

<b>Requesting Organization :</b>	Universal Intervention and Development Organization			
<b>Allocation Type :</b>	1st Round Standard Allocation			
<b>Primary Cluster</b>	<b>Sub Cluster</b>	<b>Percentage</b>		
NUTRITION		100.00		
		<b>100</b>		
<b>Project Title :</b>	Scale up of Emergency Nutrition Interventions to IDPs ,Host Community , Flood affected and Disabled Vulnerable populations of Mayendit, and Panyijar Counties In Unity state ,South Sudan .			
<b>Allocation Type Category :</b>	Frontline services			
<b>OPS Details</b>				
<b>Project Code :</b>	SSD-17/H/103323	<b>Fund Project Code :</b>	SSD-17/HSS10/SA1/N/NGO/5121	
<b>Cluster :</b>	Nutrition	<b>Project Budget in US\$ :</b>	502,861.00	
<b>Planned project duration :</b>	6 months	<b>Priority:</b>	Not Applicable	
<b>Planned Start Date :</b>	03/04/2017	<b>Planned End Date :</b>	03/10/2017	
<b>Actual Start Date:</b>	03/04/2017	<b>Actual End Date:</b>	03/10/2017	
<b>Project Summary :</b>	<p>UNIDO has continuously operated 12 OTP centers and 8 TSFP centers with coverage in all 12 Payam in Mayendit County since its operation in Unity in 2011. Sporadic political conflict , cattle raiding and flooding witnessed in these areas continue to uproot and displace households, preventing many from planting as it's their main source of Food and forcing them to sell off assets and livestock for food in order to survive post conflict. Recently renewed fighting in Mayendit South ( 26th February 2017 ) and worsened the situation by destroying available Health systems already put in place by UNIDO through donor funding to tackle acute malnutrition in Under 5s. Worst hit payams of Bhor which hosts the PHCC and Pabuong forced the community and NGO staff to evacuate and seek shelter in the neighboring swamps and juba .UNIDO being the Health and Nutrition lead agency in Mayendit County Under HPF 2 together with other Humanitarian actors seek to ensure continued Nutrition support to the affected population taking keen measures in promoting equitable access and participation of Men, Women, Girls and Boys in needs assessments ,project design and in implementation of activities Under SSHF .</p> <p>In light of the recent declaration of localized famine in Leer and Mayendit on 20 February 2017, as well as the high risk of famine in Koch, UNIDO seeks to ensure continuum of care to beneficiaries who are now in competition for scarce resources . This is why UNIDO seeks to continue supporting beneficiaries in the greater Mayendit county and Panyijar so they don't feel discriminated and marginalized at this time of need .This proposed 2017 SSHF SA1 project will continue to address, respond and scale up nutrition needs in line with NC strategy by targeting Under 5 Both boys and Girls &amp; PLWs IDPs and host communities in Mayendit and Panyijar counties The project is designed to provide both preventive and curative services with inclusion of a SMART survey which will enable the cluster and other stakeholders to better understand the nutrition situation in Mayendit .</p> <p>Treatment of severe acute malnutrition ( SAM ) will be provided by UNIDO in the already existing Health facilities to prevent children under 5 from malnutrition related death. Treatment of moderate acute malnutrition (MAM) will also be done with the aim of improving the health of children under 5 Boys &amp; Girls , thereby reducing the prevalence of severe acute malnutrition. Awareness campaigns on topics including MIYCN , HIV awareness and hygiene promotion will be provided to beneficiaries in Mayendit/panyijar as well . UNIDO has presence in the aforementioned locations supporting Education, Health ,Child Protection and FSL sectors and as such we will strengthen coordination with respective CHDs to ensure that Mayendit /panyijar county beneficiaries receive the needed multi sectorial services in turn promoting inter cluster collaborations and synergy . UNICEF and WFP will provide pipeline supplies towards treatment of SAM and MAM in children Mayendit /panyijar county of Unity State. Children under 5 boys and Girls as well as other vulnerable groups (women ) , will be screened in the community and referred accordingly. In our scale up plan , we will open 2 more static sites in Mayendit and 2 in Panyijar as we hope to help avert the famine</p>			
<b>Direct beneficiaries :</b>				
<b>Men</b>	<b>Women</b>	<b>Boys</b>	<b>Girls</b>	<b>Total</b>
3,700	4,900	8,246	9,246	26,092

**Other Beneficiaries :**

Beneficiary name	Men	Women	Boys	Girls	Total
Children under 5	0	0	3,200	3,500	6,700
Internally Displaced People	2,000	2,450	2,023	2,873	9,346
People in Host Communities	1,700	2,450	3,023	2,873	10,046

**Indirect Beneficiaries :****Catchment Population:**

This project will support the delivery of both preventive and curative nutrition services to the communities of Rupkuay, Dablual, Thaker, Jaguar, Tutnyang, Leah, Bhor, Malkuer, Pabuong and Madol payams in Mayendit county complimenting the running UNICEF funded activities. Also the project will support the services delivery to population of Kol and Nyal payams in Greater Nyal of Panyijiar county.

**Link with allocation strategy :**

With the humanitarian crisis in South Sudan deepening and spreading, the 2017 Humanitarian Needs Overview (HNO) estimates that some 7.5 million people, over 60% of the population, are in need of humanitarian assistance. UNIDOs Proposed project is consistent with CERF life-saving criteria and is aligned with the cluster priority activities outlined in the HRP if 0-25% of HRP funding is received. Approaches to be used in this project period will ensure feasibility of implementation, taking into consideration any access constraints, insecurity or other challenges as we have been in the locations for long and understand the context. Modalities will be prioritized to enable rapid and adaptable responses to humanitarian needs, in light of the volatile situation on the ground. UNIDO is in line with SA1 2017 strategy that focusses on the first HRP strategic Objective of saving lives and alleviating suffering through safe access to services with dignity and ensuring communities are capable and prepared to cope with significant threats, this proposed UNIDO project will continue to support existence of nutrition services in emergency stricken areas in 12 fixed nutrition sites in Mayendit County and 4 Sites in Panyijiar as well as scale up through opening additional sites focusing on Under 5s and PLWs. The proposed operational areas are accessible at the moment making implementation feasible. Generally this will help provide access to integrated programs preventing under nutrition for at least 30 per cent of girls and boys aged 0-59 months, pregnant and lactating women, older people and other vulnerable groups. Needs analysis and reporting will be carried out in collaboration with the community leaders and churches in the area. The community leaders and the churches will be the key players for information sharing and identification of community workers. This relates to Nutrition objective #3, which states: Ensure enhanced needs analysis of the nutrition situation and enhanced monitoring and coordination of response. The activities to be conducted will best demonstrate value for money throughout the implementation period and UNIDO having been present in Mayendit and Panyijiar with other different sectors will make Nutrition integration smoother. Quality programming through. Mainstreaming of gender, protection, AAP, and conflict sensitivity) to the extent feasible in the circumstances will also be taken into account. to ensure UNIDO optimizes the resources available to maximize reach and impact for the fund.

**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
JAMES KEAH NINREW	EXECUTIVE DIRECTOR	ed@unidosouthsudan.org	0955008160
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OROMA DAVID FABIANO	FINANCE MANAGER	oromafabiano@yahoo.com	0955238930

**BACKGROUND****1. Humanitarian context analysis**

Mayendit – Persistent conflict in southern Unity with the recent one in February 26th 2017 has precipitated a humanitarian crisis in southern Unity, with the population cut off from assistance.. Utilizing qualitative livelihood change data for the area and the disaggregation of acute malnutrition and mortality data gathered by a recent SMART survey, Mayendit showed localized pockets of Humanitarian Catastrophe (IPC Phase 5), or Famine conditions, as of January 2017. Common illnesses reported during UNIDOs January 2017 SMART survey included fever, cough, diarrhea, skin infections, and eye infections. General sickness, especially in children, is compounded by lack of access to clean water and sanitation infrastructure. These factors increase the risk of morbidity and negatively impact GAM. Women are carrying out many roles, affecting amount of time they are able to spend feeding and caring for their children has decreased, which consequently increases children’s risk of malnutrition. The recent SMART survey conducted by UNIDO in January 2017 showed a critical Global Acute Malnutrition (GAM) of 27.4 % . (21.3 – 34.5 95% C.I) which is classified as above emergency level as per WHO standards. The prevalence of underweight 36.2 % (29.7 – 43.3 95% C.I.) was also classified as serious. In addition, the crude mortality rates found were classified as an emergency (out of control threshold) at 4.08 (3.12 – 5.33 95% C.I). Programmatic Data continues to show poor nutrition situation in Mayendit which is unavoidable with the interplay of recent insecurity, high prevalence of disease and food insecurity resulting In the morbidity of the children aged 6-59 months reported at 44.3% of the children being sick within the last 2 weeks of the survey .RRM conducted in Rubkuay in February showed Proxy GAM (4.7% ) while the Proxy SAM( 0.7% ) .UNIDO has put a plan in place for speedy scale up of its services in the said location for optimal reach, pending a normalization in the security situation. FSNMS round 19 conducted in November /December 2016 depicts same level of gross need in Mayendit with MUAC Proxy SAM of 2.1 .UNIDO supports 12 OTP sites, and 8 TSFP /BSFP sites with possible scale up of 2 statics if funding is secured.

Panyijar ,Nyal – Panyijjar was classified as Emergency (IPC Phase 4) in January 2017, as the only data consistent with Famine was an unprecedented Mass MUAC proxy GAM prevalence of 37.7 percent, including a SAM prevalence of 11.8 percent, more than double the Famine threshold (IPC Phase 5 for Acute Malnutrition – Extremely Critical). High numbers of IDP’s have been observed entering Panyijjar from Famine-affected counties to the immediate north, greatly increasing the number of severely vulnerable households in the area and likely contributing to Extremely Critical acute malnutrition levels. A SMART survey conducted by IRC in April 2016 in Panyijjar County revealed emergency nutrition concerns, GAM was (93) 16.9% (13.3-21.2 95% CI) and SAM (25) 4.5% (2.5- 8.0 95% CI) .While 100% of children 6 23 months were ever breastfed, adherence to YCF practices was not strictly observed, with only 53.6% of children 0 5 months exclusively breastfed, and 9.1% of breastfeeding children 6 23 months were introduced to complementary feeding at 6 months. High morbidity for diarrhea and fever, poor health seeking behavior, and food insecurity were cited by the assessment as some of the aggravating factors contributing to high prevalence of malnutrition. It is anticipated that as the hunger gap approaches, food security will worsen towards the beginning of 2017, thereby compounding malnutrition. An RRM conducted in February 20th 2017 , showed Proxy GAM ( 18.4 % ) and Proxy SAM ( 5.0% ) with Proxy MAM ( 13.4 % ) . MUAC <23.0 Pregnant Mothers was at 21.0 % . UNIDO runs 4 TSFP/OTP /BSFP sites within Panyijjar County and plans to scale up opening an outreach site to the surrounding communities. IRC & IMC covers the remainder of the count

**2. Needs assessment**

UNIDO has capable technical staff employed and dedicated to ensure the needs of our target groups are met adequately working in line with the DO NO HARM principle in bridging the gaps ( knowledge management , counselling of caregivers on importance of YCF practices , Screening and admission of Children Under 5s into respective programs , working with the national and cluster focus in collecting Nutrition information to better guide responses across the country i.e SMARTs ) in our operation areas .In

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**3. Description Of Beneficiaries**

This allocation seeks to directly reach out to 18,200 beneficiaries .Out of this 5400 Boys & 6400 Girls U5s , in Mayendit County . This is inclusive of Children Under 5s , IDPs and Host community beneficiaries . We will also target 2500 Men & 3900 Women in Health Education sessions as we seek to promote MIYCN practices which eventually plays a big role in reduction of malnutrition related morbidity and mortality rates .Under 5 Boys and Girls will be reached with SAM & MAM treatment, screening will be done as well to be able to know the malnutrition categories amongst other activities as is in the log frame .

**4. Grant Request Justification**

UNIDO having been implementing partners in the proposed locations through routine programming as well as rapid assessments is well informed of the needs/gaps in line with the cluster priority for 2017 in matters relating to averting levels of famine in Mayendit and Acute malnutrition in Panyijar counties of South Sudan . Activities proposed include , Treatment of severe and moderate acute malnutrition among under-five children and PLWs , Continuous monitoring, surveillance and analysis of the evolving nutrition situation and IYCF-E counselling for PLWs and under-five children .Proposed Funds shall be complementary to, and not duplicative of, resources available from other sources .UNIDO is also eligible for funding being a HRP partner with demonstrated capacity to implement immediately priority activities in prioritized locations, in line with cluster strategies taking into account CERF supported interventions consistent with basic humanitarian principles of humanity, neutrality and impartiality. UNIDO is better placed to serve and meet the population's needs as the different components are integrated. UNIDO has a good understanding of the geographical area and movement of Host Communities in the phase of shocks such as conflicts and sporadic fights .. UNIDO has an existing PCA with UNICEF for SAM management and an FLA with WFP for MAM management. These will enable the organization to timely request for supplies to respond to the nutrition emergency needs in the mentioned county. Despite the fact that UNIDO is a national NGO, it has a proven strong technical capacity adequate for offering nutrition services to the needy in the conflict affected regions. UNIDO has employed local staffs both men and women( promoting gender equality ) for purposes of continuity and sustainability of the program even during shocks such as conflict where International staff would otherwise evacuate the area. Throughout its operation in these areas, UNIDO has continually created good working relations with the local authorities and the community thus creating a sense of ownership for the programs and also active participation in program activities. UNIDO has the human technical expertise and financial accountability policy to maximize service delivery to the undeserved young children boys & Girls, who are experiencing acute malnutrition in the mentioned Counties.. UNIDO will exert more efforts & cooperate with other implementing agencies in the areas since this intervention is not a standalone activity and will show strong commitment to its core values as well as to project implementation strategies. Capacity building to the CHD and nutrition workers (male and female) through training's and on job trainings will be key /is ongoing as a way of providing sustainability in the program and ownership. UNIDO will uphold the CHF mandate which looks at providing resources in support of most critical Lifesaving elements of the humanitarian operation in Mayendit /panyijar counties, southern Unity focusing primarily on the HRP objective of saving lives and alleviating suffering through multi-sectoral assistance. The above needs identified, proposed interventions and how they will contribute to addressing the needs of mayendit and Panyijar communities was assessed by our Monitoring & Evaluation manager in close collaboration with the county authorities for sustainable results.

### **5. Complementarity**

UNIDO will complement previous existing nutrition interventions in Mayendit and Panyijar counties implemented by well trained staff and CNWs. This project is a continuation of UNIDO's ongoing nutrition program to host community & IDPs in Mayendit & Panyijar Counties and will help UNIDO continue responding to nutrition emergency needs throughout the remainder of 2017 . . Given the close link between malnutrition and other illnesses and infections, UNIDO will continue to integrate nutrition programming with Health by participating in NIDs, FSL( Through Kitchen gardens formation), Education (Creating awareness in TLS's) and WASH(sanitation awareness sessions) activities to strengthen the response. Access to basic services for women of reproductive age , Men and under 5 children Boys and Girls remain inadequate, therefore UNIDO nutrition department will continue with the close multi sectoral link as mentioned above to address these challenges . In Nyal ,we will continue to work hand in hand with the existing IPs to avoid duplication of activities and adhere to National Nutrition guidelines to achieve maximum outcomes at the end of the project period .UNIDO being HPF 2 partners for lot 15 we will ensure we complement the Objectives set forth by HPF as well.

### **LOGICAL FRAMEWORK**

#### **Overall project objective**

UNIDO's overall objective is to work closely with the cluster in ensuring delivery of quality lifesaving management of acute malnutrition to the most vulnerable and at risk ,ensure enhanced needs analysis of the nutrition situation and robust monitoring of interventions as well as increase access to integrated program-mes geared towards elevating malnutrition related deaths in Unity .This will ensure Provision of high-impact nutrition Intervention services to children under 5 Children 0-59 months (boys and girls) Host community, IDPs both Male and Female ,flood affected people both Male and Female & other vulnerable groups in the hard-to-reach and conflict affected County of Mayendit by August 2017 and continue supporting the Re equipping of nutrition service delivery whose infrastructure and assets were partially destroyed in Mayendit south County of Unity state .

NUTRITION		
Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Deliver quality lifesaving management of acute malnutrition for the most vulnerable and at risk.	SO1: Save lives and alleviate the suffering of those most in need of assistance and protection	60
Increase access to integrated programmes preventing under nutrition for the most vulnerable and at risk.	SO2: Protect the rights and uphold the dignity of the most vulnerable	20
Ensure enhanced analysis of the nutrition situation and robust monitoring and coordination of emergency nutrition responses.	SO2: Protect the rights and uphold the dignity of the most vulnerable	10
Increase access to integrated nutrition, health and WASH FSL responses in counties with critical levels of acute malnutrition.	SO3: Support at-risk communities to sustain their capacity to cope with significant threats	10

**Contribution to Cluster/Sector Objectives :** This project will contribute to the overall CERF & SSHF SA1 2017 objective as in the allocation strategy to address life-threatening needs due to severe and moderate acute malnutrition in areas where the level of need is famine, serious or critical (IPC Phase 5,4 or 3). Cluster Objective 1: UNIDO will implement comprehensive nutrition programmes through OTP, and IYCF/IYCF-E service provision including active case finding and defaulter tracing. We will provide services in Mayendit and Panyijar where a multisectoral project is already in place. Cluster Objective 2: All nutrition interventions are integrated into existing health services by UNIDO. Behavior change communication activities addressing IYCF -E messaging including early, exclusive breastfeeding will also be conducted / implemented in all supported facilities but also within MTMSGs in the community level. Cluster Objective 3: UNIDO will conduct Nutrition assessments to best understand the Nutrition status in Mayendit County which will later help inform the Nutrition Partners on the current nutrition situation .We will ensure increased access to integrated programmes preventing under nutrition through TSFP/BSFP programming as well. UNIDO will continue to be an active member of the Strategic Advisory Group and other task forces (NIWG, IYCF and CMAM) at nutrition cluster level to ensure good coordination and quality programming. UNIDO will also ensure maximum accountability to affected populations during the entire project implementation period as is stipulated in the AAP guideline through joint monitoring and involvement of the community and stakeholders in Project design .

#### Outcome 1

Increased availability, access and utilization of quality acute malnutrition treatment services, among children 6-59 months Boys and Girls , pregnant and lactating women in Mayendit and Panyijar Counties

#### Output 1.1

##### Description

Capacity building of Nutrition staff towards enhanced treatment of SAM cases for U5s both boys and Girls in Mayendit and Panyijar Counties

##### Assumptions & Risks

Peace prevails to enable Nutrition workers execute their duties

##### Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	NUTRITION	[Frontline] Estimated number of girls and boys (6-59 months) newly admitted with SAM in OTPs and treated with RUTF supplies from the pipeline			1,012	1,188	2,200
<b>Means of Verification :</b> Weekly , Monthly and Quarterly reports through NIS							
Indicator 1.1.2	NUTRITION	[Frontline] Number of girls and boys (6-59 months) with SAM screened for malaria and tested positive and treated			2,400	2,200	4,600
<b>Means of Verification :</b> Facility reports							
Indicator 1.1.3	NUTRITION	[Frontline] Number of monthly average of children (6-59 months) screened in the community during the project period (should be reported once)			2,500	2,700	5,200
<b>Means of Verification :</b> weekly ,Monthly and Quarterly reports							
Indicator 1.1.4	NUTRITION	[Frontline] Number of children (6-59 months) screened and referred for treatment of either SAM or MAM			3,450	4,050	7,500
<b>Means of Verification :</b> Referral reports to the static sites plus NIS data captured and reported to the relevant donors							
Indicator 1.1.5	NUTRITION	[Frontline] Number of functional mother-to-mother support groups					8
<b>Means of Verification :</b> Mother to Mother support Groups existing .							
Indicator 1.1.6	NUTRITION	[Frontline] Number of health workers trained in Infant and Young Child Feeding	12	24			36
<b>Means of Verification :</b> IYCF training report							
Indicator 1.1.7	NUTRITION	[Frontline] Number of nutrition sites providing integrated OTP and TSFP services in the same site					18

<b>Means of Verification</b> : facility reports							
Indicator 1.1.8	NUTRITION	[Frontline] Number of nutrition sites having required number of OTP and TSFP staff					18
<b>Means of Verification</b> : facility reports							
Indicator 1.1.9	NUTRITION	[Frontline] Percentage of SAM discharged cured (cure rate) out of the total discharged from TFP (OTP/SC) services					75
<b>Means of Verification</b> : Facility Reports							
<b>Activities</b>							
<b>Activity 1.1.1</b>							
Continuous Capacity building of 43 nutritional staff on CMAM Protocol by the end of the project period.(refresher)							
<b>Activity 1.1.2</b>							
Printing Of 4000 OTP cards and IEC materials for proper implementation and reporting by the Nutrition workers							
<b>Activity 1.1.3</b>							
Admission and treatment of 1012 boys and 1188 girls for SAM cases in OTPs and treated with RUTF							
<b>Activity 1.1.4</b>							
Screening ,Testing and treating Girls and Boys ( 6-59 Months ) for Malaria							
<b>Activity 1.1.5</b>							
Deworming Children ( 12-59 Months ) in non NID areas .							
<b>Activity 1.1.6</b>							
Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the OTP programming .							
<b>Activity 1.1.7</b>							
Capacity building of 43staff on MIYCN practices in both Mayendit and Panyijar							
<b>Output 1.2</b>							
<b>Description</b>							
Capacity building of Nutrition staff towards treatment of MAM Children U5s Boys and Girls in Mayendit and Panyijar county							
<b>Assumptions &amp; Risks</b>							
Security of staff movement prevails. Willingness of local community to receive new nutrition services. Political stability							
<b>Indicators</b>							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	NUTRITION	[Frontline] Estimated number of girls and boys (6-59 months) newly admitted with MAM and treated with RUSF supplies from the pipeline			3,036	3,564	6,600
<b>Means of Verification</b> : TSFP Reports							
Indicator 1.2.2	NUTRITION	[Frontline] Number of nutrition sites providing integrated OTP and TSFP services in the same site					18
<b>Means of Verification</b> : site reports							
Indicator 1.2.3	NUTRITION	[Frontline] Number of nutrition sites having required number of OTP and TSFP staff					18
<b>Means of Verification</b> : facility reports							
Indicator 1.2.4	NUTRITION	[Frontline] Percentage of MAM children died (death rate) out of the total discharged from TSFP					3
<b>Means of Verification</b> : Facility reports							
<b>Activities</b>							
<b>Activity 1.2.1</b>							
Admission and treatment of Children U5s 3036 Boys and 3564 Girls into the TSFP programming							
<b>Activity 1.2.2</b>							
Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the TSFP programming							
<b>Activity 1.2.3</b>							
Capacity building of staff 24 on TSFP / BSFP Programming							
<b>Outcome 2</b>							
Strengthen and support prevention of Under nutrition among children Boys and Girls 6-59 months and Pregnant and Lactating Women in mayendit and Panyijar counties .							
<b>Output 2.1</b>							

<b>Description</b>							
Strengthen through trainings of c-IYCF and IYCF-E implementation and Prevention of Child Health illness in the community using the existing MTMSGs							
<b>Assumptions &amp; Risks</b>							
Mothers continue to participate in the IYCF messaging activities. Security prevails to allow effective outreaches							
<b>Indicators</b>							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	NUTRITION	[Frontline] Number of health workers trained in Infant and Young Child Feeding	12	24			36
<b>Means of Verification</b> : training reports							
<b>Activities</b>							
<b>Activity 2.1.1</b>							
continue supporting existing MTMSGs and form 4 more in Mayendit and Panyijar counties .to help scale up sub optimal IYCF practices .							
<b>Activity 2.1.2</b>							
conduct 6 mass screening in Mayendit ( 3 ) and Panyijar ( 3 ) to ensure the communities can identify cases and access services .i.e community based management of SAM /MAM .							
<b>Activity 2.1.3</b>							
continuous support to our MTMSGs by providing them with washing soaps ( 100 boxes ) and mosquitoes nets ( 500 pcs ) as incentives especially considering the conflict makes living and working conditions harsh on them .							
<b>Activity 2.1.4</b>							
Conduct IYCF-E training for 36 staff .							
<b>Outcome 3</b>							
Ensure enhanced Needs analysis of Nutrition situation and Monitoring of effective programming .							
<b>Output 3.1</b>							
<b>Description</b>							
strengthen Nutrition information sharing to cluster by IPs							
<b>Assumptions &amp; Risks</b>							
Security will allow for Surveys to be conducted in Mayendit County .							
<b>Indicators</b>							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	NUTRITION	[Frontline] Number of pre and post SMART surveys undertaken					1
<b>Means of Verification</b> :							
<b>Activities</b>							
<b>Activity 3.1.1</b>							
Participate in SMART survey in Mayendit County							
<b>Activity 3.1.2</b>							
Celebrate World Breast feeding week in Mayendit and Panyijar Counties							
<b>Output 3.2</b>							
<b>Description</b>							
Quality and Accountability for the Affected Population mechanism functional							
<b>Assumptions &amp; Risks</b>							
Assumptions							
UNIDO has access to the sites for activities Security situation improves Funds are adequate to support the activities							
Risks							
Insecurity and limited access due to poor infrastructure and population movements increasing operational cost. Inadequate funding Political sensitivity around the assessments, use and sharing of nutrition data and information							
<b>Indicators</b>							

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.2.1	NUTRITION	[Frontline] Percentage of PLWs who consider the complaints mechanisms effective, Confidential and safe.					80

**Means of Verification** : QAAP supervision reports

**Activities**

**Activity 3.2.1**

Monitor the progress made by the nutrition team in ensuring QAAP, and involvement of the community in QAAP

**Outcome 4**

Increase access to integrated Nutrition , Health , WASH and FSL Services in counties affected by acute malnutrition .

**Output 4.1**

**Description**

Ensure coordination and synergy with other sectors in responding to acute malnutrition

**Assumptions & Risks**

Other sectors will be flexible to cooperate and participate in the activities for better nutrition responses

**Indicators**

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 4.1.1	NUTRITION	[Frontline] Number of health, WASH, nutrition sessions conducted by community nutrition workers					1

**Means of Verification** : Reports from the community health workers on integration activities

**Activities**

**Activity 4.1.1**

Coordinate and work with WASH & HEALTH department in celebrating world water day , NIDs and Malaria Testing and treatment for Health .

**Additional Targets :**

**M & R**

**Monitoring & Reporting plan**

UNIDO shall monitor the project supervised by the Nutrition officers & Nutrition Assistants on ground and the Nutrition Manager based in Juba. This will be technically supported by the Programme Monitoring & Evaluation Manager who will support field teams to establish a detailed monitoring plan which will be used to guide teams in collecting appropriate and timely data. Monitoring tools (indicator tracking template) will include the Departmental Questionnaires, CHF reporting tool, nutrition cluster tool, Programme Tally sheets, and Pictorial evidence especially during HF visits, we will also use FGDs with the Health Workers and the local Authority to collect views on how the project is impacting on their lives. The above mentioned tools will be used during the implementation cycle which will be part of the monitoring components throughout the life cycle of the program. The tools will allow routine nutrition monitoring data to be collected and analyzed in one place and allow for easy disaggregation across time and geographic location. There will also be monthly joint supervisory visits together with the CHD using the QSC tool in order to see the HFs compliance as per the HSS pillars. The databases and additional monitoring tools such as supervisory checklists, staff appraisals, training reports and post-distribution monitoring reports will feed into an Indicator Performance Tracking Table (IPTT). The IPTT will allow the program to track progress towards results and indicators on a monthly basis throughout the project period. Internal monthly reports will provide information to management on the progress of activities and the impact they are having on the communities. Donor reports will also be submitted as per the time line. Activities will be continuously monitored by the project team and will be formally monitored on a routine basis by the Health and Nutrition Project Manager supported by the Monitoring and Evaluation Officer. UNIDO and its stakeholders and actors will entirely take up the role and responsibilities for collecting, recording, reporting, and using information as M&E is a collective duty. The local authorities in Monitoring and Evaluation is a participatory activity by both UNIDO ,the CHD staff and the SSRA . Security is given by the SSRA especially when doing HH visits .The reports are always shared with the CHD for ownership of the project

**Workplan**

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Continuous Capacity building of 43 nutritional staff on CMAM Protocol by the end of the project period.(refresher)	2017						X		X				
Activity 1.1.2: Printing Of 4000 OTP cards and IEC materials for proper implementation and reporting by the Nutrition workers	2017				X								
Activity 1.1.3: Admission and treatment of 1012 boys and 1188 girls for SAM cases in OTPs and treated with RUTF	2017				X	X	X	X	X	X	X		
Activity 1.1.4: Screening ,Testing and treating Girls and Boys ( 6-59 Months ) for Malaria	2017				X	X	X	X	X	X	X		
Activity 1.1.5: Deworming Children ( 12-59 Months ) in non NID areas .	2017						X		X				
Activity 1.1.6: Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the OTP programming .	2017				X	X	X	X	X	X	X		
Activity 1.1.7: Capacity building of 43staff on MIYCN practices in both Mayendit and Panyijar	2017					X		X		X			
Activity 1.2.1: Admission and treatment of Children U5s 3036 Boys and 3564 Girls into the TSFP programming	2017				X	X	X	X	X	X	X		
Activity 1.2.2: Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the TSFP programming	2017				X	X	X	X	X	X	X		
Activity 1.2.3: Capacity building of staff 24 on TSFP / BSFP Programming	2017				X		X		X				
Activity 2.1.1: continue supporting existing MTMSGs and form 4 more in Mayendit and Panyijar counties .to help scale up sub optimal IYCF practices .	2017				X	X	X	X	X	X	X		
Activity 2.1.2: conduct 6 mass screening in Mayendit ( 3 ) and Panyijar ( 3 ) to ensure the communities can identify cases and access services .i.e community based management of SAM /MAM .	2017				X	X	X	X	X	X	X		
Activity 2.1.3: continuous support to our MTMSGs by providing them with washing soaps ( 100 boxes ) and mosquitoes nets ( 500 pcs ) as incentives especially considering the conflict makes living and working conditions harsh on them .	2017				X								
Activity 2.1.4: Conduct IYCF-E training for 36 staff .	2017				X			X					
Activity 3.1.1: Participate in SMART survey in Mayendit County	2017								X				
Activity 3.1.2: Celebrate World Breast feeding week in Mayendit and Panyijar Counties	2017								X				
Activity 3.2.1: Monitor the progress made by the nutrition team in ensuring QAAP, and involvement of the community in QAAP	2017				X	X	X	X	X	X	X		
Activity 4.1.1: Coordinate and work with WASH & HEALTH department in celebrating world water day , NIDs and Malaria Testing and treatment for Health .	2017				X	X	X	X	X	X	X		

**OTHER INFO**

**Accountability to Affected Populations**

UNIDO seeks to be accountable to the women, men, boys and girls whose lives it aims to improve, and places this responsibility at the core of its humanitarian policy. As a matter of human rights and meaningful programming, UNIDO defines Accountability to Affected Populations (AAP) as “an active commitment by the organization to use power responsibly by taking account of, giving account to and being held to account by the people it seeks to assist”.

By being more accountable to affected populations Men, Women, Boys and Girl UNIDO will do this by increasing Nyal, Maajak, Nyadong and Duong Communities participation and feedback in programme identification, design, delivery and lesson learning. UNIDO seeks to achieve programmes of higher quality, with greater and more sustainable impact. The project will increase the space for Mayendit and Nyal community to shape their own recovery especially after the recent invasion by government forces and for UNIDO to better deliver against its commitments to stakeholders, including the people UNIDO assists and the resource partners who make assistance possible. UNIDO will ensure effective information sharing and communication channels by sharing information about UNIDO programmes in a timely, accessible and inclusive way. This will put Mayendit and Nyal community in a position to understand and shape decisions that impact their lives. UNIDO is committed to ensure that people receiving support participate in and influence all steps of the programme cycle, including initial assessment, project design, beneficiary selection, implementation, monitoring and evaluations. Systems of community representation must be fair and representative, enabling the most marginalized, vulnerable and affected to have a voice. UNIDO will use FGDs using focus groups as a method of participation gives a voice to those in the community who are unable to speak up in a larger meeting or setting. Mayendit and Nyal community members will use this format on a recurring basis to gain community input. With attention to their composition, such groups can counter unrepresentative power structures, gender imbalances, and fear of losing assistance when issuing a complaint or other factors that may inhibit free and open speech. Being members of the QAAP TWG we will ensure we monitor and take into account Percentage of PLWs/care givers who are aware of their rights and entitlements with respect to nutrition programs.

### **Implementation Plan**

In view of carrying out the integrated Community management of Acute malnutrition in 4 sites in Nyal and 12 sites in Mayendit with prospective scalling up with 2 more static sites and an outreach, SAM cases identification will be carried out at both community level (HH) and facility level by our trained CHWs and CNWs. UNIDO has been trained and has expertise ready to roll out the new IYCF guidelines in South Sudan which will be more participatory at community level implemented by the IYCF counselors to be recruited spearheaded by the trained Nutrition Officers. As a result of the continuing conflict in Unity state, staff turnover due to displacements is a major concern which is already being looked into. This nutrition project will be directly implemented by UNIDO personnel in close collaboration with the local authority, other IPs and stakeholders. Clear definition of management responsibilities, clear arrangements for coordination of implementation across different stakeholders and IPs, financial management will put be in place to manage the successful implementation of the project arrangements. Monthly management reports in line with project targets, the state of financial resources, and summary of expenditures, shall be compiled. These will result to quarterly programmatic and financial reports detailing progress made in accordance with the project activity implementation requirements. UNIDO nutrition manager and finance manager will ensure that all necessary reports are prepared, compiled and submitted at the end of each quarter. Various tools e.g. observation, review of documentation, key informants techniques will be used to capture and document the project performance. Project stakeholders and beneficiaries feedback will play a vital role in assessing the extent of project success. This will help UNIDO in restructuring the project implementation course (if needful) in order to maximally deliver the project objectives. Above all UNIDO nutrition department will coordinate with its FSL, WASH, HEALTH, EDUCATION and PROTECTION departments to ensure multi sectoral approach to humanitarian Aid in Nyal and mayendit

### **Coordination with other Organizations in project area**

Name of the organization	Areas/activities of collaboration and rationale
SAMRITAN PURSE	REFERAL OF TSFP cases

### **Environment Marker Of The Project**

B+: Medium environmental impact with mitigation (sector guidance)

### **Gender Marker Of The Project**

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

### **Justify Chosen Gender Marker Code**

proposed activities promote community systems and structures that ensure the participation of women and men, boys and girls ensuring everyone has the opportunity to participate in all activities. To ensure the chosen gender marker is upheld, UNIDO will ensure coordination and facilitation of excluded / disadvantaged groups in order for them to be able to access the services provided through liaising with the authorities and other IPs on ground and negotiate for access to services by all. Our Proposed Nutrition activities are in line with UNIDOs Protection sector activities which support mechanisms for the systematic identification and reporting of cases of sexual and gender based violence; provision of support to GBV survivors; and ensuring linkages with the protection cluster/GBV sub-cluster. Also our activities and indicators are disaggregated by sex and age not forgetting the beneficiary description by age and sex. UNIDOs gender dimensions are considered in the entire project from needs assessment, project implementation activities and project outcomes. Gender dimensions have been integrated in all parts of the project including in needs assessment, project implementation activities and project outcome

### **Protection Mainstreaming**

Man made (War) and natural (Floods) emergencies in South Sudan affect girls, boys, women and men differently; each is susceptible to different risks and each is victimized in different ways. UNIDO has given priority to the safety and dignity of beneficiaries and considered the principles of Do No Harm in the proposed project. Nutrition dept will work closely with the Child protection dept as we seek to understand these differences and ensure that the project assists the most vulnerable in Mayendit and Nyal without putting anyone at increased risk. Building a protective environment for Boys, Girls, Men and Women involves understanding the distinct nature and the extent of violence, exploitation and abuse that girls, boys, Men and Women experience. It also involves ensuring that all response activities take into account the different needs, concerns and capacities of girls and boys. UNIDO will in Collaboration with its other departments promote activities that gear towards protection mainstreaming which include and not limited to; Addressing harmful attitudes, customs and practices, Encouraging open discussion on child protection issues in the community and broader society, Develop children's life skills, knowledge and participation; Implementing ongoing and effective monitoring, reporting and oversight among others. Children in emergencies may be at particular risk of violence, exploitation and abuse given their level of dependence, their limited ability to protect themselves and their limited and relative power and participation in decision-making processes. Because they have had relatively little experience of life, children are more easily exploited, tricked or coerced than adults. UNIDO through this project will analyse and take into consideration the needs, priorities and capacities of both the female and male population which are far more likely to improve the lives and dignity of those affected by conflict or disaster. The above will support the development of self-protection capacities and assist affected population's to claim their rights

**Country Specific Information****Safety and Security**

UNITY state is one of the 3 conflict affected states in South Sudan with sporadic attacks and fighting. The beneficiaries here in have recently experienced dire humanitarian need for assistance across board. UNIDO having been operational in Mayendit and Nyal for the longest time now understands and is well conversant with the community's needs and measures to take to ensure the safety of the host community and UNIDO staff is well. Though not easy working in volatile areas, UNIDO staff are dedicated to serve the community and as we speak, the grass root staff i.e The nutrition Assistants, CNW and CHWs are on ground serving the community together with relocatable staff. UNIDO has a policy that ensures Staff security is Prioritized at any given time. Evacuations (especially for international staff ) are planned on need basis by UNIDO through the logistics department in coordination with other IPs in the Area of Operation and the Logs Cluster. Both Mayendit and Nyal are secure for implementation

**Access**

Mayendit and Nyal are both accessible by air .The southern Part gets cut off during the rainy season and as a result UNIDO has in the past used canoes and Boats to transport supplies to the South since the Logs cluster had not Green lighted the Airstrip in Mayendit Headquarter for landing and supplies were delivered to the neighboring Leer county which then posed a crisis on serving the southern community. As we speak all locations are accessible. We plan to make use of charters to ferry supplies directly to the Areas of operation from Juba since Leer has not opened up yet.

**BUDGET**

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
<b>Staff and Other Personnel Costs</b>							
1.1	Nutrition Project Manager 50%	D	1	4,500.00	6	50.00	13,500.00
	<i>Nutrition Manager staff involve in Project Implementation and reporting to stakeholders working 50%</i>						
1.2	Nutrition Project Officer 50%	D	4	2,750.00	6	50.00	33,000.00
	<i>Nutrition Officer are the technical Staffs implementing project activities in the field locations working 100% on the project. One New Nutritionist to be recruited for the SC</i>						
1.3	Nutrition Project Assistants 50%	D	3	1,500.00	6	50.00	13,500.00
	<i>Nutrition Project Assistant Staffs Implementing project activities supporting the the Technical Staffs LoE is 100%</i>						
1.4	Community Nutrition Workers 50%	D	43	233.00	6	50.00	30,057.00
	<i>CNW staffs responsible for directing the project implementors</i>						
1.5	IYCF Counsellors 50%	D	15	160.00	6	50.00	7,200.00
	<i>IYCF staffs all direct and distribute nutrition items and direct Project implementors</i>						
1.6	Executive Director 20%	S	1	8,900.00	6	20.00	10,680.00
	<i>Staffs responsible for Overall fund accountability and management</i>						
1.7	Program Coordinator 20%	S	1	6,000.00	6	20.00	7,200.00
	<i>Program Coordinator is the staff supervising project staffs</i>						
1.8	Finance Director 20%	S	1	7,400.00	6	20.00	8,880.00
	<i>Finance Director is the staff responsible for overall supervision of Financial reporting and budget control.</i>						
1.9	M & E Manager 20%	S	1	5,500.00	6	20.00	6,600.00
	<i>Staff undertaking project monitoring and evaluation reporting to stakeholders.</i>						
1.10	Logistics and Procurement Manager 20%	S	1	4,000.00	6	20.00	4,800.00
	<i>Staffs involved in staff Logistics and procurement of project supplies</i>						
1.11	Finance Manager 20%	S	1	4,000.00	6	20.00	4,800.00
	<i>Staffs undertaking Financial reports and budget control</i>						
1.12	Human Resources Officer 20%	S	1	2,500.00	6	20.00	3,000.00
	<i>Management contracts and welfare of all UNIDO staffs both on Ground and in the Head Office in Juba.</i>						

1.13	Logistics Supervisor 20%	S	1	3,000.00	6	20.00	3,600.00
	<i>Supervise all the Logistics and Procurement Procedures of the Organization</i>						
1.14	Logistics and Procurement Officer 20%	S	1	1,500.00	6	20.00	1,800.00
	<i>Undertake the responsibility of daily logistics and Procurement in the Office</i>						
1.15	Finance Assistants	S	1	1,500.00	6	20.00	1,800.00
	<i>Undertake all the control of Petty cash and take records on cash control in the Office.</i>						
1.16	Drivers 20%	S	1	900.00	6	20.00	1,080.00
	<i>Staffs providing Logistical support to project activities</i>						
1.17	Field Operation manager	S	1	4,000.00	6	20.00	4,800.00
	<i>Staff Responsible for overall field operation and welfare of field activities</i>						
1.18	ICT Officer	S	1	1,500.00	6	20.00	1,800.00
	<i>Staffs responsible for clear maintenance of ICT work in the office starting from computer maintenance, printers software and hardware management for Office use.</i>						
1.19	Field Finance Officer	S	1	2,500.00	6	20.00	3,000.00
	<i>Responsible for managing field Financial report and Budget control</i>						
1.20	Field Logistics Officer	S	1	1,500.00	6	20.00	1,800.00
	<i>Supplies of Logistical items on the field locations</i>						
1.21	Medical insurance cover	S	1	5,470.00	6	20.00	6,564.00
	<i>Staffs for project insured at 20%</i>						
1.22	NSIF 17% Employers Contribution	S	1	9,299.00	6	20.00	11,158.80
	<i>Employer contribution to staff insurance</i>						
1.23	2 SC Clinical officers for Rubkuay PHCC & Dablual PHCU ( To be upgraded to PHCC)	D	2	2,135.00	6	100.00	25,620.00
	<i>For Rubkuay PHCC &amp; Dablual PHCU ( To be upgraded to PHCC at a monthly rate of 2135usd</i>						
	<b>Section Total</b>						<b>206,239.80</b>
<b>Supplies, Commodities, Materials</b>							
2.1	Continuous Capacity building of 43 nutritional staff on CMAM Protocol by the end of the project period.(refresher)	D	59	50.00	3	100.00	8,850.00
	<i>10usd for water and soda 10usd for Stationery, 20usd for meal 10usd for hall hire and communication and printing document that makes a total of 50usd per pax per day (50 * 59*3days)</i>						
2.2	Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the OTP programming .	D	59	5.00	24	100.00	7,080.00
	<i>Incentive to IYCF and CNWs 5usd per week for 59 pax (59*5*24weeks</i>						
2.3	Capacity building of 43staff on MIYCN practices in both Mayendit and Panyijar	D	59	50.00	3	100.00	8,850.00
	<i>10usd for water and soda 10usd for Stationery, 20usd for meal 10usd for hall hire and communication and printing document that makes a total of 50usd per pax per day (50 * 59*3days)</i>						
2.4	Capacity building of staff 24 on TSFP / BSFP Programming	D	24	50.00	3	100.00	3,600.00
	<i>10usd for water and soda 10usd for Stationery, 20usd for meal 10usd for hall hire and communication and printing document that makes a total of 50usd per pax per day (50 * 24*3days)</i>						
2.5	Celebrate World breast feeding week for Mayendit and Panyijar	D	1	4,000.00	2	100.00	8,000.00
	<i>Lumsum for bannars meal for stakeholders, public address system, truck hiring incentives for mobilizers at 4000 for each county</i>						
2.6	IYCF - E Training	D	15	50.00	3	100.00	2,250.00

	<i>10usd for water and soda 10usd for Stationery, 20usd for meal 10usd for hall hire and communication and printing document that makes a total of 50usd per pax per day (50 * 15*3days)</i>						
2.7	Purchase of 100 boxes of soap	D	90	100.00	1	100.00	9,000.00
	<i>1 box of soap cost 90usd</i>						
2.8	Purchases of 500 mosquito nets	D	10	500.00	1	100.00	5,000.00
	<i>1 pcs of mosquito net cost 10usd</i>						
2.9	6 mass screening for Mayendit and Panyijar	D	59	5.00	6	100.00	1,770.00
	<i>Incentive to IYCF and CNWs 5usd per week for 59 pax (59*5*6weeks)</i>						
2.10	Formation of 4 new MTMSGs in addition to existing 12	D	4	2,000.00	1	100.00	8,000.00
	<i>lumsun amount for the formation @ 2000 per each group</i>						
2.11	Printing of 4000 TSFPs cards	D	4000	3.00	1	100.00	12,000.00
	<i>1 TSFPs cards cost 3usd</i>						
	<b>Section Total</b>						<b>74,400.00</b>
<b>Equipment</b>							
3.1	Wireless router for field base	D	3	1,200.00	1	100.00	3,600.00
	<i>A complete set of wireless router cost 1200usd</i>						
3.2	DSP System	D	1	1,600.00	1	100.00	1,600.00
	<i>Direct Signal processor used with the server to control internet and online devices cost 1600usd for Juba office</i>						
3.3	Quickbook 2016	D	1	1,600.00	1	100.00	1,600.00
	<i>For accounting and generating finanacial reports in time i user is 1600usd</i>						
3.4	Server 2014 Juba base	D	1	1,500.00	1	100.00	1,500.00
	<i>A complete set of server for document back up cost 1500usd</i>						
	<b>Section Total</b>						<b>8,300.00</b>
<b>Contractual Services</b>							
4.1	Restablishing 1 PHCC (Mayendit South)	D	1	8,000.00	1	100.00	8,000.00
	<i>A lumsun of 8000usd for the OTP in Mayendit South the Cost cater for the cost of local materials and iron sheets</i>						
4.2	Construction of 2 new OTP sites,	D	2	10,000.00	1	100.00	20,000.00
	<i>Lumsun amount of 10000usd for one OTP site</i>						
4.3	Establish 2 SCs	D	2	50,000.00	1	100.00	100,000.00
	<i>Lumpsum amount of 50,000usd per SC one in Rubkuay and one in Dablual as proposed by Health and Nutrition cluster</i>						
	<b>Section Total</b>						<b>128,000.00</b>
<b>Travel</b>							
5.1	Staff perdiem	D	7	200.00	1	100.00	1,400.00
	<i>Per diem during project implementation @ 200usd for 7 staff</i>						
5.2	Visa and Alien registration for international staff	D	5	100.00	2	100.00	1,000.00
	<i>5 Visas @ 100usd per staff per quarter</i>						
5.3	Flight on UNHAS form Juba to the project location	D	7	550.00	2	100.00	7,700.00
	<i>3 return flights @ 275usd per flight to field locations</i>						

5.4	Air charter from Juba to the project location to transport project supplies	D	2	8,775.00	1	100.00	17,550.00
	<i>4 flights @ 8775usd per flight</i>						
	<b>Section Total</b>						<b>27,650.00</b>
<b>General Operating and Other Direct Costs</b>							
7.1	Car fuel 20%	S	1	2,600.00	6	20.00	3,120.00
	<i>20% of 2600usd per month for six months</i>						
7.2	Car Maintenance 20%	S	1	900.00	6	20.00	1,080.00
	<i>20% of 900usd per month for six months</i>						
7.3	Car Insurance 18.79%	S	1	250.00	6	18.79	281.85
	<i>18.79% of 250usd per month for six months</i>						
7.4	Generator fuel 20%	S	1	600.00	6	20.00	720.00
	<i>20% of 600usd per month for six months</i>						
7.5	Generator Maintenance 20%	S	1	500.00	6	20.00	600.00
	<i>20% of 500usd per month for six months</i>						
7.6	Branding 20%	S	1	249.92	6	20.00	299.90
	<i>20% of 249.92usd per month for six months</i>						
7.7	Stationeries 20%	S	1	2,500.00	6	20.00	3,000.00
	<i>20% of 2500usd per month for six months</i>						
7.8	Mobile Airtime 20%	S	1	600.00	6	20.00	720.00
	<i>20% of 600usd per month for six months</i>						
7.9	Thuraya Airtime 20%	S	1	900.00	6	20.00	1,080.00
	<i>20% of 900usd per month for six months</i>						
7.10	Visibility 20%	S	1	600.00	6	20.00	720.00
	<i>20% of 600usd per month for six months</i>						
7.11	Bank Charges 20%	S	1	900.00	6	20.00	1,080.00
	<i>20% of 900usd per month for six months</i>						
7.12	Office utilities 20%	S	1	360.00	6	20.00	432.00
	<i>20% of 360usd per month for six months</i>						
7.13	Internet Subscription 20%	S	1	600.00	6	20.00	720.00
	<i>20% of 600usd per month for six months</i>						
7.14	Juba Office rent 20%	S	1	4,000.00	6	20.00	4,800.00
	<i>20% of 4000usd per month for six months</i>						
7.15	Field Office rent 20%	S	1	3,600.00	6	20.00	4,320.00
	<i>20% of 3600usd per month for six months</i>						
7.16	Field Office maintenance 20%	S	1	2,000.00	6	20.00	2,400.00

	20% of 2000usd per month for six months						
	<b>Section Total</b>						<b>25,373.75</b>
<b>SubTotal</b>	4,513.00						<b>469,963.55</b>
Direct							361,227.00
Support							108,736.55
<b>PSC Cost</b>							
PSC Cost Percent							7.00
PSC Amount							32,897.45
<b>Total Cost</b>							<b>502,861.00</b>
<b>Project Locations</b>							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Unity -> Mayendit	72	2,886	3,528	5,937	6,657	19,008	<p>Activity 1.1.1 : Continuous Capacity building of 43 nutritional staff on CMAM Protocol by the end of the project period.(refresher)</p> <p>Activity 1.1.2 : Printing Of 4000 OTP cards and IEC materials for proper implementation and reporting by the Nutrition workers</p> <p>Activity 1.1.3 : Admission and treatment of 1012 boys and 1188 girls for SAM cases in OTPs and treated with RUTF</p> <p>Activity 1.1.4 : Screening ,Testing and treating Girls and Boys ( 6-59 Months ) for Malaria</p> <p>Activity 1.1.5 : Deworming Children ( 12-59 Months ) in non NID areas .</p> <p>Activity 1.1.6 : Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the OTP programming .</p> <p>Activity 1.1.7 : Capacity building of 43staff on MIYCN practices in both Mayendit and Panyijar</p> <p>Activity 1.2.1 : Admission and treatment of Children U5s 3036 Boys and 3564 Girls into the TSFP programming</p> <p>Activity 1.2.2 : Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the TSFP programming</p> <p>Activity 1.2.3 : Capacity building of staff 24 on TSFP / BSFP Programming</p> <p>Activity 2.1.1 : continue supporting existing MTMSGs and form 4 more in Mayendit and Panyijar counties .to help scale up sub optimal IYCF practices .</p> <p>Activity 2.1.2 : conduct 6 mass screening in Mayendit ( 3 ) and Panyijar ( 3 ) to ensure the communities can identify cases and access services .i.e community based management of SAM /MAM .</p> <p>Activity 2.1.3 : continuous support to our MTMSGs by providing them with washing soaps ( 100 boxes ) and mosquitoes nets ( 500 pcs ) as incentives especially considering the conflict makes living and working conditions harsh on them .</p> <p>Activity 2.1.4 : Conduct IYCF-E training for 36 staff .</p> <p>Activity 3.1.1 : Participate in SMART survey in Mayendit County</p> <p>Activity 3.1.2 : Celebrate World Breast feeding week in Mayendit and Panyijar Counties</p>

Unity -> Panyijiar	28	814	1,372	2,309	2,589	7,084	<p>Activity 1.1.1 : Continuous Capacity building of 43 nutritional staff on CMAM Protocol by the end of the project period.(refresher)</p> <p>Activity 1.1.2 : Printing Of 4000 OTP cards and IEC materials for proper implementation and reporting by the Nutrition workers</p> <p>Activity 1.1.3 : Admission and treatment of 1012 boys and 1188 girls for SAM cases in OTPs and treated with RUTF</p> <p>Activity 1.1.4 : Screening ,Testing and treating Girls and Boys ( 6-59 Months ) for Malaria</p> <p>Activity 1.1.5 : Deworming Children ( 12-59 Months ) in non NID areas .</p> <p>Activity 1.1.6 : Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the OTP programming .</p> <p>Activity 1.1.7 : Capacity building of 43staff on MIYCN practices in both Mayendit and Panyijar</p> <p>Activity 1.2.1 : Admission and treatment of Children U5s 3036 Boys and 3564 Girls into the TSFP programming</p> <p>Activity 1.2.2 : Community and Site screening of 3112 Boys and 3200 Girls in Mayendit and Panyijar Counties for admission into the TSFP programming</p> <p>Activity 1.2.3 : Capacity building of staff 24 on TSFP / BSFP Programming</p> <p>Activity 2.1.1 : continue supporting existing MTMSGs and form 4 more in Mayendit and Panyijar counties .to help scale up sub optimal IYCF practices .</p> <p>Activity 2.1.2 : conduct 6 mass screening in Mayendit ( 3 ) and Panyijar ( 3 ) to ensure the communities can identify cases and access services .i.e community based management of SAM /MAM .</p> <p>Activity 2.1.3 : continuous support to our MTMSGs by providing them with washing soaps ( 100 boxes ) and mosquitoes nets ( 500 pcs ) as incentives especially considering the conflict makes living and working conditions harsh on them .</p> <p>Activity 2.1.4 : Conduct IYCF-E training for 36 staff .</p> <p>Activity 3.1.1 : Participate in SMART survey in Mayendit County</p> <p>Activity 3.1.2 : Celebrate World Breast feeding week in Mayendit and Panyijar Counties</p>
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Documents	
Category Name	Document Description
Project Supporting Documents	SSHF_2017_SA1_UNIDO_Estimate cost for SC.pdf
Project Supporting Documents	SSHF_2017_SA1_UNIDO_Estimate cost for OTP.pdf