



Project Proposal

Organization	IOM (International Organization for Migration)			
Project Title	Provision of life-saving primary health care to migrants including internally displaced persons (IDPs), returnees, pastoralists and host communities in Kismayo and Dhobley			
CHF Code	CHF-DDA-3485-704			
Primary Cluster	Health	Secondary Cluster		
CHF Allocation	Standard Allocation 1 (Feb 2015)	Project Duration	12 months	
Project Budget	299,807.47			
HRP Details	HRP Code	SOM-15/H/71569	HRP Budget	3,563,100.00
	HRP Project Ranking	A - HIGH	HRP Gender	
Project Beneficiaries	Marker			
		Men	Women	Total
	Beneficiary Summary	15,936	22,825	38,761
		Boys	Girls	Total
		10,623	14,216	24,839
		Total		63,600
	Total beneficiaries include the following:			
	Internally Displaced People	15,079	21,273	36,352
Returnees	2,200	4,100	6,300	
Pastoralists	2,100	900	3,000	
People in Host Communities	7,180	10,768	17,948	
Implementing Partners				
Organization focal point contact details	Name: Dr. Chiaki Ito Title: Health Programme Coordinator Telephone: +254 737860720 E-mail: cito@iom.int			
BACKGROUND INFORMATION				
<p>1. Project rationale. Humanitarian context: Give a specific description of the humanitarian situation in the target region based on newest data available (indicate source) (Maximum of 1500 characters)</p>	<p>The IDP population is estimated at 30,000 in Kismayo, and 5,134 in Dhobley (Regional Mixed Migration Secretariat, Jun 2014). Among them are mobile population consisting of migrants and returnees from Kenya, approximately 1,593 people are returning from Kenya and passing through Dhobley (UNHCR, Weekly update February 2015). Common diseases reported are acute watery diarrhoea (AWD), respiratory tract infections (RTI), gastroenteritis, and skin diseases (IOM morbidity data, Jan-Dec 2014). In Kismayo, IDPs and spontaneous returnees from Kenya continue to arrive. Increased cases of gastrointestinal conditions and communicable diseases have been reported (FSNAU, Dec 2014). In Dhobley, the FSNAU (Dec 2014) reported Death Rate in Under 5 (U5DR) of 1.52/1000/day among both mobile and static population. Besides the burden of the Somali returnees, vulnerable IDPs and host communities are dying from gastrointestinal and respiratory diseases. In 2014, a total of 155 persons (85 male, 70 female), mostly children, died from preventable communicable diseases and malnutrition (IOM, Jan-Dec 2014).</p>			
<p>2. Needs assessment. Describe the capacities in place, then identify the gaps (previous and new). Explain the specific needs of your target group(s) in detail. State how the needs assessment was conducted (who consulted whom, how and when?). List any baseline data</p>	<p>Between October and December 2014, IOM conducted two rounds of interviews and discussions on public health issues with over 50 partners including NGOs, government entities, community leaders and beneficiary representatives in the proposed project areas. Data analysis demonstrated that despite humanitarian interventions, morbidity and mortality are expected to aggravate in the coming months due to the insufficient capacity of the humanitarian actors in responding to the far-exceeding demand for life-saving services. In Kismayo, IOM's fact finding mission conducted in November 2014 found that most of the humanitarian partners who claim to run health posts are actually either closed or working at a very low capacity due to insufficient medical supplies and qualified staff. Support to existing health facilities to scale up interventions to reach more vulnerable population in need especially in remote areas such as Dhobley and Kismayo are extremely urgent.</p>			
<p>3. Activities. List and describe the activities that your organization is currently implementing to address these needs</p>	<p>IOM is currently providing integrated life-saving humanitarian assistance in the proposed project sites through static and mobile health facilities. IOM's services include PHC services, WASH and health promotion, GBV prevention, psychosocial support and referrals (medical & Legal Aid) for the survivors of GBV, technical, institutional capacity building of health sector and specialized training (example: Neonatology) through the diaspora placement programme. Primary target populations are vulnerable IDPs and affected host communities. In Dhobley IOM also provides PHC to hard-to-reach populations such as pastoralists. In 2014, IOM supported over 200000 beneficiaries. IOM's intervention also includes rapid responses to emergencies including the recent flooding in Kismayo and populations fleeing to Mogadishu due to the new offences. Moreover, IOM established a Way Station in Dhobley to provide humanitarian assistance to spontaneous returnees. In IOM's interventions specific needs for women, men, children, youth have been catered such as health care services provided by staff of the same gender, gender-specific latrines and accommodation facilities, as well as child friendly spaces. IOM's trained community health workers are comprised of both women and men. IOM is also running a cross border surveillance programme and has recently been requested by the Ebola Task Force and the Ministry of Health (MoH) to include Ebola surveillance among mobile populations in areas such as Dhobley.</p>			
LOGICAL FRAMEWORK				
Objective 1	Contribute to improving the health conditions of IDPs and migrants (relocated, integrated or newly displaced populations) and host communities with serious alarming needs through the provision of integrated life-saving emergency PHC in two locations Dhobley and Kismayo (Daxis IDP settlement), thereby ensuring equal access for women, men, girls and boys.			
Outcome 1	Enhanced delivery of integrated primary and emergency health care services to 36,352 IDPs, 6,300 returnees, 3,000 pastoralists and 17,948 members of their host communities (14,216 girls, 10,623 boys, 22,825 women, 15,936 men) with special service provision for pregnant women, mothers, women of child bearing age, SGBV survivors and children under five years			
Activity 1.1	Provide integrated emergency and PHC to 36,352 IDPs, 6,300 returnees, 3,000 pastoralists and 17,948 members of their host communities (14,216 girls, 10,623 boys, 22,825 women, 15,936 men) through health units with outreach services in Dhobley and Kismayo, ensuring equal access to women, men, girls and boys. Services will comprise treatment of communicable and non-communicable diseases, child health (including vaccination), sexual and reproductive health (including ante/post-natal care), injury care, mental health, and basic rapid laboratory tests, malnutrition			

	screening and referrals including assistance to SGBV survivors ensuring provision of Post-Exposure Prophylaxis (PEP) kits for rape survivors . The primary health approach with outreach services will include: an IOM static and mobile health unit in Dhobley (which serves the community within Dhobley and its outskirts including returnees from Dadaab, Kenya) and a health unit in Dalxis IDP settlement in Kismayo.																																																	
Activity 1.2	Strengthen the referral system for patients seeking secondary healthcare services including malnourished children and mothers, ensuring equal access to services for women, men, girls and boys to Dhobley and Kismayo hospitals. This will be implemented through regular coordination and collaboration with stakeholders including Nutrition and Water, Sanitation and Hygiene (WASH) Cluster partners working in Dhobley and Kismayo as well as the referral hospital administrators and nutritional intervention sites.																																																	
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Outcome 2	IDPs, their host communities and communities with serious alarming needs show enhanced awareness and practice of community-based prevention of and response to common illnesses, and have reduced mortality and morbidity rates from vaccine preventable diseases and under nutrition.																																																	
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Implementation: Describe for each activity how you plan to implement it and who is carrying out what	Activities 1.1 and 1.2: IOM, in collaboration with the key stakeholders such as the United Nations agencies, non-governmental organizations (NGOs), government entities, community leaders and beneficiary representatives will support two health units (one in each location) with outreach services to scale up the on-going PHC and strengthen the health system through referrals . IOM will directly implement activities in both locations. Activities 3.1: Social mobilization will be conducted by IOM and key stakeholders in consultations with the governments. In all activities, IOM will continuously provide technical support and supervise its partners' technical and operational capacity through routine field monitoring and meetings for better service delivery quality through IOM staff.																																																	
Project workplan for activities defined in the Logical framework	<table border="1"> <thead> <tr> <th>Activity Description</th> <th>Month 1-2</th> <th>Month 3-4</th> <th>Month 5-6</th> <th>Month 7-8</th> <th>Month 9-10</th> <th>Month 11-12</th> </tr> </thead> <tbody> <tr> <td>Activity 1.1 Provide integrated emergency and PHC to 36,352 IDPs, 6,300 returnees, 3,000 pastoralists and 17,948 members of their host communities (14,216 girls, 10,623 boys, 22,825 women, 15,936 men) through health units with outreach services in Dhobley and Kismayo, ensuring equal access to women, men, girls and boys. Services will comprise treatment of communicable and non-communicable diseases, child health (including vaccination), sexual and reproductive health (including ante/post-natal care), injury care, mental health, and basic rapid laboratory tests, malnutrition screening and referrals including assistance to SGBV survivors ensuring provision of Post-Exposure Prophylaxis (PEP) kits for rape survivors . The primary health approach with outreach services will include: an IOM static and mobile health unit in Dhobley (which serves the community within Dhobley and its outskirts including returnees from Dadaab, Kenya) and a health unit in Dalxis IDP settlement in Kismayo.</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> </tr> <tr> <td>Activity 1.2 Strengthen the referral system for patients seeking secondary healthcare services including malnourished children and mothers, ensuring equal access to services for women, men, girls and boys to Dhobley and Kismayo hospitals. This will be implemented through regular coordination and collaboration with stakeholders including Nutrition and Water, Sanitation and Hygiene (WASH) Cluster partners working in Dhobley and Kismayo as well as the referral hospital administrators and nutritional intervention sites.</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> </tr> <tr> <td>Activity 1.3</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Activity 2.1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Activity 2.2 Through social mobilization conduct a total of 24 mass preventive health and nutritional campaigns (12 per location) in a culturally acceptable manner on the most serious public health issues including prevention of AWD, reproductive health, malaria and malnutrition-related morbidity among a total of 90,000 beneficiaries with serious alarming needs ensuring equal participation of women, men, girls and boys.</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> </tr> <tr> <td>Activity 3.1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Activity Description	Month 1-2	Month 3-4	Month 5-6	Month 7-8	Month 9-10	Month 11-12	Activity 1.1 Provide integrated emergency and PHC to 36,352 IDPs, 6,300 returnees, 3,000 pastoralists and 17,948 members of their host communities (14,216 girls, 10,623 boys, 22,825 women, 15,936 men) through health units with outreach services in Dhobley and Kismayo, ensuring equal access to women, men, girls and boys. Services will comprise treatment of communicable and non-communicable diseases, child health (including vaccination), sexual and reproductive health (including ante/post-natal care), injury care, mental health, and basic rapid laboratory tests, malnutrition screening and referrals including assistance to SGBV survivors ensuring provision of Post-Exposure Prophylaxis (PEP) kits for rape survivors . The primary health approach with outreach services will include: an IOM static and mobile health unit in Dhobley (which serves the community within Dhobley and its outskirts including returnees from Dadaab, Kenya) and a health unit in Dalxis IDP settlement in Kismayo.	X	X	X	X	X	X	Activity 1.2 Strengthen the referral system for patients seeking secondary healthcare services including malnourished children and mothers, ensuring equal access to services for women, men, girls and boys to Dhobley and Kismayo hospitals. This will be implemented through regular coordination and collaboration with stakeholders including Nutrition and Water, Sanitation and Hygiene (WASH) Cluster partners working in Dhobley and Kismayo as well as the referral hospital administrators and nutritional intervention sites.	X	X	X	X	X	X	Activity 1.3							Activity 2.1							Activity 2.2 Through social mobilization conduct a total of 24 mass preventive health and nutritional campaigns (12 per location) in a culturally acceptable manner on the most serious public health issues including prevention of AWD, reproductive health, malaria and malnutrition-related morbidity among a total of 90,000 beneficiaries with serious alarming needs ensuring equal participation of women, men, girls and boys.	X	X	X	X	X	X	Activity 3.1						
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Personnel Costs	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
	1.1.1	Programme Coordinator/Officer (20%, P3)	1	10833	12	Month	129,996.00	103,996.80	25,999.20	
	1.1.2									
	1.1.3									
	1.1.4									
	1.1.5									
	1.1.6									
	1.1.7									
	1.1.8									
	1.1.9									
	1.1.10									
	1.1.11									
	1.1.12									
	1.1.13									
	1.1.14									
	1.1.15									
Subtotal							129,996.00	103,996.80	25,999.20	
Budget Narrative:										
1.2 Local Staff										
Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF	
1.2.1										
1.2.2	Programme Assistant in Nairobi(30%, G5)	1	1622	12	Month	19,464.00	13,624.80	5,839.20		
1.2.3	Programme Assistant in Kismayo (30%, G5)	1	1622	12	Month	19,464.00	13,624.80	5,839.20		
1.2.4	Programme Support	1	1574	12	Month	18,888.00	0.00	18,888.00		
1.2.5										
1.2.6										
1.2.7										
1.2.8										
1.2.9										
1.2.10										
1.2.11										
1.2.12										
1.2.13										
1.2.14										
1.2.15										
Sub Total							57,816.00	27,249.60	30,566.40	
Budget Narrative:										
B:2 Supplies, Commodities, Materials	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
	2.1.1	Medical drugs and equipment (Dhoble)	1	9937.2	1	lumpsum	9,937.20	0.00	9,937.20	
	2.1.2	Medical drugs and equipment (Kismayo)	1	15838.295	1	lumpsum	15,838.30	0.00	15,838.30	
	2.1.3	Freight and transportation for medicine and medical equipment (Kismayo)	1	10152	1	lumpsum	10,152.00	0.00	10,152.00	

2.1.4	Van rental (including maintenance and fuel)(Kismayo)	1	1400	12	Month	16,800.00	1,399.44	15,400.56
2.1.5	Community Mobilization(Kismayo)	1	500	12	Month	6,000.00	499.80	5,500.20
2.1.6	Doctor (USD\$700 X1)(Kismayo)	1	700	12	Month	8,400.00	0.00	8,400.00
2.1.7	Midwife (USD\$350 X 1)(Kismayo)	1	350	12	Month	4,200.00	0.00	4,200.00
2.1.8	Nurse (USD 350 per month) x 1 (Kismayo)	1	350	12	Month	4,200.00	0.00	4,200.00
2.1.9	Auxillary Nurse(USD\$250 X 2)(Kismayo)	2	250	12	Month	6,000.00	0.00	6,000.00
2.1.10	Facility support personnel x 8: community health workers x 3, cleaners x 1, security guards x 2 and vaccinators x 2 (USD 150 per month) kismayo	8	150	12	Month	14,400.00	0.00	14,400.00
2.1.11	Freight and transportation for medicine and medical equipment (Dhobley)	1	2000	1	lumpsum	2,000.00	0.00	2,000.00
2.1.12	Community mobilization(Dhobley)	1	5000	1	lumpsum	5,000.00	0.00	5,000.00
2.1.13	Van rental (including maintenance and fuel) (dhobley)	1	2300	12	months	27,600.00	0.00	27,600.00
2.1.14	Doctor (USD\$700 X1) Dhobley	1	700	12	months	8,400.00	0.00	8,400.00
2.1.15	Other staff costs	1	28800	1	lumpsum	28,800.00	0.00	28,800.00
Sub Total						167,727.50	1,899.24	165,828.26

Budget Narrative:

C:3 Equipment

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
3.1.1									
3.1.2									
3.1.3									
3.1.4									
3.1.5									
3.1.6									
3.1.7									
3.1.8									
3.1.9									
3.1.10									
3.1.11									
3.1.12									
3.1.13									
3.1.14									
3.1.15									
Sub Total						0.00	0.00	0.00	

Budget Narrative:

D:4 Contractual Services

Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
4.1.1									
4.1.2									
4.1.3									
4.1.4									
4.1.5									
4.1.6									
4.1.7									
4.1.8									
4.1.9									

4.1.10										
4.1.11										
4.1.12										
4.1.13										
4.1.14										
4.1.15										
Sub Total						0.00	0.00	0.00		

Budget Narrative:

E:5 Travel	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
	5.1.1	International Travel (Kenya-Somalia) Air tickets, DSA and terminal expenses	1	400	12	Month	4,800.00	0.00	4,800.00	
	5.1.2	In-Country Travel (within Somalia) includes vehicle rental	1	1200	4	Month	4,800.00	0.00	4,800.00	
	5.1.3	Monitoring and Evaluation (M&E) includes pre and post assesments and surveys	1	1281	12	Month	15,372.00	0.00	15,372.00	
	5.1.4									
	5.1.5									
	5.1.6									
	5.1.7									
	5.1.8									
	5.1.9									
	5.1.10									
	5.1.11									
	5.1.12									
	5.1.13									
	5.1.14									
	5.1.15									
Sub Total						24,972.00	0.00	24,972.00		

Budget Narrative:

F:6 Transfers and Grants to Counterparts	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
	6.1.1									
	6.1.2									
	6.1.3									
	6.1.4									
	6.1.5									
	6.1.6									
	6.1.7									
	6.1.8									
	6.1.9									
	6.1.10									
	6.1.11									
	6.1.12									
	6.1.13									

6.1.14										
6.1.15										
Sub Total							0.00	0.00	0.00	

Budget Narrative:

G:7 General Operating and Other Direct Costs	Code	Budget Line Description	Units	Unit Cost	Duration	TimeUnit	Amount(USD)	Organization	CHF	%charged to CHF
	7.1.1	Rent	2	500	12	Month	12,000.00	0.00	12,000.00	
	7.1.2	Communications	1	250	12	Month	3,000.00	0.00	3,000.00	
	7.1.3	Office Supplies and materials	1	5428	1	lumpsum	5,428.00	0.00	5,428.00	
	7.1.4	Security (MOSS/MORSS Compliance) including armed escort	1	200	12	Month	2,400.00	0.00	2,400.00	
	7.1.5	Other office costs including bank charges	1	10000	1	lumpsum	10,000.00	0.00	10,000.00	
	7.1.6									
	7.1.7									
	7.1.8									
	7.1.9									
	7.1.10									
	7.1.11									
	7.1.12									
	7.1.13									
	7.1.14									
7.1.15										
Sub Total							32,828.00	0.00	32,828.00	

Budget Narrative:

TOTAL							413,339.50	133,145.64	280,193.86	
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H.8 Indirect Programme Support Costs	Code	Budget Line Description	Amount(USD)	Organization	CHF	%charged to CHF
	8.1.1	Indirect Programme Support Costs	0.00	0.00	19,613.61	7.0000
	GRAND TOTAL			413,339.50	133,145.64	299,807.47

Other sources of funds

Description	Amount	%
Organization	133,145.64	30.75
Community	0.00	0.00
CHF	299,807.47	69.25
Other Donors	a)	0.00
	b)	0.00
TOTAL	432,953.11	

LOCATIONS

Region	District	Location	Standard Cluster Activities	Activity	Beneficiary Description	Number	Latitude	Longitude	P.Code
Lower Juba	Afmadow	Dhobley	Awareness campaign, Capacity building, Health facilities supported, Infrastructure construction or rehabilitation (Health centre, latrines, hand washing facilities, water etc.)	Provision of life-saving primary health care services	IDPs, returnees, pastoralists, host communities	25600	0.40627	41.01238	NA-3716-Q12-001
Lower Juba	Kismayo	Kismayo	Awareness campaign, Capacity building, Health facilities supported, Infrastructure construction or rehabilitation (Health centre, latrines, hand washing facilities, water etc.)	Provision of life-saving primary health care services	IDPs, returnees, pastoralists, host communities	38000	-0.36029	42.546261	SA-3801-J13-001
TOTAL						63,600			

DOCUMENTS

Document Description
1. FSNAU Nutrition Update December 2014 report

2. RMMS June 2014 Report
3. OCHA Somalia Humanitarian Update August 2014
4. OCHA Somalia Humanitarian Update September 2014
5. OCHA Somalia Humanitarian Update October 2014
6. OCHA Humanitarian Update June 2014
7. UNHCR Weekly Updates voluntary returns KEN-SOM Dec 2014
8. Gaps Assesed in Health and WASH in Dhobley-IOM report
9. IOM Kismayo Mission Assesment Report -2013
10. Budgetary guidelines and BOQ
11. Annex 1 BOQ
12. Revised IOM BOQ