, and appropriate hygiene practices at household level, which will increase household resilience after the exit. Training of Concern staff from the target communities will assist in the continuation of best practices in the management of CMAM methodologies and treatment of malnourished beneficiaries. Mother to mother groups will be created and trained on IYCF within the target beneficiary community and are also expected to be supportive of their respective neighborhoods into the future.

Implementation Plan: Describe for each activity how you plan to implement it and who is carrying out what.

OTP activities will be implemented according to the South Sudan Integrated Management of Severe acute Malnutrition (IM-SAM) guidelines. OTP sessions will be conducted on a weekly basis with Ready-to-Use Therapeutic Food (RUTP) received from UNICEF through an in-country Partnership Cooperation Agreement (PCA) targeting children 6-59 months with Severe Acute Malnutrition (SAM) without medical complications. Concern will run 3 OTPs in Bentiu Sector 3 and 4 and 5 (sector 5 allocation of space to be confirmed) and 2 OTPs in UN House. The identification of children with SAM will be done through MUAC assessment and any child of 6-59 months with a MUAC of less than 11.5 cm and/or weight for height z-score=<-3 or Oedema +/++ will be assessed for medical complications. The MUAC assessment will be done both at the OTP centre and at household level through the outreach. Those without medical complications will be admitted to the OTP and will be given weekly rations of RUTF and routine medication including antibiotics, deworming and vitamin A supplementation according to the IM-SAM mutable in the contraction of the IM-SAM and the contraction of the IM-SAM a

In the Bentiu PoC sites, children admitted to the OTP will be referred to the TSFP once they are cured from severe acute malnutrition. In cases where they develop medical complications while in the OTP they will be referred to inpatient care provided by MSF. Once the medical complication is treated they will continue their nutritional rehabilitation as outpatients. In case malnourished children are presented at the OTP or TSFP with illnesses requiring medical attention but still having appetite and thus able to eat the therapeutic food, care takers will be advised to go to the nearest health center to have the child's health checked and any illness treated.

Concern will implement TSFP activities according to the South Sudan CMAM guidelines for treatment of moderately malnourished children 6 to 59 months and PLW in Bentiu Sector 3, 4 and 5 (allocation of space to be confirmed). TSFP sessions will be conducted every two weeks with food received from WFP through a Field Level Agreement (FLA), targeting children 6 to 59 months with a MUAC of 11.5 to 12.4 cm and/or weight for height z-scores =<-2 and >-3 and pregnant and lactating women from the 2nd trimester up to 6 months of lactation whose MUAC is less than 21 cm. Mothers/caregivers will be asked to bring their children for screening and subsequent referrals. The CNW and Outreach Volunteer will conduct active case finding and home visits, and will identify any children who are malnourished and they will be referred to the nutrition centres for admission.

IYCF-E activities will be undertaken through community mobilization and health education activities involving individual and group discussions on awareness, attitudes towards exclusive breast feeding and complementary feeding, promotion of mental health for mothers and malnourished children, and through the encouragement of mothers to take close care of their children.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
1. CARE	CARE also provides nutrition services in Bentiu POC. CWW meets weekly with CARE and ensures there is harmonization of all nutrition activities so that service provision is strengthened and overlap is avoided.
2. World Relief	Same as above
3. MSF	MSF provides stabilization center services for SAM cases with complications. Concern meets with MSF regularly to ensure a smooth process of transfers of these critical cases and to follow up on progress.
4. DRC (Danish Refugee Council)	DRC oversees the camp management. Close collaboration on all camp management / land space issues and planning.
5. WHO	Technical advice and support on health and nutrition issues
6. UNICEF	UNICEF is the nutrition cluster lead and provides supplies for OTP as well as technical assistance to management of the CMAM program
7. WFP	Provision of supplies for MAM programming as well as technical support
8. IMC	IMC provides health services in UN House and Concern refers SAM cases with complications to them
9. MoH	Concern works in close collaboration with the Ministry of Health to improve capacity and provide nutrition services in UN House and Juba

Environmental Marker Code

Gender Marker Code

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

Justify Chosen Gender Marker Code

The nature of the program means that women are the primary targets as they traditionally have the responsibility for the care of infants and children. In the targeted area, gender inequality is very high, and women are generally not in control of household resources. South Sudan has the world's highest maternal mortality rate, lowest female literacy rates, and widespread gender-based violence. These factors all bear impact on the health and nutritional status of women in South Sudan. This program will engage with community leaders and the men of PoC sites to ensure they understand the causes of malnutrition and how household practices (e.g. hygiene and child care practices) affect the nutritional status of children. The program will strive to engage and involve men as they are primarily at the forefront of decision making in the family in South Sudan. One key strategy for involving men will be to invite them to participate in the final sessions of the mothers groups. This will create greater engagement and participation on the part of fathers, while creating a facilitated space for dialogue between men and women.

Protection Mainstreaming Protection concerns are considered in the planning of all nutrition activities, in order to ensure that any risk of harm, abuse and exploitation faced by the target population is mitigated. The locations of Concern's Nutrition Centres within the PoC sites is determined in conjunction with Camp Management, and have been selected as safe spaces, that are easily accessible. Key to inclusive project implementation is that female and male staff members are recruited. This helps to ensure that beneficiaries feel comfortable in accessing

the nutrition services provided. A significant portion of the project staffing will come from within the IDP community. They will be sensitized in relation to the risks facing many of the mothers accessing services, as well as the children, such as gender-based violence or child abuse. Nutrition staffs will be given the tools by Concern to refer cases that require follow-up to relevant Protection agencies.

Other vulnerable groups such as people living with HIV/AIDS, or people with disabilities, will receive equal access to the program. In the context of Unity State, it is possible that SAM children and adults are also suffering from HIV/AIDS and/or Tuberculosis (TB). Anyone who meets the admission criteria will automatically be admitted to the program, regardless of the cause of their mainutrition (or age). Through CMAM trainings, nutrition staff will be alerted to mainutrition related to HIV/AIDS, and will be advised on how they can support the beneficiary. Unfortunately, at this time there is no agency providing HIV/AIDS testing.

Nutrition activities, at their core, promote the welfare of malnourished children. Concern has a 'P4' policy (Program Participant Protection Policy) and Code of Conduct that all staff and partners are required to sign prior to commencing work. The objective of this policy is to ensure that program participants are free from abuse, exploitation and harassment. In addition, Concern will once per month carry out spontaneous questionnaires directed at discharged families, to gather basic feedback and data on their satisfaction with the services provided. Designated members of the nutrition team will be responsible for regularly reviewing all complaints, and based on the nature of the complaint, taking appropriate action to address genuine grievance.

Safety and Security

Bentiu has been the site of some of the most brutal and intense fighting of the conflict. The security situation in the Greater Upper Nile region continues to deteriorate, amid the emergence of a growing number of reports that cite significant abuse of civilians. Additionally, there has been a marked upswing in violence and crime. In Bentiu there has been an upswing in different crimes, particularly thefts and assaults. The proximity of different ethnic groups within sites and with armed actors outside as well as the overcrowding and frustrating conditions of the sites provides a combustible situation which there is a strong possibility will be a source of serious violence in the immediate future. However, throughout the year Concern has built a strong network of both formal and informal security resources which allows the organization to constantly monitor and assess the security situation and existing risks. This has ensured that even during bouts of serious conflict around the PoC sites, there has been a minimal impact on Concern's nutrition programming.

Access

Concern has been implementing a nutrition programme in the Bentiu POC for over one year, since the beginning of the conflict. Currently, the POC is being relocated to a new site that is more accessible (due to improved drainage and less flooding than the previous POC). Security constraints remain an issue as Bentiu is a strategic town in the ongoing conflict. There have been periods of a few days during the past year when operations were temporarily suspended due to insecurity. Currently, the staff is able to operate daily in the POC. Concern has strong rapport with the community and is viewed as a key partner in the provision of essential and lifesaving services. Regular meetings are held with the High Commission of community leaders and open dialogue is fostered between other community groups to ensure transparency and a stable operating environment.

BUDGET

1 Staff and Other Personnel Costs (please itemize costs of staff, consultants and other personnel to be recruited directly by the implementing partner for project implementation)

Code	Budget Line Description	D/S	Unit Quantity	Unit Cost	Duration	Percent Charged to	Total Cost	2015		2016	Quarterly Total
				-		CHF / ERF		Q3	Q4	Q1	
.1	Country Director	S	1	8705.16	6	10.00%	5,223.10	2,611.55	2,611.55	0.00	5,223.1
	The Country Director will provide overall organisa Director will dedicate 10% of their time to this proje		ership and w	vill be fully	accountable	for all progra	mming and o	perational decisions	s within South Suda	n. The Country	
1.2	Emergency Director	s	1	8242.5	6	10.00%	4,945.50	2,470.25	2,475.25	0.00	4,945.5
	The Emergency Director will oversee all organisa	tional prog	rammes and	d manage	the donor re	lations in rega	rd to this pro	ject. They will contr	ribute 10% of their t	ime to this project	
.3	Grants and Information Manager	s	1	7135.75	6	10.00%	4,281.45	2,140.25	2,141.20	0.00	4,281.4
	The Grants Manager will manage all the grant ma	nagement	and complia	nce and w	vill handle all	donor correst	oondence. Th	ney will dedicate 10	% of their time to th	e project.	
.4	Programme Support Officer	s	1	3230.25	6	10.00%	1,938.15	969.07	969.08	0.00	1,938.1
	The Programme Support Officer will provide supp	ort in moni	toring, evalu	ation, con	nmunication	and reporting,	and will dedi	cate 10% of their ti	me to the project		
.5	Country Financial Controller/logs coordinator	s	2	7135.75	6	10.00%	8,562.90	4,281.45	4,281.45	0.00	8,562.9
	The CFC will ensure that financial requirements a logistical support and will contribute 10% of their ti			n this proj	ect and will o	contribute 10%	of their time	to this project. The	e logs coordinator v	vill provide	
.6	Emergency Nutrintionist	D	1	5752.6	6	100.00%	34,515.60	17,258.30	17,257.30	0.00	34,515.6
	The Emergency Nutritionist will provide leadership this grant.	in project	implementa	tion and w	ill be respon	sible for ensu	ring that proje	ect objectives are n	net. He/she will be	charged 100% to	
.7	Area Coordinator/Base Manager	s	2	5849.06	6	20.00%	14,037.74	7,018.87	7,018.87	0.00	14,037.
	The Area Coordinator will manage programming of Manager will coordinate all the logistical support p	uality and rovided to	integration v the project o	vith other soperation v	sectors withi	n the Unity are dedicating 20%	ea. The AC w	vill dedicate 20% of e to the project	their time to the pro	oject. The Base	
.8	Nutrition Assistant/IYCF Assistant/Community Mobiliser	D	22	785.4	6	100.00%	103,672.80	51,836.40	51,836.40	0.00	103,672.8
	A total of 22 nutrition assistants/IYCF assistants a	and Comm	unity Mobilis	ers will be	dedicated to	o implementino	g this project	and will be 100% c	harged to the proje	ct	
.9	Nutrition Nurses	D	3	800	6	100.00%	14,400.00	7,200.00	7,200.00	0.00	14,400.0
	3 Nutrition Nurses will be implementing the project	t in Bentiu a	and will be c	harged 10	0% to this p	roject					
.10	Nutrition Centre Guards	D	2	456.4	6	100.00%	5,476.80	2,738.40	2,738.40	0.00	5,476.8
	2 Nutrition Centre guards will be required in Bentic	and will b	e charged 1	00% to thi	s project						
.11	Ttransport officer	s	1	1506	6	20.00%	1,807.20	903.60	903.60	0.00	1,807.2
	The transport officer will be in charge of all vehicle	logistics a	and will be c	harged 20	% to this pro	ject					
.12	Storekeeper	s	1	785.4	6	20.00%	942.48	471.24	471.24	0.00	942.4
	The storekeeper will be in charge of nutrition supp	lies and w	ill be charge	d 20% to t	this project						
.13	Cleaner	s	5	400	6	100.00%	12,000.00	6,000.00	6,000.00	0.00	12,000.0
	Cleaners will be hired for the nutrition sites and 5	will be char	ged 100% t	o this proje	ect						
.14	Casuals	s	25	233	6	100.00%	34,950.00	17,475.00	17,475.00	0.00	34,950.0
	25 casuals will be required for labour (such as loa	iding / offlo	ading of nut	rition supp	lies and dist	ribution) and v	vill be charge	d 100% to this proj	ect		
.15	Driver	s	1	585.2		100.00%	3,511.20	1,755.00	1,756.20	0.00	3,511.2
	A driver will be required for nutrition activities and	will be cha	rged 100%	to this proj	ect						
.16	Finance Officer	s	1	1506		25.00%	2,259.00	1,127.00	1,132.00	0.00	2,259.
	The Finance Officer will support the project opera		ill dedicate 2					,	,		,
.17	Assistant Finance and Admin Officer	s	1	785.2		25.00%	1,177.80	588.90	588.90	0.00	1,177.8

Code	Budget Line Description	D/S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		2016	Quarterly Total
				l				22.4		0040	
Trave	l (please itemize travel costs of staff, consultants a	nd other p	ersonnel for	project ii	mplementat	ion)					
	Section Total						10,500.00	1,500.00	9,000.00	0.00	10,500.00
	These costs will ensure the psychological wellbeit	ng of our s	taff working	in the dif	ficult POC a	areas					
4.2	Staff welfare - psycho-social support services	S	1	2000	6	25.00%	3,000.00	1,500.00	1,500.00	0.00	3,000.0
	A project survey will be conducted and charged to	this grant	t								
4.1	Surveys	D	1	15000	1	50.00%	7,500.00	0.00	7,500.00	0.00	7,500.00
			waantity	JUSE		CHF / ERF	CUST	Q3	Q4	Q1	7 Otal
Code	Budget Line Description	D/S	Unit Quantity	Unit Cost	Duration	Percent Charged to	Total Cost	2015		2016	Quarterly Total
Contr	ractual Services (please list works and services to	be contra	cted under t	he projec	et)						
	Section Total						3,000.00	3,000.00	0.00	0.00	3,000.0
	This line will cover office furniture costs										
3.1	Office furniture	S	1	3000	1	100.00%	3,000.00	3,000.00	0.00	0.00	3,000.0
						CHF / ERF		Q3	Q4	Q1	
Code	Budget Line Description	D/S	Unit Quantity		Duration	Percent Charged to	Total Cost	2015		2016	Quarterly Total
Equip	ment (please itemize costs of non-consumables to	be purch	ased under	the proje	ct)						
	Section Total						94,712.50	88,756.25	5,956.25	0.00	94,712.50
	One vehicle will be hired to support project activiti	es and cha	arged 25% t	o the proj	ject						
2.10	Vehical Rental	D	1.5	95	180	25.00%	6,412.50	3,206.25	3,206.25	0.00	6,412.50
	There will be construction of a new OTP site in Be	entiu POC									
2.9	Construction of new OTP in Bentiu POC	D	1	15000	1	100.00%	15,000.00	15,000.00	0.00	0.00	15,000.0
	These costs will cover Concern staff training										
2.8	Staff training	D	1	5000	1	100.00%	5,000.00	5,000.00	0.00	0.00	5,000.0
	CNVs and lead mothers receive community training	ng to build	their capaci	ty							
2.7	Community Training for CNVs and mother to mother	D	140	10	6	100.00%	8,400.00	8,400.00	0.00	0.00	8,400.0
	There will be 110 Mother-to-Mother groups create contribution with a financial incentive	ed organize	ed by lead m	nothers; e	each lead m	other will cond	uct 6 weekly	sessions and will b	pe rewarded for her	voluntary	
2.6	Mother to mother incentives	D	110	50	1	100.00%	5,500.00	2,750.00	2,750.00	0.00	5,500.0
	community. They will also train the lead mothers of				apacity UII		· ···· DE IEAU	ing couriscially sest	JOINS III UIC OTF CE	inco and in the	
د.ی	IYCF training for 75 staff Concern staff will be trained on IYCF counselling a						•	·		0.00	15,000.0
2.5	These costs will cover the costs for venue hire fo	r the traini	ng 75	200	1	100.00%	15,000.00	15,000.00	0.00	0.00	15,000.0
2.4	CMAM training venue	D	1	5000	1	100.00%	5,000.00	5,000.00	0.00	0.00	5,000.0
	This includes all costs for stationary, transport an				-						
2.3	CMAM training for 75 staff	D	75	200		100.00%	15,000.00	15,000.00	0.00	0.00	15,000.0
	trainings.										
	Stationary will be purchased for the project; this in										3,550.0
2.2	Stationary	d	4	1250	1	100.00%	5,000.00	5,000.00	0.00	0.00	5,000.0
	Concern will print OTP registers, OTP pateint car images and banners.	ds and OT	P ration car	ds for mo	others. The	IYCF registers	will also be	printed as well as I	YCF weekly data co	ollection forms,	
2.1	OTP/TSFP registration books and cards	d	1	2400	6	100.00%	14,400.00	14,400.00	0.00	0.00	14,400.0
			Quantity	Cost		Charged to CHF / ERF	Cost	Q3	Q4	Q1	Total
Code	Budget Line Description	D/S	Unit	Unit	Duration		Total	2015		2016	Quarterly
Suppl	lies, Commodities, Materials (please itemize dire	ct and indi	rect costs of	f consum	ables to be	purchased und			·		
	Section Total	runo proje	or do they w	50 1001	JOHOIDIC TO	managing acc	287,981.2	<u> </u>	143,996.19	0.00	287,981.2
1.22	2 programme accountants will be charged 10% to				1 -		•	, , ,	2,701.17	0.00	3,402.3
1.22	Programme Accountant	s	2	4501.97	7 6	10.00%	5,402.3	6 2.701.19	2.701.17	0.00	5.402.3
	A senior programme advisor will be charged to the	s grant to	provide ove	rsight and	d to ensure	the project is b	eing implem	ented to a high star	ndard and will be ch	arged 7% to this	
1.21	Senior Programme Advisor	S	1	7135	5 3	7.00%	1,498.3	5 749.17	749.18	0.00	1,498.3
	1 Assistant Nutrition Project Officers will be charg	ed under t	his grant to	implemer	nt the projec	t					
1.20	Assistant Nutrition Project Officer	D	4	958	3 6	100.00%	22,992.0	0 11,496.00	11,496.00	0.00	22,992.0
	A safety and security advisor will be hired to moni	tor the sec	curity situation	on in the t	two states a	and will be char	ged 25% to	this project			
1.19	Safety and Security Advisor	s	1	5849.06	3 2	25.00%	2,924.5	3 1,462.26	1,462.27	0.00	2,924.5
	A logistics advisor will be recruited to support all the	he operation	onal element	s of proje	ect impleme	ntation and will	be charged	25% to this project			
.18	HQ Logisitics Advisor technical support visit	s	1	5849.06	3 1	25.00%	1,462.2	7 731.14	731.13	0.00	1,462.2

5.1	UNHAS flights (return)		D	8	550	1	100	0.00%	4,400.00		2,200.00	2,2	200.00		0.00	4,400.00
	This line will cover the cost of implementation as well as sup				aff work	ing on the	projec	ct - the follow	ing flights	hav	re been deemed no	ecessary f	for effec	tive progra	amme	
5.2	International flights (R&R, deptechnical visits etc)	oloyments,	S	15	1500	1	30.0	00%	6,750.00		3,375.00	3,3	375.00		0.00	6,750.00
	This line will cover the costs	of 15 international fl	ghts for sta	ff R&R as w	ell as te	chnical vis	its to	support the p	orogramm	ne - t	they will be charge	d 30% to t	his gran	nt		
5.3	Per diem		s	1	20	300	50.0	00%	3,000.00		1,500.00	1,5	500.00		0.00	3,000.00
	Per diems are based on Condiems will be paid when head									end	the night away fro	m their us	ual bas	e of work.	Per	
5.4	Accomodation		s	1	70	90	50.0	00%	3,150.00		1,575.00	1,5	575.00		0.00	3,150.00
	This line will cover the costs	for staff accommod	ation in Ben	tiu												
	Section Total							1	7,300.00		8,650.00	8,6	550.00		0.00	17,300.0
Transf	fers and Grants to Counterp	oarts (please list tra	nsfers and	sub-grants	to projed	ct impleme	nting p	partners)								
Code	Budget Line Description		D/S	Unit	Unit Cost	Duration		rcent arged to	Total Cost	20	15			2016		Quarterly Total
				Quantity	Cost			F / ERF	Cost	Q3	3 0	(4		Q1		Total
	Section Total								0.00		0		0		0	0.00
Gener	ral Operating and Other Dire	oct Costs (nlease in	nclude dene	ral oneratino	a eynen	ses and of	her dir	rect costs fo		mnle			U		U	0.00
Code	-	ot dotto (picace ii	D/S	Unit	Unit	Dura		Percent		otal	2015			2016		Quarterly
				Quantity	Cost			Charged to		ost		0.4				Total
											Q3	Q4		Q1		
7.1	Vehicle fuel and maintenance	•	S	1	5	600 6		100.00%	3,000	0.00	1,500.00	1	,500.00		0.00	3,000.0
	This line will cover the costs	for fuel for the rente	d vehicle in	both Juba a	and Bent	tiu										
7.2	Country office running costs		S	1	4359	4.5 6		10.00%	26,156	3.70	13,078.35	13	3,078.35		0.00	26,156.70
	These allocated costs will co	ntribute to the rent f	or the office	in Juba												
7.3	Field office running costs		s	1	10527	.96 6		15.00%	9,475	5.16	4,735.08	4	,740.08		0.00	9,475.1
	These allocated costs will co	ntribute to the rent f	or the office	in Bentiu												
7.4	Vehicle running costs		s	1	953	6.2 6		10.00%	5,721	.72	2,861.00	2	2,860.72		0.00	5,721.7
	The costs allocated will contr	ibute towards cove	ring the run	ning costs o	f hired v	ehicles to	be use	ed for the pro	oject. This	s is b	pased on past exp	erience.				
7.5	Equipment and furntiure		s	2	12	200 1		100.00%	2,400	0.00	1,200.00	1	,200.00		0.00	2,400.0
	The allocated costs will cover	r the equipment and	I furniture re	equirements	of the o	ffice in Uni	ty									
7.6	Visibility		D	1	2415	.78 1		100.00%	2,415	5.78	2,415.78		0.00		0.00	2,415.78
	T-shirts, and other necessary	y materials for visib	ility e.g. cap	s and sign l	boards											
	Section Total								49,169	9.36	25,790.21	23	3,379.15		0.00	49,169.3
ub Tot	tal Direct Cost															462,663.0
direct	Programme Support Cost F	PSC rate (insert per	centage, no	ot to exceed	7 per ce	ent)										7
	ost (For NGO, in percent)	,	•		•	,										1
SC Am	nount															32,386.4
uarterl	y Budget Details for PSC	2015		:	2016		Total									
mount		Q3	Q4	(Q1											
		15,557.62	16,828.				32,386	6.42								
otal Fı	und Project Cost	'														495,049.
roject	Locations										'					
Locatio	on	Estimated perce	ntage of b	udget for e	ach loc	ation			Benefi	ciar	y Men W	omen	Воу	Girl	Total	Activity
Jnity -:	> Rubkona	55													0	
	l Equatoria -> Juba	45													0	
Central																