

Country	Investment Area	Objectives (select from dropdown)	Activities (describe the activity)	Key Results (mandatory for multi-year activities)	Primary Partner (di)	Implementing Part	TOTAL 2022+202
Somalia	4. Health Informati	4.2 Improve data use-related capacity, tools, evidence generation and/or systems for programme monitoring and learning, especially at the subnational level	Provide technical support to the State, Region HMIS Officers and health facilities to build their capacity in data collection and analysis. Support innovative approaches to improve data management and use for decision making such as digitalization of supervision tools and registers to generate dahsboards for high level view and monitoring Provide technical support and capacity building in the roll-out of the revised DHIS at all levels and support the State MoH, Regions and Districts in strengthening the defaulter tracing and identification of zero-dose children, identifying & sharing best practices and lessons learnt. To provide technical support in the cascading of trainings on the revised DHIS.	Strengthen defaulter tracing system, digitalization of data supervision checklist to facilitate use of data for decision making and training of district team and halth facility staff on the new DHIS2 tools	Save the Children	Save the Children	\$1,492,008.00
Somalia	6. Demand Genera	6.2 Design and implement social and behaviour change interventions	Provides support and work with local influencers to generate demand for EPI services and closely collaborate with service providers to provide EPI services focusnig on zero dose children in hard to reach areas. To strengthen the defaulter tracing mechanism and identification of zero-dose children, capitalizing on different interventions. Develop and implement demand generation strategies that is adapted to the security-compromised areas of the FMS. Closely link with health facilities, districts and regions to provide EPI services in these areas	Improved acceptance and uptake of immunization services across the regions, specially among missed communities living hard to reach areas	Save the Children	Save the Children	
Somalia	7. Governance, Po	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	Provides technical support to FMOH and state health authorities to improve routine immunization coverage with focus on reaching zero dose children and missed communities (IDPs, hard to reach areas)	To reduce Zero dose children and missed communities, tracing and vaccinating zero dose children	Save the Children	Save the Children	
Somalia	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	FPP consultancy to support country in the development of the Gavi 5.0 funding application for all levers under the Full Portfolio Planning Process (HSS, EAF, CCEOP)	FPP/5.0 funding application submitted by MoH by Q3 2023	TBC	TBC	\$250,000.00
Somalia	4. Health Informati	4.2 Improve data use-related capacity, tools, evidence generation and/or systems for programme monitoring and learning, especially at the subnational level	Provide technical support to the State, Region HMIS Officers and health facilities to build their capacity in data collection, analysis and reporting. To support the country in monitoring vaccine utilisation through analysis of the revised DHIS. To support the State MoH, Regions and Districts in strengthening the defaulter tracing mechanism and identification of zero-dose children, referrals to health facility to receive missed doses of RI, leveraging on the success of the DQIP investment. Contribute to cascade trainings on the revised DHIS2. Identify areas of joint supervision between PHC (including EPI) and nutrition and support in the development of integrated supervision tools & checklists. Plan and conduct integrated supportive supervision with an integrated checklist.	Improved capacity of sub-national level on HMIS through contribution in cascade training on revised DHIS2. Capacity of Regions and Districts to make informed decisions based on periodic data analysis improved. Defaulter-tracing mechnism strengthened and scaled-up to other districts. Integrated supportive supervision is conducted and regional & district level managers trained on integrated supervision.	UNICEF	UNICEF	\$1,591,152.49
Somalia	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	Provide technical support in the development of State MoH annual EPI plans and support them in implementation & monitoring, with emphasis on identifying and reaching zero-dose children. Provide technical support to the State MoH, Regional and District teams to analyse data for decision-making and during periodic reviews of performance. Support the introduction of new vaccines nOPV2, IPV2 and MCV2 and cold chain related to COVID-19 vaccination, including the implementation of SIAs (measles). Provide technical support to the State MoH in 3 States in the management of cold chain and vaccine supply chain after the hand-over from NGOs.	District-based plans identifying where zero-dose, missed communities and under-vaccinated children periodically updated and strategies to reach these children implemented.	UNICEF	UNICEF	

Somalia	3. Supply Chain	3.5 Improve planning, coordination and monitoring of supply chain management at all levels	<p>a) Forecasting and Supply Planning</p> <ul style="list-style-type: none"> -Provide technical support for annual vaccine forecasting for vaccines (RI, NVI, COVID-19 and SIAs) and timely submission to the UNICEF Supply Division. -Provide technical support the NLWG in reviewing the quarterly vaccine requests from the States and the development of quarterly distribution/supply plans. <p>b) Stock Management</p> <ul style="list-style-type: none"> -Provide technical support to the MoH to conduct quarterly physical inventory of vaccines (RI, SIAs and CV-19 vaccines) and other injectable supplies at the national, state, regional and districts with established vaccine stores. -Support MoH to use data for action. -Provide technical support to the country in implementation the new electronic vaccine stock management tool. <p>c) Data Visibility</p> <ul style="list-style-type: none"> - Technical support to provide cascade training to regions and districts on the use of the new online SMT tools in order to provide vaccine visibility and wastage at the regional and district 	<p>a) Forecasting is done, and vaccines are readily available</p> <p>b) Improved capacity of the MoH on stock management and reports and shared on the Gavi platform every quarter.</p> <p>c) Capacity of NLWG built in order to use the vaccine stock reports for action.</p> <p>d) Cold chain handed over to State MoH in the FMS and NWLG is functional.</p> <p>e) Improved visibility on vaccine wastage based on data analysis from the revised DHIS2.</p> <p>g) CCEOP-3 implemented.</p>	UNICEF	UNICEF	
Somalia	6. Demand Generation	6.3 Improve capacity in designing, implementing, monitoring and/or evaluating demand generation activities at all levels	<p>a) Evidence Generation</p> <ul style="list-style-type: none"> - Provide technical assistance to carry out evidence-based social behaviour change interventions that promote the uptake of EPI services. This will be achieved through the following; <ul style="list-style-type: none"> - Conduct situational analysis to define the target audience based on the population categorisation e.g. zero-dose children in missed and under-served communities, women, populations on the move, IDPs, hard-to-reach, urban poor etc in order to define specific demand generation interventions. - Review data to understand the behaviours, barriers and beliefs of target audiences to enable the design of interventions to reach specific audiences such as vulnerable communities and zero-dose children. - Conduct group guided discussions using HCD approach with women groups to understand issues in women's role and the intent to vaccinate, barriers to immunisation e.g. gender issues to include newly accessible areas, HTR populations and communities with a high concentration of ZD children. - Collect and analyse data to determine 	<p>SBC plans at the national, regional and district level are customised through an HCD approach. Evidence-based SBC interventions are conducted to promote the uptake of RI and COVID-19 vaccination. SBC interventions are integrated with other programmes (nutrition and WASH). Strategic partnerships with the media, social media influencers, women, youth, religious and community leaders are fostered.</p> <p>Improved acceptance for uptake of newly introduced vaccines (MCV2 and IPV2) as well planned PCV introduction.</p> <p>Integrated SBC strategies and plans for RI, CV-19, mass campaigns and other PHC interventions are developed and implemented.</p> <p>Capacity of MoH is strengthened to respond to mis/disinformation by strengthening social listening & rumour tracking mechanisms.</p> <p>Improved capacity of sub-national level (States, RSMCs at regional and DSMCs at district level).</p> <p>Increased empowerment of traditional/religious leaders in integrated</p>	UNICEF	UNICEF	
Somalia	1. Service Delivery	1.2 Integrate delivery of services to improve efficiency, regularity and/or reliability of planned immunisation activities with a focus on zero-dose and underimmunised children and missed communities	<p>Contribute to the FPP development and identification of strategies to identify and vaccinate zero-dose, under-vaccinated and missed communities especially among the urban poor and special populations such as IDPs and nomads. Provide technical support to MoH in designing and implementing EPI services that are integrated with other life-saving interventions like nutrition and WASH, with emphasis on identification of best practices for scale-up. As part of EPHS, this TA will provide technical inputs into the development & implementation of programme documents (PDs) between UNICEF & NGOs to ensure that the package of services provided is integrated as per the EPHS. The interventions by NGOs will be provided in both accessible and security-compromised areas. Provide support in implementing the measles strategic plan, including implementing quality integrated SIAs. Leveraging on the humanitarian assistance to provide EPI services integrated with other humanitarian interventions to improve coverage. Leverage on the</p>	<p>Zero-dose and missed communities identified and vaccinated. EPI services provided as part of integrated package of health services per the EPHS guidelines and the humanitarian situation leveraged to provide EPI services to special populations like IDPs and nomads. Programme documents (PDs) between UNICEF and NGOs to provide integrated services per the EPHS guidelines, and ensuring service provision gaps are covered in security-compromised districts. Gender analysis conducted and all sub-national levels/States receive technical assistance in their planning, implementation and review of PHC services.</p>	UNICEF	UNICEF	
Somalia	4. Health Information Systems	4.3 Strengthen information systems relevant for the identification and reach of zero-dose and under-immunised children	<p>Provide technical support to the State, Region HMIS Officers and health facilities to build their capacity in data collection and analysis. Provide technical support and capacity building in the roll-out of the revised DHIS at all levels. To support the country in monitoring the vaccine utilisation through analysis of the revised DHIS. To support the State MoH in implementing the defaulter tracing and identification of zero-dose children, identifying & sharing best practices and lessons learnt. To provide technical support in the cascading of trainings on the revised DHIS.</p>	<p>Support EPI team to strengthen information management system, improve data quality and use for decision making. information management system will also help in identification of zero dose children and missed communities.</p>	WHO	WHO	\$1,328,634.29

Somalia	7. Governance, Policy	7.1 Strengthen capacity of governance/technical bodies for planning, coordination and tracking progress at all levels, particularly for reaching zero-dose children	<p>FMOH to coordinate and provide strategic directions on the immunization programme in line with the national EPI policy of 2020.</p> <p>WHO to provide technical support to FMOH and state MOH to improve routine immunization coverage, focusing on tracing and vaccinating Zero dose children and missed communities, such as Internally displaced, hard to reach, mobile, nomadic populations and ensuring that gender is integrated. This TA will also support in FPP facilitating ZD analysis.</p>	To reduce Zero dose and missed communities, tracing and vaccinating zero dose children	WHO	WHO
Somalia	1. Service Delivery	1.1 Extend immunisation services to reach zero-dose, underimmunised children and missed communities	Provide technical and operational support to state ministries to improve routine immunization coverage, reaching zero dose children and missed communities. Facilitating urban immunization, COVID 19 vaccination, NIDs etc. TA will also support country and states in planning, use of data, capacity building and establishing feedback mechanism.	To identify Zero dose children through different means, track and vaccinate them. Facilitate sub national capacity for ensuring quality campaigns	WHO	WHO