



Project proposal summary					
Project Title:	Providing life-saving nutrition services among children under five and pregnant and lactating women by supporting 20 existing health facilities supported by a network of community health volunteers in four priority governorates .				
Duration of the project:	Project start data	February 2024	Project end date	February 2027	
The project Location:	Sanaa - Al Hudaydah - Taiz - Aden				
The number of beneficiaries:	For detailed details - see Appendix				
	Totals	Men	Women	Boys	Girls
	7,200	0	3,240	3,960	3,240
	100%	0	0	55%	45%
Total amount required:	\$952,241.78 - See detailed budget in Appendix				
Project goal:	To contribute to reducing the rates of morbidity and mortality resulting from acute malnutrition among children under the age of five and pregnant and breastfeeding women in the targeted districts of Yemen's governorates .				
Project problem:	High rates of morbidity and mortality among children under the age of five and pregnant and lactating women due to acute malnutrition, the ongoing economic crisis, and the disruption of public services.				
Project result:	Reducing morbidity and mortality rates among the most vulnerable populations due to acute malnutrition with a focus on children under five years of age and pregnant and lactating women to ensure immediate access to nutrition by strengthening existing project activities as well as establishing other activities to expand nutrition services (SAM and MAM) includes Treatment of pregnant and lactating women, infant nutrition, micronutrient supplementation, enhanced reporting)				



<p>the summary of project:</p>	<p>The project targets the highest acute malnutrition governorates (Sana'a, Al Hudaydah, Taiz and Aden) based on the Yemen Humanitarian Needs Overview 2023 and the latest nutrition cluster reports. The project ensures the provision of therapeutic and preventive nutrition services by implanting a community-based management program for acute malnutrition among vulnerable people with a focus on children under 5 years of age and pregnant and lactating women. SANID will support existing health facilities by operating and delivering OTP/SFP/IYCF services including capacity building, incentives, screening and treatment of SAM and SAM and referring SAM and SAM cases to the nearest SC/TFC in accordance with national management guidelines Community acute malnutrition in Yemen. In addition to community awareness services by deploying a network of volunteers in the field of community health and conducting health services and nutritional awareness campaigns in the targeted areas to enhance the preventive aspect and raise community awareness. In order to ensure the most cost-effective intervention, the targeted health facilities will be supported with a minimum monthly operating cost subsidy (incentive for health workers and community health volunteers, stationery, cleaning materials/infection prevention and control kits, utilities, water, etc.). Supplies, food supplies and commodities for both OTP and SFP sites will be delivered to SANID warehouses in coordination with the Ministry of Public Health, UNICEF and WFP. Furthermore, SANID will allocate a budget for local procurement of routine nutrition medicines and supplies with attention to product quality.</p>												
	<table border="1"> <tr> <td data-bbox="409 824 1759 873"> <p>Nutrition Group – December 2023</p> </td> <td data-bbox="1759 824 1906 873"></td> </tr> <tr> <td data-bbox="409 873 1759 922"> <p>Result 1</p> </td> <td data-bbox="1759 873 1906 922"></td> </tr> <tr> <td data-bbox="409 922 1759 995"> <p>To support the management of acute malnutrition among affected populations (children under five years of age, pregnant and lactating women) in Sana'a, Al Hudaydah, Taiz and Aden governorates</p> </td> <td data-bbox="1759 922 1906 995"></td> </tr> <tr> <td data-bbox="409 995 1759 1044"> <p>Exit 1.1</p> </td> <td data-bbox="1759 995 1906 1044"></td> </tr> <tr> <td data-bbox="409 1044 1759 1117"> <p>Beneficiaries of 20 health centers have access to CU5 services , including identifying and treating cases of acute malnutrition in health facilities and community levels in the targeted districts .</p> </td> <td data-bbox="1759 1044 1906 1117"></td> </tr> <tr> <td data-bbox="409 1117 1759 1169"> <p>Assumptions and risks :</p> </td> <td data-bbox="1759 1117 1906 1169"></td> </tr> </table>	<p>Nutrition Group – December 2023</p>		<p>Result 1</p>		<p>To support the management of acute malnutrition among affected populations (children under five years of age, pregnant and lactating women) in Sana'a, Al Hudaydah, Taiz and Aden governorates</p>		<p>Exit 1.1</p>		<p>Beneficiaries of 20 health centers have access to CU5 services , including identifying and treating cases of acute malnutrition in health facilities and community levels in the targeted districts .</p>		<p>Assumptions and risks :</p>	
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Activities

Activity 1.1.1

SAND will support 20 health facilities located in four priority governorates to ensure the delivery of life-saving nutrition services to the most vulnerable people. The health workers will be selected in collaboration with the Ministry of Public Health and Population and, if possible, will be employees who previously worked in the facility and are receiving refresher training in the community. Based management of acute malnutrition (CMAM): identification, treatment and referral of SAM + cases to stabilization centres.

Activity 1.1.2

SAND will ensure that food services are provided in 20 primary health care centers, 5 days a week, according to the priorities of the Yemen Nutrition Cluster and the Ministry of Public Health and Population. All children under five years of age and pregnant and lactating women will be screened and referred to each relevant nutrition programme.

SAND will establish OTP / SFP / IYCF sites within all existing health facilities. Each OTP / SFP unit consists of 5 dedicated staff and a network of 8 community health volunteers to ensure SAM/SAM cases are managed in line with the national CMAM protocol .

Activity 1.1.3

20targeted health facilities will be supported with minimum monthly support for operating cost (incentives, stationery, cleaning materials/infection prevention and control kits, utilities, water, etc.)

Activity 1.1.4

Food supplies and goods will be delivered to each of the OTP sites And SFP to SANID warehouses in coordination with the Ministry of Public Health, UNICEF and the World Food Programme.

In addition, SAND will allocate a budget for local purchases of routine nutritional medicines and supplies while paying attention to product quality

Activity 1.1.5

Regular transfer of qualitativeCMAM data to MoH/UNICEF/WFP

Exit 2.1

19,800 vulnerable people receive health education, promotions and key messages at health facility and community levels in each targeted governorate .

Assumptions and risks							
Availability of community health volunteers in particular in the family in sufficient numbers. Target locations may change in the event of sudden drastic changes in population movements. Access restrictions							
Indicators							
			Beneficiaries of the end of the course				End of course
code	gathering	Indicator	Sana'a	Hodeidah	Taiz	Aden	Goal
Indicator 2.1.1	feed	Number of community health volunteers trained in basic nutrition topics, including malnutrition screening, referral, health education and reporting	40	40	40	40	160
Methods of verification: attendance sheets, pre-test, and post-test							
Indicator 2.1.2	feed	Number of people who received health and nutrition awareness, including information distribution, education and health education	19800	19800	19800	19800	79,200
:Means of verification M&R report , photo, weekly reports of health supervisors, and register of community health volunteers Target account: 160 community health volunteers * 15 families * 3 people * 11 months							
Indicator 2.1.3	feed	Number of CU5 dewormed and eaten by community health volunteers	10,000	10,000	10,000	10,000	40,000
Means of verification: Community health volunteer records, weekly reports Target Account: A CU5 checked every 11 months can be included in a deworming programme							
Indicator 2.1.3	feed	Number of CU5 that received vitamin A and micronutrients by community health volunteers	10,000	10,000	10,000	10,000	40,000

	<p>Means of verification: Community health volunteer records, weekly reports</p> <p>Activities</p> <p>Activity 2.1.1</p> <p>Basic and refresher training will be conducted for the 160 selected community health volunteers in accordance with national guidelines in coordination with the Ministry of Public Health and Population/Public Health Office/Directorate of Public Health/UNICEF and WHO</p> <p>Activity 2.1.2</p> <p>Implementation of community health volunteer activities and MUAC screening for CU5 /pregnant and lactating women at community level and referring to supported OTP/SFP sites</p> <p>Activity 2.1.3</p> <p>Community Health Volunteers will ensure community awareness and conduct health/nutrition/infant and young child feeding education as well as deworming and MNP supplementation .</p>
<p>Implementation strategy</p>	<p>According to the first objective of the Yemen Humanitarian Response Plan 2023, the project aims to achieve the following objectives:</p> <p>“Reducing and preventing the prevalence of acute malnutrition among children under five years of age, pregnant and lactating women, and other vulnerable population groups</p> <p>Expand the coverage of nutrition services and remove barriers that prevent families from using them</p> <p>SANED, in close coordination with the Ministry of Health/General Governorate Health, will continue to support 20 health facilities in the targeted location in four priority governorates (Sanaa, Al Hudaydah, Taiz and Aden). In order to ensure the provision of food services in 20 primary health care centers 5 days a week according to the priorities identified by the Yemen Nutrition Cluster and the Ministry of Public Health and Population as an integrated method of intervention, SAND will establish OTP/SFP/IYCF sites within each existing health facility. Each OTP/SFP unit consists of 5 dedicated staff and a network of 8 community health volunteers to ensure that SAM/SAM cases among children under 5 years of age and pregnant and lactating women are managed in line with the national CMAM protocol . Health workers and community health volunteers will be selected in collaboration with the Ministry of Public Health and Population and, if possible, staff who were previously working in the facility will be selected and will receive refresher training in Community Management of Acute Malnutrition (CMAM): identification, treatment of severe acute malnutrition cases and acute malnutrition referral Severe (SAM +). Cases are</p>



	<p>transferred to the nearest stabilization centres. In addition, the targeted health facilities will be supported with minimum monthly operating cost support (incentives for health workers and community health volunteers, stationery, cleaning materials/infection prevention and control kits, utilities, water, etc. Regarding supplies, supplies will be delivered And food commodities for both OTP and SFP sites to SANID warehouses in coordination with the Ministry of Public Health, UNICEF and WFP. Furthermore, SANID will allocate a budget for local procurement of routine nutrition medicines and supplies with attention to product quality. A network of 160 community health volunteers will be deployed and will be trained/retrained and equipped to identify and manage the most common diseases, malnutrition screening, deworming and referral. Community Health Volunteers will receive all mobilization/health promotion/IEC materials to ensure community awareness, medical kits for deworming and MNP . Community Health Volunteers will also identify community members who need assistance with the help of family members, community and religious leaders, etc. and will conduct visits home to provide the necessary support.</p>
<p>Monitoring and reporting mechanism</p>	<p>The project is implemented in 4 governorates with a specialized project manager, who manages and supervises the daily implementation of the project. The PM is responsible for monitoring and reporting, under the supervision of the Health and Nutrition Coordinator (H&N C), Program Coordinator and Financial Coordinator. Monitoring aims to closely follow the progress achieved in the implementation of approved project activities, and thus contributes to the achievement of the indicators for each outcome, as included in the logical framework. Monthly reports on activities will be provided by the Prime Minister with the support of the Nutrition Officer for each governorate, who will be overall responsible for the quality of project implementation towards the set objectives. SAND will use an internal monthly reporting and monitoring tool, in accordance with SAND internal rules: this will include regular monitoring of financial indicators, activities and expenditures. Nutrition services provided will be monitored through daily data collection, recorded on instruments according to MoPH&P guidelines/protocols for each facility, for each weekly report also as a Community Management of Malnutrition database, which will be shared with the Public Health Offices and the Public Health Directorate of the MoPH and population for monitoring and reporting purposes.</p> <p>Monitoring sources include management reports, community reports, training records, supervisory records, field visit reports, MOPHP service delivery records, and data collection. Weekly, all field-level staff report site-specific data to the Project Manager who consolidates, analyzes and presents it to partners and key stakeholders. SAND will also use rigorous evaluation of capacity building activities to ensure that required knowledge is absorbed and applied and skills are achieved.</p> <p>This process will take place through pre- and post-test assessments at the time of training and through on-the-job assessment of skill levels several weeks after training is completed. These follow-up evaluations will be part of regular supportive supervision activities and allow SANID to implement a complaints and feedback mechanism: During project implementation SANID will call the emergency number to file complaints and ask questions. The telephone number will be maintained by a member of the Monitoring and Evaluation Team, independent of the project, who will record complaints received and forward them to senior management staff to enable an independent investigation into complaints and any negative comments.</p>



analysis :

Yemen has been experiencing a long-term protection and public health crisis for more than eight years, causing multiple drivers of malnutrition among children and mothers. This includes severe dysfunction in the health system, with frequent outbreaks of diseases – such as respiratory infections, diarrheal diseases and fevers (eg malaria). However, as reported by the Yemeni Ministry of Public Health and Population, acute malnutrition among children under 5 years of age remains the leading cause of mortality and morbidity among Yemeni children.

The lack of basic services, such as safe drinking water, sanitation and access to healthy and diverse food, is affected by economic decline, mass and recurring displacement and insecurity, especially in conflict-affected areas and front lines. The problem of malnutrition, which is widespread across Yemen and multifaceted in terms of causality, is neither limited by ethnicity or geography nor by status-based boundaries. Vulnerability is determined by population size and levels of malnutrition and acute food insecurity. It is estimated that about 1.3 mothers suffer from acute malnutrition in Yemen. In addition, the prevalence of anemia in children between the ages of 6 and 59 months is 86 percent, and among pregnant and breastfeeding women is 71 percent. The 2021 SMART survey showed that in many areas in Yemen, between 70 and 90 percent of children under 5 years of age are fed diets that do not meet minimum acceptable diet standards in terms of quality and quantity. At least one million children under the age of five and 450,000 pregnant and breastfeeding women need urgent food aid. Access to safe drinking water and sanitation services remains a challenge in many areas in Yemen, along with frequent bouts of diarrhoea, fever and respiratory infections among children. Cholera remains an additional ongoing concern. These complex causes of malnutrition are not only linked to the continuing high burden of acute and chronic malnutrition, but also lay the foundation for the deteriorating well-being and futures of both mothers and children in Yemen.

:Organization details	Organization name:	Sanid Organization for Relief and Development (SORD)
	Main contact name :	Mohammed Hamid Al-Kabous
	Position Name of the main contact within the organization :	CEO
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	Email address for primary contact name :	info.sord@sanid.org
	Organization email address :	info.sord@sanid.org

Link to the organization's website :	https://sanid.org/
Organization address :	Republic of Yemen Sana'a - Al-Hasba - Shu'ub District - Al-Hasba Al-Jamahiriya Street - behind Al-Jedry station .
Previous experience in the health sector :	<p>Sanid is an unlikely non-possible non-governmental organization and is completely dedicated to providing life provision and relief help to the most vulnerable people, displaced families and marginalized groups that were deeply affected by the ongoing armed conflict. The organization was established in 2014 with the registration certificate No. 1013 issued by the Ministry of Labor and Social, and it is the only agency approved to issue these certificates. Since its inception, the organization has implemented a variety of programs in the distribution of food, improving its livelihoods, health care and malnutrition among children under the age of 5 years, pregnant women and patients in the Sana'a and Amanat Al Asimah governorate.</p> <p>Improving access to food, primary health care, nutrition and shelter by implementing the minimum services package prepared in the plan in most governorates, directorates and regions of the Republic of Yemen.</p> <p>Improving the living and health condition of the targeted families of the most vulnerable and vulnerable families, especially among children with malnutrition, pregnant mothers and patients targeting the project.</p> <p>Increased society's access to improving life by implementing a number of activities represented in providing and distributing food to poor families, and weakening and families of children with malnutrition.</p> <p>Based on the urgent humanitarian needs of some families affected by the war and the increase in the number of needy, poor, poor and displaced families in the Capital Secretariat, the sand organization for relief and development implemented a project to distribute food baskets for the darkening and poor families and displaced in the targeted ruler and distributing food baskets to a targeted family during 2019 AD To 2023 AD</p> <p>Where the project was divided into stages and components represented in the distribution of ready-made meals into and distributing food baskets to the targeted families. Distribute the amount of cash to families.</p> <p>Since the beginning of the project, by conducting malnutrition and prevention of infectious diseases, hygiene, food practices and the behavior of healthy research for mothers and their children under the age of five at the level of the local community.</p> <p>SORD HWS is trained in effective management of community management, prevention of infectious diseases, integrated management of integrated childhood diseases for child health management and another service group .</p>



Project proposal budget to provide life-saving nutrition services among children under five years of age and pregnant and lactating women by supporting 20 existing health facilities supported by a network of community health volunteers in four priority governorates. For governorates Sanaa - Al Hudaydah - Taiz - Aden .

The governorates will be adjusted, the goals will be divided, and the amounts will be ready tomorrow

code	Description of the budget line	D/S	amount	Unit cost	Repeat duration	The percentage charged to the Swiss franc	Total cost
1. Staff and other personnel costs							
1.1	project manager	Dr	1	1,200.00	12	100.00	14 , 400.00
	<p>The Project Manager will be based in Sana'a and Aden with regular field visits to Al Hudaydah - Taiz Governorate.</p> <p>-Execute the project according to the project plan - Monitor project progress and make necessary adjustments to ensure successful completion of the project - Manage project staff and/or volunteers in accordance with the organization's established policies and practices - Ensure that all project staff receive appropriate direction for the organization and the project - Establish a communications schedule To update stakeholders including appropriate staff in the organization on the progress of the project - Review the quality of work completed with the project team on a regular basis to ensure it meets project standards - Ensure that all project financial records are up to date - Prepare financial reports and supporting documentation for funders as outlined In financing agreements - Evaluate project outcomes as identified during the planning phase - Monitor cash flow forecasts and report actual cash flow and variance to senior management on a regular basis (monthly/bi-monthly) - Ensure that project deliverables are on time, within budget and at level Quality Required - Develop forms and records to document project activities - Prepare files to ensure that all project information is appropriately documented and secured - In consultation with the appropriate manager, recruit, interview and select staff and/or volunteers with appropriate skills for project activities.</p>						
1.2	Field Nutrition Project officer	Dr	1	7 00.00	12	100.00	8,400.00

	<p>The Health and Nutrition Project Officer will be based in Sana'a and Aden with regular field visits to Al Hudaydah-Taiz Governorate.</p> <p>Under the supervision of the Project Manager, the employee will be responsible for the successful implementation of nutrition activities in assigned areas through collaboration with government health offices and mobile teams. The Nutrition Officer will provide oversight and direction to SORD Nutrition operations , facilitating good practices and ensuring compliance with the applicable implementation process for nutrition interventions – particularly in relation to the funding agreement, guidelines and priorities including planning, implementation, monitoring and follow-up. - Will support the effective delivery of inclusive, quality, high-impact nutrition interventions (HINI) as outlined within the proposal log framework and guided by the Nutrition Action Plan indicators. - Providing regular and consistent technical assistance during project implementation by mobile teams and health workers in health facilities and outreach through targeted monthly on-the-job training, regular mentoring and regular supervision with the aim of building their capacity. - The Nutrition Officer will contribute to the development of training curricula and tools and facilitate or facilitate nutrition-related trainings for health professionals such as IMAM , IYCF and others. - Support the systematic delivery of health, hygiene and nutrition education messages to the target beneficiaries of the project and the entire community. - Monitor and review feed supplies, equipment movements, storage, transportation and use at the site level. - Ensure proper documentation of achievements, lessons learned and best practices throughout the program implementation period. - Performing any other related duties assigned by the direct manager</p>						
1.3	Monitoring and evaluation officer	Dr	1	7 00.00	12	100.00	8,400.00
	<p>MEAL Officer will be based in Sana'a and Aden with regular field visits to Al Hudaydah-Taiz Governorate .</p> <p>(MEAL) The employee will ensure that quality standards and accountability are integrated into the regular daily operation of meals. The MEAL Administrator will have a key role in establishing and promoting the use of MEAL methodologies and tools to ensure that project staff and strategies: - are adequately informed of the extent to which emergency response impacts the lives of target populations and in particular , . - Facilitate the collection of evidence-based knowledge about the positive and negative impact that emergency response has on the communities we work with. - Receive regular, timely, context-specific and meaningful feedback from our staff, partners and project participants (who are targeted or not targeted by our interventions), and that the feedback effectively informs and points out areas requiring strategic attention. He/she will accomplish this through the implementation of the integrated MEAL framework , focusing on building the capacity of relevant project staff, as well as promoting and strengthening a culture of shared learning and accountability, and encouraging innovation. This includes supporting the development and integration of accountability, learning and project quality standards into project assessments, design, monitoring, review and evaluation (ADM&E) , as well as consistent documentation of learning and progress in the field.</p>						

1.4	Procurement and Logistic Assistant	Dr	1	7 00.00	12	100.00	8,400.00
<p>The Procurement Assistant will be based in Sana'a and Aden with regular visits to Taiz and Al Hudaydah Governorates .</p> <p>The Procurement and Logistics Assistant In accordance with SORD Financial Rules and Regulations, Procurement Manual and Financing Agreements, the incumbent will be responsible for ensuring timely, cost-effective and safe delivery of goods and services to the project and to assist in the implementation of well-coordinated procurement and logistics activities. His duties include: - Preparing all necessary documentation for the procurement of goods and services in accordance with SORD rules and regulations , including RFQ, RFP, contracts or any other documents as needed; - Preparing all necessary documents to handle the logistics of goods and services. Purchased in accordance with SORD rules and regulations , and any other documents as needed; - Maintain records of the procurement process and relevant documents and files to ensure transparency and accountability; - Maintain a database of completed goods in motion and deliveries, - Draft relevant correspondence for purchases including letters to vendors, insurance claims, and replacement of damaged equipment as required; - Raising purchase orders, requesting approval and dispatch where required in relation to purchasing procedures; - Monitor deliveries under awarded contracts and prepare documentation for authorization of payments to suppliers; - Follow up with suppliers to ensure safe and timely delivery of goods and services and assume logistics coordination responsibilities where required; - Prepare reports and monitor administrative and project expenses as appropriate; - Carrying out field missions when needed, - Keeping abreast of developments in the market of relevant products/services; - Perform other duties as required.</p>							
1.5	Pharmacist	Dr	2	5 00.00	12	100.00	12,000.00
<p>The pharmacist will be based in Sanaa and Aden with regular field visits to Al Hudaydah - Taiz Governorate.</p> <p>Pharmacists are responsible for dispensing and purchasing used medical products and supplies. Duties and responsibilities include, apart from the primary function of dispensing medications and medical supplies, working with other medical personnel to provide treatment and advice to patients, record patient history related to medical use, and ensure safe storage of all medications and hospitalizations. supplies. Pharmacists also have to prepare medications and perform quality checks in cases where individual drug components need to be mixed together before treating patients.</p>							
1.6	nutrition specialist	Dr	2	5 00.00	12	100.00	12,000.00
1.7	Program assistant	Dr	1	5 00.00	12	100.00	6,000.00

	The Program Assistant will be based in Sanaa and Aden, with a regular field visit to Al-Hudaydah Governorate . . Taiz -						
	The Project Assistant provides support to the project team and is responsible for collecting, recording and entering data. Collect .reports, organize and maintain project files and databases						
	Total section						69 , 600.00
2. Supplies, goods and materials							
2.1	Orientation workshop for the project team	Dr	1	4,776.00	1	100.00	4,776.00
	A project orientation workshop for health and nutrition teams and sub-implementing partners (RDP and TYF) will be held for three days. Details of this item are attached in the documents section.						
2.2	Training health workers in CMAM	Dr	2	4,100.00	1	100.00	8,200.00
	A 5-day refresher training on CMAM will be conducted for 10 health workers in each district. This training will be conducted at the level of the targeted districts (Sanaa, Taiz, Hodeidah, and Aden) . Two other trainings will be conducted, one by RDP in Rayat district and the other by TYF in the districts . Details of this item are attached in the documents section.						
2.3	Mid-arm screening training and community outreach for community health volunteers	Dr	2	1 9,272.00	1	100.00	38,544.00

	<p>2 Training (basic and refresher) on (CMAM) for participants targets 50 community health volunteers, and the participants will be divided into two groups. The first group will contain 25 CHVs who have not received training before and this training will last for 9 days and the other group will be 25 CHVs who have received this training before and just need to be updated with MUAC screening, community outreach, and this Training. It will be for 5 days only.</p> <p>This will be conducted at the district level and this is intended only for community health volunteers in the targeted districts (Sanaa, Taiz, Al-Hudaydah, and Aden)</p> <p>Other training will be conducted by RDP in the targeted districts (Sanaa, Taiz, Hodeidah, and Aden)</p> <p>Details of this item are attached in the documents section.</p>						
2.4	Purchasing medicines and supplies necessary to support health facilities	Dr	1	160,800.00	1	100.00	16 0,800.00
	<p>The medicines will be purchased by SORD and will be delivered to SORD warehouses in the targeted area, RDP warehouse in the targeted districts of (Sanaa, Taiz, Hodeidah, and Aden)</p> <p>Details of this item are attached in the documents section.</p>						
2.5	Providing equipment for health facilities	Dr	1	57,300.00	1	100.00	57,300.00
	<p>SORD will provide basic equipment to 15 health facilities in the targeted districts of (Sanaa, Taiz, Al-Hudaydah, and Aden) .</p> <p>Details of this budget line are attached in the document section.</p>						
2.6	Laboratory solution	Dr	3	80.00	10	100.00	2,400.00
	<p>SORD will provide laboratory solutions to 10 health centers in the targeted districts of (Sanaa, Taiz, Al-Hudaydah, and Aden)</p>						

2.7	Transporting medications to targeted areas	Dr	2	1,800.00	1	100.00	3,600.00
The cost of transporting food supplies from government health offices in close coordination with UNICEF and the World Food Program to the following health facilities in the targeted districts (Sanaa, Taiz, Al Hudaydah, and Aden)							
2.8	Monthly field monitoring	Dr	4	75.00	36	100.00	10,800.00
A field monitoring visit conducted by the governorate health office and district officials to identify gaps and challenges and address them as a team in the targeted districts of (Sanaa, Taiz, Hodeidah, and Aden) . 4 people/visit * 3 days/visit * 12 visits * \$75 per day.							
2.9	Independent Electoral Commission materials	Dr	1	4,186.04	1	100.00	4,186.04
SORD will print brochures and posters on basic health and nutrition, the main message of the IYCF . These booklets and posters will be handed over to the SORD team and the RDP field team to conduct awareness session in the targeted areas . The targeted districts (Sanaa, Taiz, Al-Hudaydah, and Aden) Details of this item are attached in the documents section.							
2.10	Printing materials for HF's	Dr	10	1,200.00	1	100.00	12,000.00
To cover the cost of stationery, prescriptions, case records, CMAM cards , printing...etc.							
2.11	Community awareness sessions on infant nutrition, hygiene messages, disease outbreaks, etc.	Dr	50	40.00	1	100.00	2,000.00



	100community awareness sessions will be conducted with each session targeting 25 beneficiaries on infant and young child feeding, hygiene messages, disease outbreaks...etc. This is only in the targeted districts of (Sanaa, Taiz, Al-Hudaydah, and Aden)						
2.12	Warehouse rental	Dr	2	300.00	10	100.00	6,000.00
	Renting two warehouses for medicines and foodstuffs, one of them in the targeted districts of (Sanaa and Aden)						
2.13	Operating costs for health facilities	Dr	10	200.00	10	100.00	20,000.00
	Operating cost for 10 health facilities in the targeted districts (Sanaa, Taiz, Al-Hudaydah, and Aden) The cost is estimated at \$200 per health facility * 10 health facilities. Please refer to the attached table of quantities.						
	Total section						330,606.04
3. Equipment							
unavailable	unavailable	unavailable	0	0.00	0	0	0.00
	unavailable						
	Total section						0.00
4. Contractual services							

4.1	Incentives for health workers to support HF	Dr	10	600.00	10	100.00	60,000.00
<p>The monthly incentives will enable health workers to provide health and nutrition services at the health facility level with high numbers of cases and high populations.</p> <p>7 health units and 3 health centers will be supported in the targeted districts of (Sanaa, Taiz, Al-Hudaydah, and Aden) Details of this item are attached in the documents section.</p>							
4.2	Incentives for community health volunteers	Dr	100	40.00	10	100.00	40,000.00
<p>Community health volunteers are responsible for mid-arm screening and community awareness. 50 community health volunteers* in two areas. Community health volunteers will provide supportive health facilities in the targeted districts (Sanaa, Taiz, Al Hudaydah, and Aden)</p>							
4.3	Vehicle rental	Dr	2	2,640.00	11	100.00	29 , 040.00
<p>Monthly car rental for the field team during project implementation in each region. One vehicle will be used by the field team in the targeted districts of (Sanaa, Taiz, Al-Hudaydah, and Aden)</p>							
4.4	KAP evaluation	Dr	2	7,500.00	1	100.00	15,000.00
<p>A baseline and final survey will be conducted to assess program participants' knowledge, attitudes and practices about IYCF .</p>							
Total section							144 , 040.00
5. Travel							
5.1	Daily subsistence allowance	Dr	2	30.00	48	100.00	2,880.00

	DSA for field monitoring visit participating in field work. 2 employees * 12 field visits * 4 days/visit.						
5.2	Accommodation	Dr	2	30.00	48	100.00	2,880.00
	The cost of hotel accommodation allowance for the project team during their field visit in the targeted areas.						
5.3	car rental	Dr	1	120.00	48	100.00	5,760.00
	Renting one vehicle during field monitoring visits conducted by the project team.						
	Total section						11,520.00
6. Transfers and grants to counterparties							
6.1	Sanid Relief Organization and development (SORD)	Dr	1	320,508.00	1	100.00	320,508.00
	Details of this item are attached in the documents section. Implementing project activities in the targeted districts (Sanaa, Taiz, Hodeidah, and Aden)						
	Total section						320,508.00
7. General operating costs and other direct costs							
7.1	Office Rent	Dr	1	600.00	12	15.00	1,080.00
	To cover the cost of renting the main office.						
7.2	Field office rent	Dr	1	400.00	12	50.00	2,400.00



	To cover the rental expenses of the Aden office .						
7.3	Generator fuel	Dr	1	150.00	12	50.00	900.00
	Aden office's generators .						
7.4	Cleaning materials and services	Dr	1	250.00	12	50.00	1,500.00
	To cover the expenses of cleaning materials for the Taiz office related to the project.						
7.5	Services	Dr	1	100.00	12	50.00	600.00
	Ta`a office facilities related to the project.						
7.6	Communications	Dr	1	300.00	12	100.00	3,600.00
	To cover project team phone call expenses and internet bills related to the project.						
7.7	Office supplies	Dr	1	600.00	12	50.00	3,600.00
	To cover office stationery expenses in the head office related to the project.						
	Total section						13,680.00
Subtotal			225.00				889 , 954.00
PSC cost percentage							7.00



Project support amount		\$ 62 , 296 . 78
Total cost		\$952,241.78

Project sites							
location	Estimated percentage of budget for each site	Estimated number of beneficiaries for each site					Activity name
		men	women	children	girls	the total	
Hodeidah	30	10,538	10,960	2,371	2,477	26,346	<p>Activity 1.1.1: Support 5 health facilities to provide nutrition services in the districts that will be intervened in the governorate. Hodeidah .</p> <p>Activity 1.1.1: Orientation workshop for the project team.</p> <p>Activity 1.1.10: Establish and implement a complaints and feedback mechanism.</p> <p>Activity 1.1.2: Providing the minimum health services through 15 health facilities that adhere to the minimum service package in the regions and supporting 5 health units in Hodeidah Governorate to provide the following health services: - Integrated Management of Childhood Illnesses (IMCI), Antenatal Care (ANC), Postnatal Care (PNC) , Expanded Program on Immunization (EPI), Acute Malnutrition Screening and Management (SAM), family planning (FP) (short-acting methods), non-communicable diseases (NCD).</p> <p>Health Center 5 will be supported to provide the following health services: integrated management of childhood diseases,</p>

						<p>tuberculosis and other diseases, antenatal care/preterm birth, family planning, expanded program on immunization, screening and management of acute malnutrition, and management of non-communicable diseases. Normal births. Basic neonatal care. Basic laboratory.</p> <p>Activity 1.1.2: Conduct 3 refresher trainings on community management of acute malnutrition targeting 60 health workers (each training will target 20 health workers).</p> <p>Activity 1.1.3: Perform 6 exercises (3 basic and 3 refresher) on the mid-arm examination. and community outreach and outreach targeting 150 community health volunteers (each training will target 25 community health volunteers).</p> <p>Activity 1.1.3: Provide routine immunization and integrated management of childhood illnesses according to the minimum service package.</p> <p>Activity 1.1.4: Establish and implement complaints and feedback mechanism in the 15 supported health facilities.</p> <p>Activity 1.1.4: MUAC screening of boys and girls aged 6 to 59 months to identify malnourished children under five years of age by community health volunteers and health workers in health facilities.</p> <p>Activity 1.1.5: Providing nutrition services to malnourished children under the age of five who suffer from severe acute malnutrition (SAM) and are admitted to OTP .</p> <p>Activity 1.1.5: Monitoring visits to collect, summarize and disseminate stories from the field including success stories, lessons learned and articles.</p> <p>Activity 1.1.6: Providing nutrition services to malnourished children under five years of age who suffer from moderate acute malnutrition (MAM) admitted to supplementary complementary feeding programmes.</p> <p>Activity 1.1.7: Examination of the mid-arm circumference of pregnant and breastfeeding women in order to identify women with moderate acute malnutrition (MAM).</p> <p>Activity 1.1.8: Providing nutrition services to pregnant and lactating women with moderate acute malnutrition (MAM) admitted to therapeutic feeding programmes.</p>
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							<p>Activity 1.1.9: Conduct a field visit to monitor the provision of free nutrition services in health facilities in the targeted areas .</p> <p>Activity 1.2.1: Provision of reproductive health services by midwives in the 15 health facilities according to the minimum service package: - Family planning - Case management of sexual and gender-based violence - Management of sexually transmitted disease syndromes in HC And D.H</p>
Taiz	35	7,720	8,029	1,737	1,814	19,300	<p>Activity 1.1.1: Support 15 health facilities to provide nutrition services in Taiz Governorate.</p> <p>Activity 1.1.1: Orientation workshop for the project team.</p> <p>Activity 1.1.10: Establish and implement a complaints and feedback mechanism.</p> <p>Activity 1.1.2: Providing the minimum health services through 15 health facilities that adhere to the minimum service package in the targeted areas . 5 health units in Taiz Governorate will be supported to provide the following health services: - Integrated Management of Childhood Illnesses (IMCI), and prenatal care (ANC), Postnatal Care (PNC) , Expanded Program on Immunization (EPI), Screening and Management of Acute Malnutrition (SAM), Family Planning (FP) (short-acting methods), Non-communicable diseases (NCD).</p> <p>Health Center 5 will be supported to provide the following health services: integrated management of childhood diseases, tuberculosis and other diseases, antenatal care/preterm birth, family planning, expanded program on immunization, screening and management of acute malnutrition, and management of non-communicable diseases. Normal births. Basic neonatal care. Basic laboratory. Activity 1.1.2: Conduct 3 refresher trainings on community management of acute malnutrition targeting 60 health workers (each training will target 20 health workers). Activity 1.1.3: Conduct 6 exercises (3 basic and 3 refresher) on mid-arm examination . , Community outreach and outreach targeting 150 community health volunteers (each training will target 25 community</p>

							<p>health volunteers). Activity 1.1.3: Provide routine immunization and integrated management of childhood diseases according to the minimum service package.</p> <p>Activity 1.1.4: Establish and implement complaints and feedback mechanism in the 15 supported health facilities.</p> <p>Activity 1.1.4: Mid-arm screening of boys and girls aged 6 to 59 months to identify malnourished children under five years of age by community health volunteers and health workers in health facilities. Activity 1.1.5: Providing nutrition services to malnourished children under five years of age who suffer from severe acute malnutrition (SAM) has been accepted into the OTP . Activity 1.1.5: Monitoring visits to collect, summarize and disseminate stories from the field including success stories, lessons learned and articles. Activity 1.1.6: Providing nutrition services to malnourished children under five years of age with moderately severe malnutrition (MAM) accepted into the TSFP . Activity 1.1.7: Screening the mid-arm circumference of pregnant and breastfeeding women to identify women with moderate acute malnutrition (MAM). Activity 1.1.8: Providing nutrition services to pregnant and lactating women with moderate acute malnutrition (MAM) accepted into the TSFP . Activity 1.1.9: Conduct a field visit to monitor the provision of free nutrition service in health facilities in the targeted areas Activity 1.2.1: Provision of reproductive health services by midwives in the 15 health facilities according to the minimum service package: - Family planning - Caseanagement Sexual and gender-based violence - management of sexually transmitted disease syndromes in HC And D.H</p>
Sana'a	35	9,145	9,510	2,058	2,148	22,861	<p>Activity 1.1.1: Support 15 health facilities to provide nutrition services in a district in Sana'a Governorate, Sana'a Governorate .</p> <p>Activity 1.1.1: Orientation workshop for the project team. Activity 1.1.10: Establish and implement a complaints and feedback mechanism. Activity 1.1.2:</p>

						<p>Providing the minimum health services through 15 health facilities that adhere to the minimum service package in the Al-Mudaykhairah area. 5 health units in a governorate in Sana'a Governorate will be supported to provide the following health services: - Integrated Management of Childhood Illnesses (IMCI), and pre-treatment care. Childbirth (ANC), Postnatal Care (PNC) , Expanded Program on Immunization (EPI), Screening and Management of Acute Malnutrition (SAM), Family Planning (FP) (short-acting methods), Non-communicable diseases (NCD).</p> <p>Health Center 5 will be supported to provide the following health services: integrated management of childhood diseases, tuberculosis and other diseases, antenatal care/preterm birth, family planning, expanded program on immunization, screening and management of acute malnutrition, and management of non-communicable diseases. Normal births. Basic neonatal care. Basic laboratory. Activity 1.1.2: Conduct 3 refresher trainings on community management of acute malnutrition targeting 60 health workers (each training will target 20 health workers). Activity 1.1.3: Conduct 6 exercises (3 basic and 3 refresher) on mid-arm examination . , community outreach and outreach targeting 150 community health volunteers (each training will target 25 community health volunteers). Activity 1.1.3: Provide routine immunization and integrated management of childhood illnesses according to the minimum service package. Activity 1.1.4: Establish and implement a complaints and</p>
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						<p>feedback mechanism program in the 15 supported health facilities. Activity 1.1.4: Mid-arm screening of boys and girls aged 6 to 59 months to identify malnourished children under five years of age by community health volunteers and health workers in health facilities.</p> <p>Activity 1.1.5: Providing nutrition services to under-five malnourished children with severe acute malnutrition admitted to the OTP. Activity 1.1.5: Monitoring visits to collect, summarize and disseminate stories from the field including success stories, lessons learned and articles Activity 1.1.6: Providing nutrition services to under-five malnourished children with moderate acute malnutrition (MAM) admitted to TSFP program . Activity 1.1.7: Screening the mid-arm circumference of pregnant and breastfeeding women to identify women with moderate acute malnutrition (MAM). Activity 1.1. 8: Providing nutrition services to pregnant and lactating women with moderate acute malnutrition (MAM) admitted to therapeutic feeding programs. Activity 1.1.9: Conduct a field visit to monitor the provision of free nutrition service in health facilities in the targeted areas Activity 1.2.1: Provision of reproductive health services by midwives in the 15 health facilities according to the minimum service package: - Family planning - Case management Sexual and gender-based violence - management of sexually transmitted disease syndromes in HC And D.H</p>
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Aden						<p>Activity 1.1.1: Support 5 health facilities to provide nutrition services in the districts that will be intervened in the governorate. Aden .</p> <p>Activity 1.1.1: Orientation workshop for the project team. Activity 1.1.10: Establish and implement a complaints and feedback mechanism.</p> <p>Activity 1.1.2: Providing the minimum health services through 15 health facilities that adhere to the minimum service package in the regions and supporting 5 health units in Aden Governorate to provide the following health services: - Integrated Management of Childhood Illnesses (IMCI), Antenatal Care (ANC), Postnatal Care (PNC) , Expanded Program on Immunization (EPI), Acute Malnutrition Screening and Management (SAM), family planning (FP) (short-acting methods), non-communicable diseases (NCD).</p> <p>Health Center 5 will be supported to provide the following health services: integrated management of childhood diseases, tuberculosis and other diseases, antenatal care/preterm birth, family planning, expanded program on immunization, screening and management of acute malnutrition, and management of non-communicable diseases. Normal births. Basic neonatal care. Basic laboratory.</p> <p>Activity 1.1.2: Conduct 3 refresher trainings on community management of acute malnutrition targeting 60 health workers (each training will target 20 health workers).</p> <p>Activity 1.1.3: Perform 6 exercises (3 basic and 3 refresher) on the mid-arm examination. and community</p>
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						<p>outreach and outreach targeting 150 community health volunteers (each training will target 25 community health volunteers).</p> <p>Activity 1.1.3: Provide routine immunization and integrated management of childhood illnesses according to the minimum service package.</p> <p>Activity 1.1.4: Establish and implement complaints and feedback mechanism in the 15 supported health facilities.</p> <p>Activity 1.1.4: MUAC screening of boys and girls aged 6 to 59 months to identify malnourished children under five years of age by community health volunteers and health workers in health facilities.</p> <p>Activity 1.1.5: Providing nutrition services to malnourished children under the age of five who suffer from severe acute malnutrition (SAM) and are admitted to OTP .</p> <p>Activity 1.1.5: Monitoring visits to collect, summarize and disseminate stories from the field including success stories, lessons learned and articles.</p> <p>Activity 1.1.6: Providing nutrition services to malnourished children under five years of age who suffer from moderate acute malnutrition (MAM) admitted to supplementary complementary feeding programmes.</p> <p>Activity 1.1.7: Examination of the mid-arm circumference of pregnant and breastfeeding women in order to identify women with moderate acute malnutrition (MAM).</p>
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							<p>Activity 1.1.8: Providing nutrition services to pregnant and lactating women with moderate acute malnutrition (MAM) admitted to therapeutic feeding programmes.</p> <p>Activity 1.1.9: Conduct a field visit to monitor the provision of free nutrition services in health facilities in the targeted areas .</p> <p>Activity 1.2.1: Provision of reproductive health services by midwives in the 15 health facilities according to the minimum service package: - Family planning - Case management of sexual and gender-based violence - Management of sexually transmitted disease syndromes in HC And D.H</p>
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Statistical report for the project to address malnutrition, implementation of SORD

For children, mothers, pregnant and breastfeeding women at Al-Arrah Center - Hamdan District for the period from December 2018 to December 2019 .

Programs	Malnutrition treatment for children under 5 years in Yemen.
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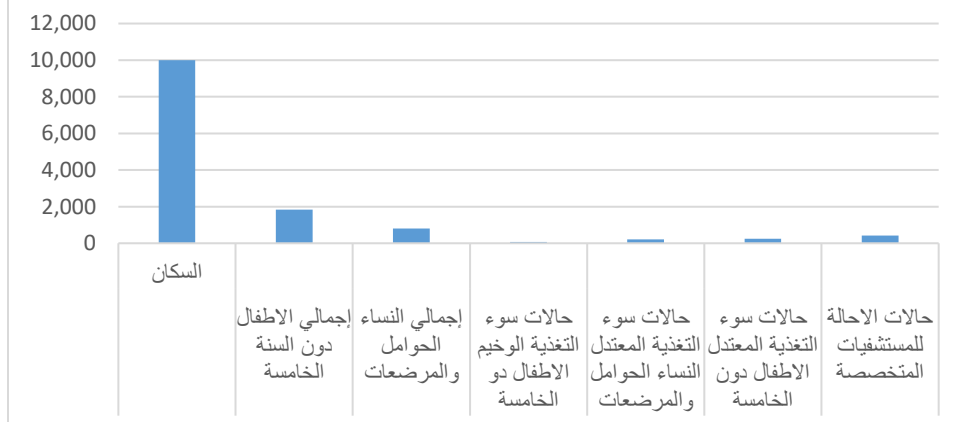
Facility health Name	Qa'a Al-Earah Health unit
Targeted area	Sana'a governorate, Hamadan district.
Population	10,000 People.
Children < 5 years and PLW	800 PLW 5200 Under 5 Years
Funder	ACT foundation.
Implemented by	SORD.
Period of the programmes	6 Months.
Started programme	December, 1 2018.

The monthly report of the implementation of the Malnutrition project

Program targeted details

The program targeted 6 months						
Population	Total of Children Under 5 Years	Total of PLW	SAM of children <5 years	MAM of PLW	MAM of children <5 years	Estimated CMAM Treatment of monthly attendance
17000	3128	1360	74	210	243	421

Program targeted Targeting plan within 12 months



The program treated malnutrition during the period December 2018 - June 2019

the month	Program reached						
	Estimated CMAM Treatment of monthly attendance	MAM of children <5 years	MAM of PLW	SAM of children <5 years	Total of PLW	Total of Children Under	Population
December 2018	339	243	185	66	800	3128	17000
January	544	74	92	67	245	66	
February	328	37	39	133	195	133	
March	172	201	37	39	23	195	
April	0	0	0	0	0	0	
May	716	413	356	125	1360	3128	17000

June	339	243	185	66	1360	3128	
July	339	243	185	66	1360		
August	339	243	185	66	1360		
September		32	33	13	81		
October		32	33	13	81	140	
November	421	243	210	74	1,360	3,128	17000
December	421	243	210	74	1360	3128	
Total	3958	2247	1750	802	9585	16174	

Newly recruited children in program (CMAM), to treat malnutrition for December, 2018.

the month	Program type	Sex	MUAC<11.5cm	Z-SCORE<3	Total	Total of children attending hospital
December	SAM without complications for children <5 years	Male	17	5	22	22
		Female	24	20	44	44
		Total	41	25	66	66
January	SAM without complications for children <5 years	Male	17	7	24	46
		Female	38	5	43	87
		Total	55	12	67	133
February		Male	7	3	10	56

	SAM without complications for children <5 years					
		Female	12	1	13	100
		Total	19	4	23	156
March	SAM without complications for children <5 years	Male	5	16	21	77
		Female	11	13	24	124
		Total	16	29	45	201
April	SAM without complications for children <5 years	Male	0	0	0	0
		Female	0	0	0	0
		Total	0	0	0	0
May	SAM without complications for children <5 years	Male	4	3	7	55
		Female	70	8	15	61
		Total	74	11	22	116
June	SAM without complications for children <5 years	Male	17	5	22	22
		Female	24	20	44	44

		Total	41	25	66	66
July	Male	Male	17	5	22	22
	Female	Female	24	20	44	44
	Total	Total	41	25	66	66
August	Male	Male	17	5	22	22
	Female	Female	24	20	44	44
	Total	Total	41	25	66	66
September	Male	Male	17	5	22	22
	Female	Female	24	20	44	44
	Total	Total	41	25	66	66
October	Male	Male	1	6	7	54
	Female	Female	2	10	12	80
	Total	Total	3	16	19	134

	Male	Male	1	6	7	54
	Female	Female	2	10	12	80
	Total	Total	3	16	19	134
November	Male	Male	5	2	7	54
	Female	Female	1	10	11	78
	Total	Total	6	12	18	132
	Male	Male	2	4	6	32
	Female	Female	1	13	14	74
	Total	Total	3	17	20	106
Total						

Performance indicators in percentage for TFC/SC

DETAILS STATEMENT FOR DECEMBER, 2018

Monthly summary of the number of children from 6 to 24 months										
the month	Sex			Classification by color, location and measurement of the mid-arm in the measuring tape of the child			Number of children with (Edema)	Number of children	Action taken	
the month	Male	Female	Total	Sever acute malnutrition (SAM)	Average malnutrition MAM	Normal			Referral	Awareness



December	170	169	339	66	117	156	5	80		310
January	125	119	244	67	74	103	0	82	240	1
February	49	63	112	23	37	52		42	3	80
March	86	76	157	12	46	67	0	53	3	103
April	0	0	0	0	0	0		0		
May	170	169	339	66	117	156		80	0	70
June	220	200	420	75	90	140	0	80	0	70
July	220	200	420	75	90	140	0	80	0	70
August	220	200	420	75	90	140	0	80	0	70
September	23	26	49	83	32	89	0	50	0	62
October	23	26	49	83	32	89	0	50	0	62
November	104	119	223	18	108	97	0	98	1	200
December	92	113	205	20	84	101	0	62	1	200
Total	1502	1480	2977	663	917	1330	0	837	248	1298

Monthly summary of the number of children aged 6 to 24 months according to the schedule at the level of the health center			
the month	Male	Female`	Total
December	96	116	215
January	39	54	93
February	28	31	59
March	39	54	93
April	0	0	0

May	17	28	45
June	96	116	215
July	96	116	215
August	96	116	215
September	23	26	49
October	23	26	49
November	38	31	69
December	27	51	78
Total	618	765	1395

the month	The total number of pregnant and lactating mothers	Average less than(23)cm		normal		Action taken	
		Pregnant	Lactating	pregnant	lactating	Referral	Awareness
December	185	57	41	45	42	-----	155
January	245	49	43	61	72	0	220
February	195	17	22	85	71	0	105
March	245	49	43	61	72	-	220-



April							
May	89	16	21	25	27	0	70
June	185	57	41	45	42	0	155
July	185	57	41	45	42	0	155
August	185	57	41	45	42	0	155
September	81	11	22	25	23	0	53
October	81	11	22	25	23	0	53
November	52	8	12	15	17	0	40
December	181	68	73	21	19	0	141
Total	1909	457	422	498	492	0	1302

List of medical supplies'

the month	Items Description	Unit	Left From The last	Delivered for this	storageTot	el	Given	Damaged	Refund	Remaining	Monthly
December	PLUMBY NUT	BOX		60	60		24			26	
	Micronutrients(Powder)	BOX		280	380		160			120	
	Amoxicillin spy	CAN		90	90		90			0	
January	PLUMBY NUT	BOX	26	148	175		85			86	
	Micronutrients(Powder)	BOX	120	0	120		120			0	
	Amoxicillin spy	CAN	0	300	300		266			34	
February	PLUMBY NUT	BOX	86	50	136		102			34	
	Micronutrients(Powder)	BOX	0	100	100		65			35	
	Amoxicillin spy	CAN	34	90	124		124			0	
March	PLUMBY NUT	BOX	34	194	228		128			100	

	Micronutrients(Powder)	BOX	35		35					
	Amoxicillin spy	CAN	90	90	90					
	PLUMBY NUT	BOX	34	194	228	128			100	
April	Micronutrients(Powder)	BOX	35		35					
	Amoxicillin spy	CAN	90	90	90					
	PLUMBY NUT	BOX	0	60	60	24			96	
May	Micronutrients(Powder)	BOX	100	280	38	160			220	
	Amoxicillin spy	CAN	0	90	90	0			0	
	PLUMBY NUT	BOX	51	90	141	128			23	
June	Micronutrients(Powder)	BOX	0	100	100	86			14	
	Amoxicillin spy	CAN	0	60	60	60			0	
	PLUMBY NUT	BOX	51	90	141	128			23	
July	Micronutrients(Powder)	BOX	0	100	100	86			14	
	Amoxicillin spy	CAN	0	60	60	60			0	
	PLUMBY NUT	BOX	51	90	141	128			23	
August	Micronutrients(Powder)	BOX	0	100	100	86			14	
	Amoxicillin spy	CAN	0	60	60	60			0	
	PLUMBY NUT	BOX	42	50	92	48	0	0	44	0
September	Micronutrients(Powder)	BOX	20	0	20	0	0	0		
	Amoxicillin spy	CAN	0	60	60	60	0	0		
	PLUMBY NUT	BOX	42	50	92	48	0	0	44	0
October	Micronutrients(Powder)	BOX	20	0	20	0	0	0		
	Amoxicillin spy	CAN	0	60	60	60	0	0		
	Metronidazole Tap	CAN	0	2	2	0	0.1	0	1	0



	Folic Acid	CAN	0	5	0	5	5	0	0	0
	Clean kits	BOX	49	0	49	21	0	0	38	
November	Wsb++	Bag	30	50	80	31	0			41
	Plumby sup	BOX	30	0	30	18	0			12
	PLUMBY NUT	BOX	44	20	64	41	23			
	Amoxicillin spy	BOX	20	0	20	20	20	0		
	Clean kits	BOX	28	0	28	24	0			4
	Wsb++	Bag	49	50	99	91	0	0	8	
	Plumby sup	BOX	12	50	62	42	0	0	20	
	PLUMBY NUT	BOX	23	20	43	41	0	0	0	
	Clean kits	BOX	4	4	4	4	0	0	2	0
Total										

Financial expenses for December, 2018

December	Statement	Quantity	The amount	Total	
January	Workers' wages	5	\$150	\$750	1650 \$
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
February	Workers' wages	5	\$150	\$750	1650\$
	Material transfer fees	3	\$150	\$450	



	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
March	Workers' wages	5	\$150	\$750	1650\$
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
April	Workers' wages	5	\$150	\$750	1650\$
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
May	Workers' wages	5	\$150	\$750	1650\$
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
June	Workers' wages	5	\$150	\$750	1650\$
	Material transfer fees	3	\$150	\$450	



	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
July	Workers' wages	5	\$150	\$750	1650\$
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
August	Workers' wages	5	\$150	\$750	1650 \$
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
September	Workers' wages	5	\$150	\$750	\$1650
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
October	Workers' wages	5	\$150	\$750	\$1650
	Material transfer fees	3	\$150	\$450	



November	Fees for supervision, follow-up and field clearance	3	\$150	\$450	\$1650
	Workers' wages	5	\$150	\$750	
	Material transfer fees	3	\$150	\$450	
	Fees for supervision, follow-up and field clearance	3	\$150	\$450	
December	Workers' wages	5	150\$	750\$	1650\$
	Material transfer fees	3	150\$	750\$	4180\$
	Fees for supervision, follow-up and field clearance	3	150\$	750\$	
	Workers' wages	18		2,670\$	
	Material transfer fees	4		510\$	
Fees for supervision, follow-up and field clearance	5		1000\$		

Caseload calculation of Children and PLW for malnutrition programs

Baseline population data

The baseline population (total per district and children 0-59 months per district) is estimated 2018 population based on Census 2004 with population growth rate applied per year (source: CSO 2018), accounting for the IDPs movement based on the 16th TFPM report (Task Force on Population Movement).

Total population (1700)

Media documentation – photos:





Addressing malnutrition for c



community and the host



Introduction:

We envision a world where every child has the fundamental basis for health and development, yet malnutrition remains the most serious health problem. Sanid Organization for Relief and Development (SORD) has made treating malnutrition a priority.

Our goal in the nutrition sector in SORD is to end malnutrition in the target area.

Project Summary:

Given the current coverage of the Targeted Supplementary Feeding Program (TSFP) and the coverage of the Basic Nutrition Services Package (BNSP), Sanid Organization for Relief and Development (SORD) - in cooperation with the Ministry of Public Health and Population (MoPHP) is planning to reach 781 children under the age of five and 339 pregnant and lactating women through the TSFP program. The detection of active cases was emphasized by measuring MUACs through the community awareness component. Priority activities were (a) Strengthening the provision of CMAM - MAM services in order to increase service access to the target area with a high malnutrition rate; (B) Promote community services through trained community nutrition workers



and volunteers. Thus BNSP ensures the provision of a minimum preventive service that includes health education, promotion of IYCF infant and young child feeding, micronutrient supplementation, and deworming to ensure that the nutrition is eaten holistically rather than in a purely therapeutic perspective. Women who are illiterate or who suffer from lack of education and women married at an early age are more vulnerable to under nutrition. Therefore, women and mothers of childbearing age have been targeted in the proposed plans to increase community awareness of a total of 242 women. In order to ensure the progress of the project, continuous evaluation, supervision visits and monitoring of program performance indicators were carried out regularly, and for the sake of transparency and to ensure the achievement of the project and to ensure the satisfaction of the beneficiaries, the Complaints mechanism was activated.

The nutrition program at the Ablas unit focuses on:

- Children suffering from severe acute malnutrition can access therapeutic feeding for patients in the health unit with fully trained staff to reduce the prevalence of acute malnutrition among children under five and pregnant and lactating women.
- Children, pregnant and lactating women with acute and moderate malnutrition have access to a targeted supplementary feeding program and appropriate infant and young child feeding sessions.
- Health workers and community volunteers are trained to screen for acute malnutrition, effectively detect cases, and follow up on the beneficiaries of the program.
- Strengthening preventive nutrition services among vulnerable population groups.

The main nutritional intervention to SORD :

- Provision of medicines and nutritional supplements.
- Providing preventive services.
- Conducting educational sessions on infant and young child feeding, health and hygiene for caregivers of children suffering from malnutrition.

Implementation: Implementation of the nutritional program activities at the health unit and community level:

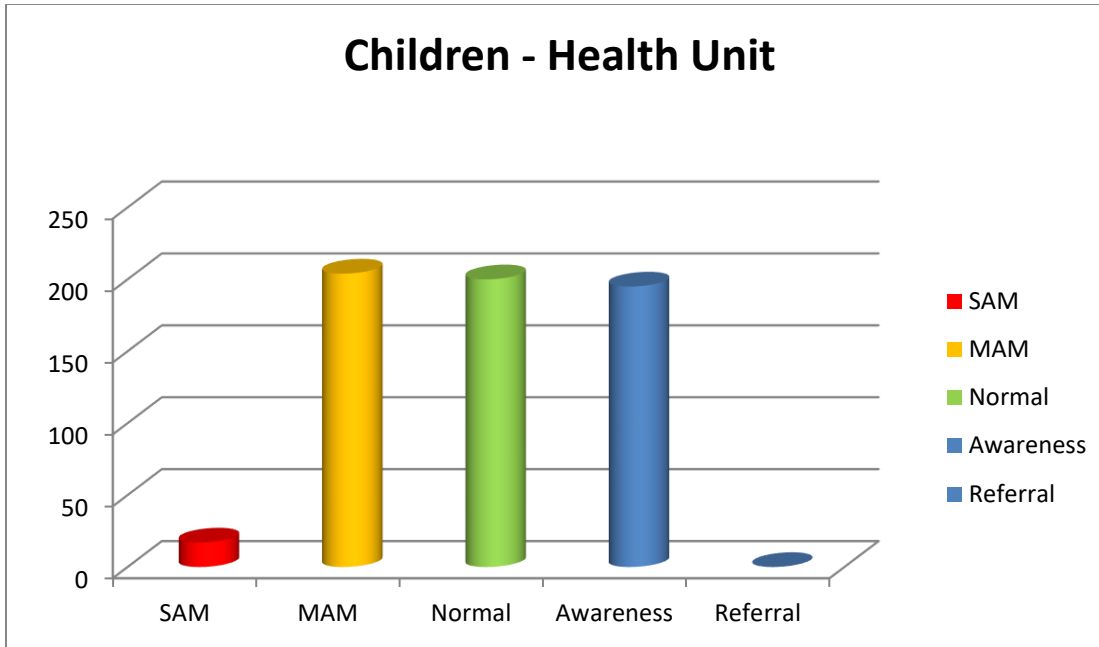
Responsible HWs and CHVs have provided all CMAM services to children 6-59 months old with SAM in the health unit and at community and family level, such as nutrition screening, admission to TSFP and OTP, vitamin A supplementation, Fe / Fo supplementation for pregnant And lactating women, Deworming and zinc supplementation for diarrhea cases, hygiene promotion and other key primary health services.

In schedule No. () statistics for the number of children > 6 to 59 months at the health center level:



Monthly summary of the number of children 6 <to 59 months according to the schedule at the level of the health center					
Number of children	Classification by nutritional status of the child by all the criteria in the screening record			Action taken	
	Sever acute malnutrition)SAM (Average malnutrition MAM	Normal	Awareness	Referral
421	17	204	200	195	0

Diagram No. () for the statistics of children > 6 to 59 months at the health center level:



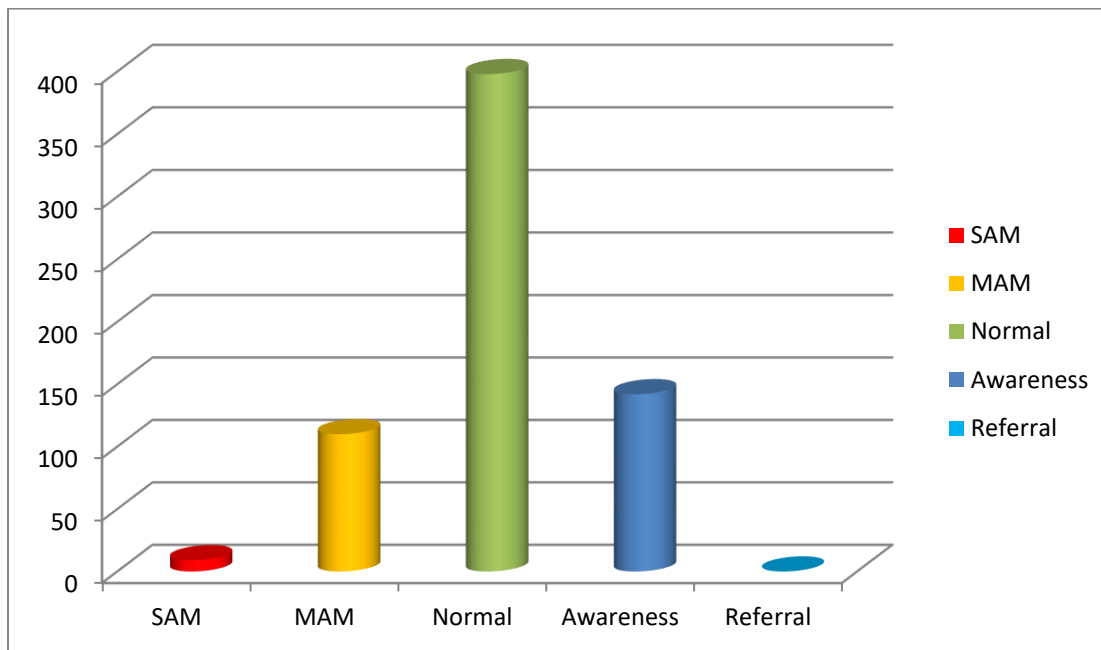
schedule (No.) Statistics of the number of children > 6 to 59 months at the community level (volunteers)

Monthly summary of the number of children > 6 to 59 months according to the schedule at the level of the community level (volunteers (



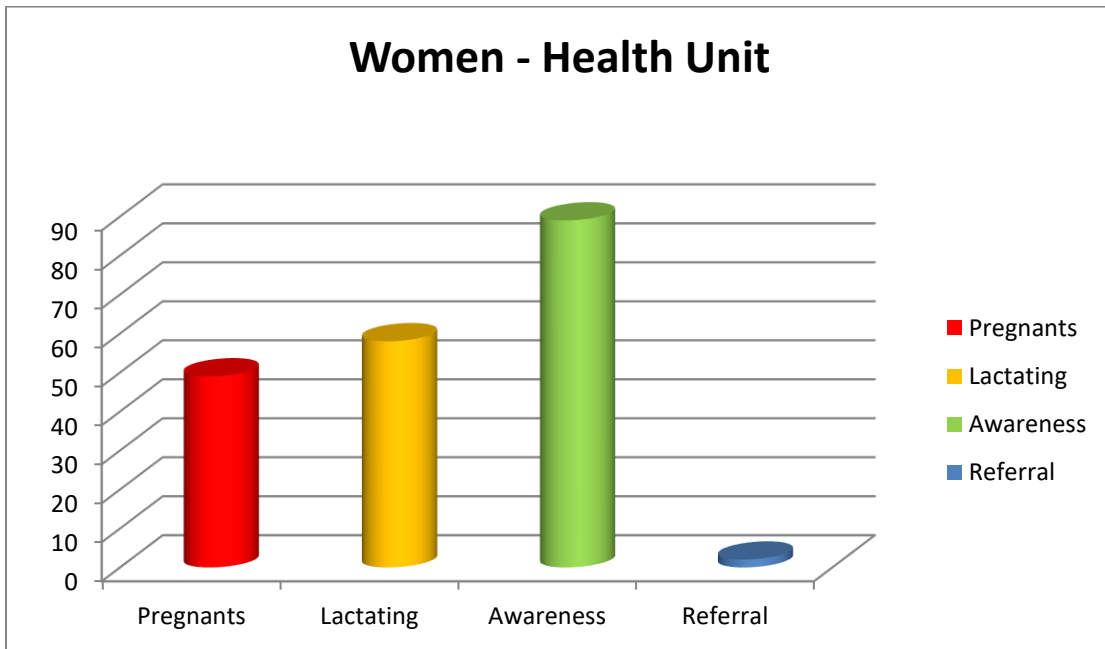
Number of children	Classification by nutritional status of the child by all the criteria in the screening record			Action taken	
	Sever acute malnutrition)SAM (Average malnutrition MAM	Normal	Awareness	Referral
417	9	110	398	152	47

Schedule (No.) Statistics of the number of children > 6 to 59 months at the community level (volunteers)



Monthly summary for screening of PLWs at the health facility level

Diagram No. () for the statistics of pregnant and lactating women at the health center level:



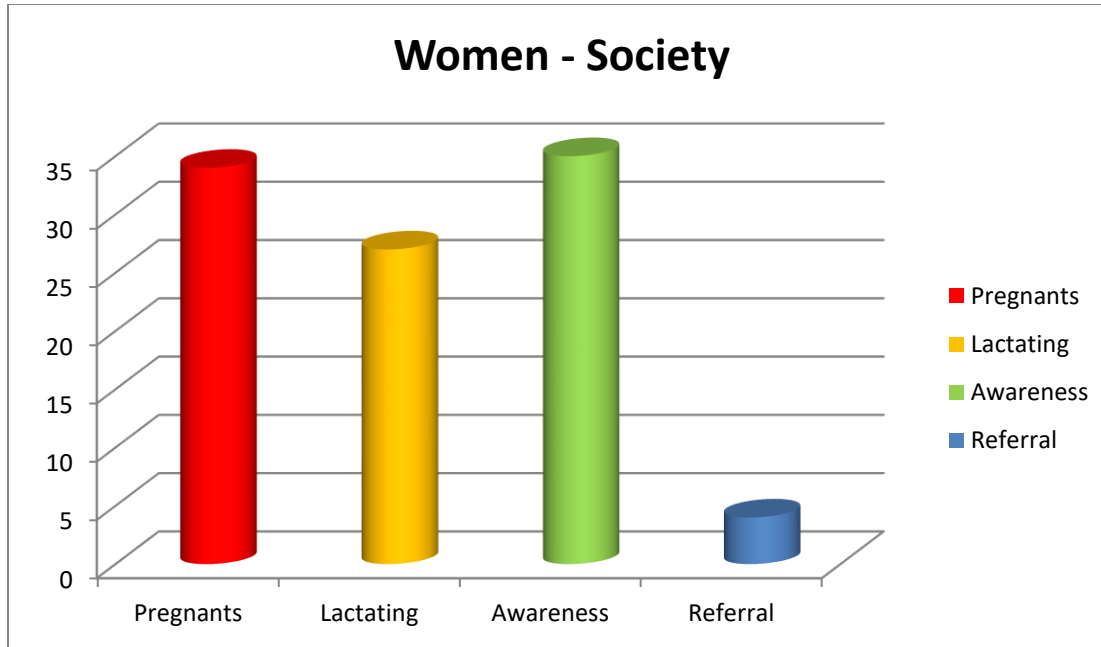
(volunteers (Monthly summary for screening of PLWs at the community level

NO	Average (< 23 cm)		Action done	
	Pregnants	Lactating	Awareness	Referral
215	34	27	35	4

) volunteers) Monthly summary for screening of PLWs at the community level

Diagram No. () for the statistics of pregnant and lactating women at the community level (volunteers):





Achievements:

The achievements of the treatment and preventive program SAM and MAM in the health unit in the area of Laplace from May until November 2020, as shown in Table (No.).

Table No. () Achievements of Activities :

❖ Activities	Number
❖ Acceptance of SAM	26
❖ Acceptance of MAM	314



❖ The number of pregnant and lactating women has reached the awareness session on infant and young child feeding	168
❖ Number of pregnant and lactating women received iron and folic acid tablets	122
❖ Children 6 to 59 months old who are screened and referred for acute malnutrition	17
❖ Children 6 to 59 months old who are screened and referred for acute malnutrition at the community level	7
❖ Number of children 6-24 months of age tested and referred for acute malnutrition	26
❖ Children 6 to 24 months of age who were tested and referred for acute malnutrition at the community level	5
❖ Plumpy Nut carton number has been distributed	48
❖ Pregnant and lactating women	258
❖ An advisory session	
❖ The number of worms tablets distributed	35
❖ Micronutrients (Powder)	76

Furnishing and equipment activities carried out by SAND to establish the health unit for the Ablas area :

SORD equipped the health facility building, provided all supplies and equipment, and rehabilitated the water and sanitation systems. The equipment was as follows :

SORD rented a building for the unit to accommodate all activities related to the project .

SORD established an IYCF corner in the health unit (all nutrition and health services) .

SORD supplied health facilities with water tanks .

SORD offers monthly incentives to health and nutrition professionals .



Providing health and nutritional medical supplies to health facilities .

Implementing nutritional awareness sessions :

Photo

