



Quarterly Program Performance Report Integrated Response to Life-Threatening Malnutrition

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Program Title:	Integrated response to life-threatening malnutrition
OFDA Grant Number:	AID-OFDA-G-15-00184
Country/Region:	Uror County, Jonglei State, South Sudan
Project period:	September 1 st 2015 – August 31 st 2016
Time Period Covered by the Report:	Apr 1 st – Jun 30 th 2016

1. Executive Summary

The report provides an overview of an OFDA-funded project implementation for the period Apr 1st 2016 – June 30th, 2016 for both WASH and Nutrition. It also reflects on the cumulative reach of the project since inception, September 1st 2015. Notable achievements for this quarter include:

WASH:

- Rehabilitation of 9 Hand pumps with spare parts, all hardware rehabilitation has been completed.
- Reconstruction of 13 Borehole platforms, all hardware rehabilitation has been completed.
- Hygiene Promotions in Public Places in 10 locations.

NUTRITION:

- Provision of Outpatient Therapeutic Program (OTP) services to severely malnourished children without medical complications and referral of children with severe malnutrition and medical complications to an inpatient facility. Overall related service targets under OTP have been reached.
- Provision of Targeted Supplementary Feeding Program (TSFP) services to moderately malnourished children and malnourished pregnant and lactating mothers. Due to a supply break for more than one month, this service has seriously been affected.

- c) Continued community engagement and involvement on Infant and Young Child Feeding (IYCF) practices.
- d) Capacity building for staff/health workers on Community-based Management of Acute Malnutrition (CMAM).

Award Level Beneficiaries for both WASH and Nutrition

	Total (WASH & Nutrition)	IDP	Total WASH	IDP WASH	Total Nutrition	IDP Nutrition
Cumulative Target	84,568	12,685	48,000	7,200	48,491	7,274
Reporting Period Targeted	16,000	2,500	16,415	2,462	6,147	922
Reporting Period Reached	15,793	2,369	16,415	2,462	6,147	922
Cumulative Reached (to date)	71,853	10,778	53,816	8,072	48,832	7,325

2. Sector: WASH

Objective 1: To increase access to safe water sources, knowledge on good hygiene practices and sanitary facilities among IDPs and host communities.

Activity	Progress/Achievement
Sub sector 1: Water Supply Infrastructure	
20 Boreholes rehabilitated	<p>9 hand pump rehabilitations with spare-parts (4 in Wickol Payam, 3 in Pathai Payam and 2 in Padiak Payam) were completed in Q3. Among those boreholes in need, 13 platform reconstructions were done in Q3. 3 of these boreholes had both rehabilitation with spare-parts and their platforms were also reconstructed.</p> <p>The hand pumps that were rehabilitated had previously been found to dispense coloured water and emit foul smells, while others had poor yield due to leakages which occurred due to damages to old pipes. After rehabilitations, the quality of the water was improved and the yield of some of them increased as opined by the Water User Committees. Quality tests will be conducted in Q4 to verify.</p>
Water quality testing (20 boreholes in targeted areas)	Due to logistical challenges, the delivery of the water testing kits was delayed and this, compounded by the difficulty of movement during the rainy season, meant that water quality testing could not be performed in Q3. The kits have since arrived so this will now be completed in Q4.
20 Water Management Committees supported	This activity was completed in the previous Quarter. The Water Management Committees have continued managing water points and monitoring the use of the tools provided for maintenance of boreholes.
Water Safety Plans developed by each WMC Committee	20 Water Management Committees which were formed came up with their Water Safety Plans which are in use.
Review of Water User Fees	This information will be captured at the end of the Project through the endline study (e.g. via Focus group discussions)

9 hand pump mechanics trained and equipped	Hand Pump Mechanic training is planned to be completed in Q4, as in Q3 we concentrated on the rehabilitation of the hand pumps during the dry season window.
Sub sector 2: Hygiene Promotion	
70 Counsellors and 20 extension workers will be trained in the targeted communities	No IYCF counsellors training took place in Q3, but they are planned to be completed in Q4. The 79 IYCF counsellors trained in previous quarters have been disseminating messages on nutrition and improvement of hygiene and sanitation to mothers as they access nutrition services at the feeding centers.
Reinforcing messages through other groups	Women's groups have been carrying out hygiene promotion in the 4 target locations through dramas and songs related to good hygiene practices.
Appropriate Learning Methodologies	Women's groups and School Hygiene Clubs have taken part in Hygiene Promotion in Public Places to propagate good hygiene messages to the communities targeted. 10 hygiene promotion activities were carried out (involving 1517 people in Wickol Payam, 179 people in Padiak Payam, 406 people in Motot Payam, and 147 people in Pathai).
Household Hygiene and Sanitation Visits	This activity will be take place once the IYCF counsellors are trained together with the women's groups.
Support and Facilitation of School-based Hygiene Clubs at 2 schools	2 Schools were selected to be targeted for formation of School Hygiene Clubs that would aid in Hygiene promotion in those schools. These were supported with cleaning tools for them to use in ensuring that the hygiene around the school is kept at an acceptable standard. This has attracted lots of interest and participation of young people in the clubs.

Indicators		Baseline	Project Target	Reporting period target	Reporting Period Achieved	Achieved Cum.
Sub-Sector 1 : Water Supply Infrastructure						
1	# of people directly benefitting from the water supply infrastructure program	0	48000	16,415	16,415	53,816
2	# of test results with zero fecal coliforms per 100ml sample	0	20 ¹	3	0	3
3	# Water points which are actively utilizing their Water Safety Plan	0	20 ²	20	20	20
Sub-Sector 2 : Hygiene Promotion						
1	# of people receiving direct hygiene promotion (excluding mass media campaigns and without double-counting)	0	12600	2,500	2,249	2,249
2	# of village Water User Committees active at least 3 months after training	0	20 ³	20	20	20

¹ this target should be 20 based on proposal and budget, and now corrected

² this target should be 20 based on proposal and budget, and now corrected

³ this target should be 20 based on proposal and budget, and now corrected

3	# of water points that are clean and protected from contamination	0	20 ⁴	20	20	20
4	# of respondents by sex who know 3 of 5 critical times to wash hands	0	17,760	0	0	NA (to be measured in endline)
5	# of households who store their drinking water safely in clean containers	0	17,760	0	0	NA (to be measured in endline)

3. Sector: Nutrition

Objective: To increase access to life-critical services for the treatment of severe and moderate acute malnutrition.

Activity	Progress/Achievement
Sub sector 1: Management of MAM	
Screening and referral (common for both MAM and SAM)	7,921 children 6-59 months of age (4,043 male and 3,878 female) were screened. 75.3% (n=5,962) were normal, 20.2% (n=1,598) were moderately malnourished and 4.5% (n=362) were severely malnourished.
Vitamin A supplementation (common for both MAM and SAM)	1,734 children 6-59 months of age (854 male and 880 female) received doses of Vitamin A supplementation. This figure was less than that achieved in the previous quarter. The reason for this is that there has been a lack of routine medicines. A request to UNICEF has been raised.
Deworming (common for both MAM and SAM)	879 children (438 male and 441 female) received doses of deworming tablets. The number of children being dewormed has continued to being low due to continued lack of supplies throughout the previous 3 quarters.
MAM (Children) admissions and discharges	524 children 6-59 months of age (254 male and 270 female) were admitted into TSFP. 572 children (265 male and 307 female) were discharged from the program. 92.3% (n=528) were cured, 0.2% (n=1) died, 4.9% (n=28) defaulted, 0.3% (n=2) were non-responders while 2.3% (n=13) were OTP/SC referrals. All the sphere performance indicators were met. The admission rate was much lower than the previous quarter due to lack of supplies. In the absence of supplies, there were no services for TSFP for prolonged period from April to May.
PLW admissions and discharges	88 PLWs were admitted into TSFP-PLW. The number is much less than that obtained in the previous quarter. This again is attributed to lack of supplies in April-May. An urgent reminder of request to World Food Programme (WFP) has already been raised. 234 PLW were discharged. Of these; 81.2% (n=190) were cured, 0% died and 18.8% (n=44) defaulted. The default rate did not meet the sphere standards, which is mainly due to the supply breakages.
Sub sector 2: Management of SAM	

⁴ this target should be 20 based on proposal and budget, and now corrected

SAM admissions and discharge	<p>641 children (294 male and 347 female) 6-59 months were admitted into OTP. SAM cases were lower than the previous quarter, probably due to 2 food distributions carried out by WFP during the course of the quarter.</p> <p>839 children were discharged. 84.1% (n=706) were cured, 0% died, 7.4% (n=62) defaulted, 6.1% (n=51) were non-responders and 2.4% (n=20) were referrals to stabilisation centre. All the sphere standards for treatment of SAM were met.</p>
Severe malnutrition with medical complication	<p>20 children with SAM and also with medical complications were identified. 16 were able to go the stabilisation centre at Lankien. 4 were unable to make it there as their caretakers said they did not have other people who would be able to take care of the other children in their households.</p>
Sub sector 3: IYCF	
Identification of counsellors and set up of support groups	<p>There were no new counsellors identified and trained in this quarter. Focus was placed on training mother support group leaders in order to strengthen those support groups. There are now 435 active support groups and 79 IYCF counsellors.</p>
IYCF sessions and people attending meetings	<p>2,088 sessions were carried out with 4,828 people attending. This makes the total number of sessions to 5,749 from the beginning of the project.</p>
Health and nutrition messages outside of the support groups	<p>414 people (male 33 and female 381) received health messages outside of the support groups. The total number reached so far is 3,066.</p>

Indicators	Baseline	Project Target	Reporting period target	Reporting Period Achieved	Achieved Cum.	Explanation	
Sector 1: Management of Moderately Acute Malnutrition (MAM)							
1	# of sites managing MAM	0	5	5	5		
2	# of people admitted to MAM services, by sex and age	0	5,721	-	612	4,893	
	Female Total	0	-	-	358	3,480	
	Female 0-11mo	0	-	-	33	403	
	Female 1-4 Years	0	-	-	237	1,193	
	Female 5-14 Years	0	0	-	0	0	
	Female 15-49 Years	0	-	-	88	1,884	
	Female 50-60 Years	0	0	-	0	0	
	Female 60+	0	0	-	0	0	
	Male Total	0	-	-	254	1,413	
	Male 0-11mo	0	-	-	31	366	
	Male 1-4 Years	0	-	-	223	1,047	
	Male 5-14 Years	0	0	-	0	0	
	Male 15 – 49 Years	0	0	-	0	0	
	Male 50-60 Years	0	0	-	0	0	
	Male 60+	0	0	-	0	0	
3	# of health care providers and volunteers trained in the prevention and management of MAM, by sex.	0	90 (75F, 15M)	-	213 (192F, 21M)	254 (226F, 28M)	190 female support group leaders and 23 Extension workers trained. Extension workers being trained for 2nd time
4	% of coverage in project area	50%	>50%	>50%	>50%	>50%	
5	% of target population are within less than a day's walk (incl	90%	>90%	100%	100%	100%	Less than 4hrs one way to the nearest FC.

	treatment) of the program site						
6	% of discharges from targeted supplementary feeding program who have recovered or defaulted	0	>75% Recovery	>75%	92.3%	92.2%	
		0	<15% Default	<15%	4.9%	5.2%	
Sub Sector 2: Management of Severe Acute Malnutrition (SAM)							
1	# of health care providers and volunteers trained in the prevention and management of SAM, by sex and age (0-11 months, 1-4 years, 5-14 years, 15-49 years, 50-60 years, and 60+years.)	0	90 (15M, 75 F)	23 (21M, 2F)	213 (192F, 21M)	254 (226F, 28M)	All between 15-49year.
2	Number of sites established/rehabilitated for outpatient care	0	4	0	0	4	
3	Number of people treated for SAM, by sex and age	0	1126	-	641	2,081	
	Female Total	0	552	-	347	1,107	
	Female 0-11mo	0	166	-	101	320	
	Female 1-4 Years	0	386	-	246	787	
	Female 5-14 Years	0	0	-	0	0	
	Female 15-49 Years	0	0	-	0	0	
	Female 50-60 Years	0	0	-	0	0	
	Female 60+	0	0	-	0	0	
	Male Total	0	574	-	294	974	
	Male 0-11mo	0	172	-	93	295	
Male 1-4 Years	0	402	-	201	679		
Male 5-14 Years	0	0	-	0	0		
Male 15 – 49 Years	0	0	-	0	0		
Male 50-60 Years	0	0	-	0	0		
Male 60+	0	0	-	0	0		

4	Rates of admission	0	>50%	>50%	185%	185%	<p>This is above the target as there were more SAM cases than was previously anticipated. During planning the SAM rate for Uror county was 4.8% (SMART 2015). A year later the rate has increased to 6.8%. One factor is this has been that some children have been coming from neighbouring Nyiror county to the feeding centres, therefore leading to an increase in the number of cases.</p>
	Default rate	0	<15%	<15%	7.4%	6.9%	
	Death rate	0	<10%	<10%	0%	0%	
	Cure rate	0	>75%	>75%	84.1%	84.1%	
	Relapse Rate	0	<10%	<10%	0%	0%	
	Nonresponse-transfer rate	0	<10%	<10%	6.1%	6.5%	
	Length of stay	0	Est.60 days	Est. 60 days	66 days	64.5 days	
5	% of patients identified for specialized care referred immediately to stabilization center	100%	100%	100%	80%	90%	<p>Some of the caretakers were not able to take the children referred to</p>

	or inpatient care center.						the stabilisation centres as they were also occupied with care of the other children in the same household.
Sub Sector 3: IYCF							
1	# and % of infants 0-<6 months of age who are exclusively breastfed	40% 830 of 2,077	50% 970 of 2,077	-	-	TBA	Measured at project end
2	# and % of children 6-<24 months of age who received foods daily from 4 or more food groups	3% 102 of 3,413	10 % 340 of 3413	-	-	TBA	Measured at project end
3	# of people receiving behavior change education, by sex and age (0-11 months, 1-4 years, 5-14, 25-49 years, 50-60 years, and 60+)	0	10504 1050 Male 9454 Female All 15-49 yrs	-	4,828 (176 male and 4,652 female) All 15 - 49 yrs	13,131 (784 Male 12,347 Female) All 15 - 49 yrs	# in mother support groups
4	Continued breastfeeding rate at 1 and 2 years	1 year: 75.2% 2 Years: 75.2%	1 Year: >90% 2 Year: >90%	1 Year: >90% 2 Year: >90%	-	TBA	Measured at project end
5	% of mothers initiating breastfeeding within an hour after delivery.	76.7%	> 90%	-	-	TBA	Measured at project end
6	# and % of children introduced to semi solid or soft food at the appropriate time.	12.2% 37 of 304	25% 76 of 304	-	-	TBA	Measured at project end
7	% of children fed at least 3 times a day.	48.6%	65%	-	-	TBA	Measured at project end

4. Challenges and Constraints:

Insecurity affecting staff and field locations: Inter-clan fighting has caused delays in the activities of hygiene promotion and water quality testing in areas near to Yuai due to the need to relocate some staff to safer locations where they are not usually based. This has therefore affected the targets of these activities being fully achieved. To ensure that we are able to achieve the targets in Q4 we have therefore arranged temporary staff rotations to allow staff who can work in those areas to maintain the delivery of activities and ensure that they are completed.

Logistical Challenges: The long delivery periods of some of the items purchased overseas, which could not be sourced in South Sudan or in the region, resulted in the delay of some of the activities such as Water Quality testing. Although delayed, the kits have arrived and are currently in use and progress will be scaled up in Q4

to ensure completion. Frequent breakdown of vehicles, partially due to poor road conditions and high demand for service, has been a significant challenge to the movement of staff and prepositioning of materials, causing a delay in meeting the targets. We have therefore re-prioritized our vehicles and manpower to ensure that the pending activities be conducted within the last quarter.

Limited Staff Capacity: One of the WASH Project Officers (PO) was forced to take an extended sick leave leaving a gap in staffing which affected the running of some of the WASH activities. Therefore activities that had to be done within the dry season (water supply infrastructure activities) were prioritised above those that could be done in the rainy season (hygiene promotion). To overcome this we have temporarily reallocated certain manpower from other teams to support the delivery of our WASH activities, and activities will be continued in Q4. The WASH PO will also be resuming his role in Q4.

Lack of TSFP supplies: There was lack of plumpy sup for the TSFP (children 6-59 months) and CSB++ during the quarter. This meant that for the entire month of May there were no admissions to the program and this affected admission rates and the achievement of the corresponding indicator targets. This led to low overall TSFP admission figures. We are and will continue to engage WFP in making sure that supplies are delivered on time and we are making our requests in advance in order to pre-position the supplies.

Worsening of food security has led to significant increase of malnutrition cases, and posed adverse effects on recovery. A pre-harvest SMART survey was conducted in Uror County in May 2016, where GAM rate has reached 24.8% (of which SAM rate 6.8%), indicating an increase compared to same period in 2015 (GAM rate was 23.2% and SAM rate was 4.6% according to Pre-harvest SMART survey in May 2015). This has therefore had an overall impact on the rate of recovery of malnourished children and PLW. Efforts have been made to make sure that partners who are also doing blanket supplementary feeding supported by WFP continue to provide support to the most vulnerable households (mostly those with malnourished children) to improve the food security situation across the county and support the impact of our nutrition program. In future program cycles (outside of this project cycle), we are planning on engaging in livelihood support activities to improve household food security.

5. Lessons learnt:

Since the project relies on WFP as the source of the nutrition supplies, it is necessary to utilise a proportion of future project funds to be used to preposition some of these supplies in case WFP is unable to deliver on any requests during the project period. This has been applied in Tearfund's recent proposal submission for a new program starting Sept 1 where the prepositioning of buffer stock into the project plan has been included.

6. Budget:

The total spend rate as of June 30, 2016 was 65%. The spend rate was lower than expected because of the logistical challenges mentioned above together with a large saving on HR related costs. With some re-prioritization of work, it is expected the remaining procurement will be completed on schedule. However, as has been discussed recently with OFDA/Juba, we are anticipating that there will be an underspend of around \$170,000 at the end of the project - primarily resulting from the savings from HR-related costs.

7. Other Pertinent Information:

Coordination - Tearfund has attended all relevant coordination meetings at various levels to ensure there is no duplication and that implementation is harmonized in the target area. The WASH team has attended coordination meetings at Bor, Yuai and Waat. For coordination of Nutrition activities, Tearfund are also coordinating with MSF Holland in Lankien, where those identified as severely malnourished children with complications are referred. We have also continued to send our monthly cluster reports and are attending bi-monthly cluster meetings at the national level.