

Total Budget:	USD 5,500,000		
Budget by Agency:	UNICEF: 3,575,000 WFP: 385,000 FAO: 660,000	WHO: 385,000 UNESCO: 495,000	
Participating Gov. Entities:	Unit for the Fight against Malnutrition; Ministry of Health; Institute on Food Technology; Ministry of Agriculture; Ministry of Culture.		
Start Date:	28 October 2010	Approval Date:	9 July 2009
Est. End Date:	28 October 2012	Signature Date:	28 August 2009
Disbursements:	First Disbursement: Second Disbursement: Third Disbursement:	28 October 2009	USD 939,089
In Brief:	<p>The Joint Programme general objective is to reduce and maintain the under 5 acute malnutrition rates less than 10%. The programme includes two main components. The first component will improve at the national level malnutrition prevention through the promotion of better feeding practices based on local foodstuffs for children aged 0-5. These interventions will be completed by the provision of micronutrients, deparasiting treatments for children and by a monitoring and early warning system. The second component aims to mitigate the impact of the recent food price increase and reduced agricultural production and reduce malnutrition in the 5 most affected regions (Tambacounda, Kolda, Diourbel, Matam and Louga). These interventions will be complemented by the promotion of a healthy environment in pre- and elementary schools that is conducive to learning. The programme will be based on three strategies: capacities building of national and local structures for strengthening monitoring and coordination; communication and advocacy for behavioural changes and access to adequate dietary alimentation for children in primary school.</p>		

Outcomes:

- Creation and development of micro, small and medium-sized enterprises providing a greater contribution to income generation, decent employment, food security and social welfare, benefiting women and youth in UNS focal areas.
- Communities in UNS focal areas have access to and utilize the quality-based social services in order to accelerate the achievement of MDGs 2, 3, 4, 5, 6 and 7.
- Effective participation of all concerned actors, efficiency, gender equity, promotion of human rights and sustainable development are reinforced during the definition, implementation and evaluation of development policies and programmes.



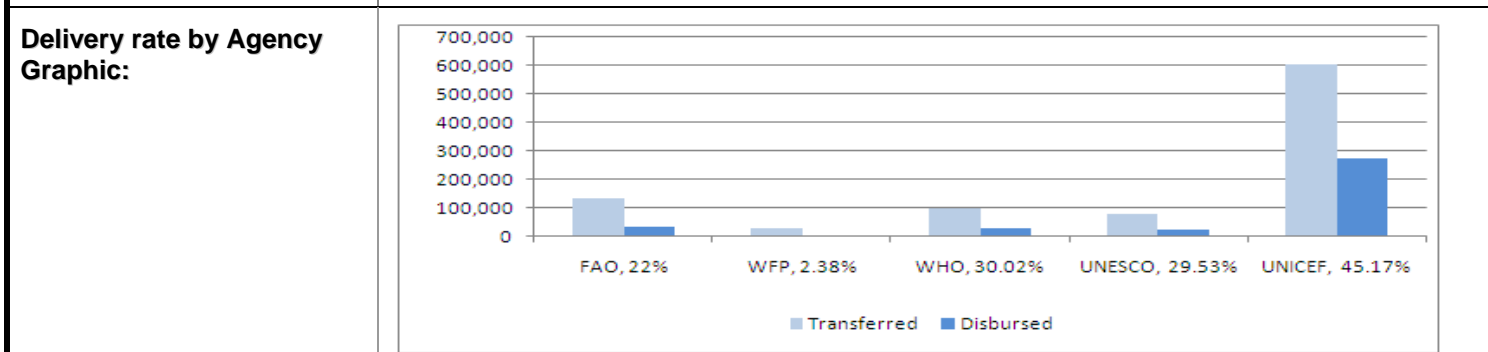
Regions of Intervention:	<ul style="list-style-type: none"> • Kolda, Matam and Sedhiou areas 	
MDGs	MDG1 T1.C; MDG4 T4.A; MDG5 T5.A	
Beneficiaries	Direct	Indirect

• No. Institutions	622	0
• No. Women	2,236,000	0
• No. Men	2,064,000	0
• No. ethnic groups	0	0

Project coordinator: Kadidiatou Dieng
RCO Focal Point: Ousseynou Wade, Sara Cortes
Web page:

Status
The programme is progressing well and only very minor delays have been reported. Progress to date includes: building the resilience capacities of communities to fight malnutrition through prevention practices and sanitation; developing the capacities of health agents to manage severe malnutrition cases, using functional literacy to reach mothers, and enhancing the production of local food.

Estimated financial execution status as of the June 30, 2010 biannual report:	Disbursed Budget:	Committed Budget:
	<ul style="list-style-type: none"> • 6.39 % over the Total approved budget • 37.42 % over transferred budget 	<ul style="list-style-type: none"> • 9.14 % over the Total approved budget • 53.53 % over transferred budget



Main Achievements :

Outcome 1: During this six-month period, **356,007** children have been covered by growth monitoring and promotion, as well as screening activities. It is important to indicate that children detected with severe acute malnutrition (SAM) are systematically referred to health stations, whereas all children with moderate acute malnutrition (MAM) are provided with community care.

Outcome 2: 107 service providers from the Kédougou and Tambacounda medical regions, as well as 78 members of regional and district management teams from the Sédiou, Tambacounda, Kédougou and Kolda regions, have been upgraded in SAM case management and new growth standards. Additionally, the revision of training manuals on case management of severe malnutrition to integrate WHO standards, and on community-level case management of SAM without complications, has been finalized.

Outcome 3: N/A

Outcome 4: Training on SMART methodology completed throughout the district. Every three months, 80% of children aged 6-59 months are screened by measuring upper-arm circumference.

Does the JP incorporate gender considerations in the **activities/outputs/outcomes**? (example)

Does the JP include gender specific **indicators** in the monitoring plan?(example)

Does the JP mention gender relationships as part of the **challenges** analyzed? (specify)

