Country Context

The project is in line with the IsDB 10-Years Strategic Framework, Pillar on “Economic and Social Infrastructure”, aiming at providing access to basic social services. It is also consistent with the Health Sector Policy and the Presidency 5-Year Program (P5P) of IsDB. It will contribute to the Sustainable Development Goal (SDG) number 3 on Health, specifically, on the target 3.8 which aims to reach Universal Health Coverage in 2030.

Project Rationale

- The project will contribute to the Sustainable Development Goal (SDG) number 3 on Health, specifically on the target 3.8 which aims to reach UHC in 2030. The proposed project also contributes to the attainment of SDG targets 3.1 (reduction of maternal mortality), 3.2 (end preventable death of newborns and children under five years of age), 3.7 (ensure universal access to sexual and reproductive healthcare services including for family planning, information and education).

Project Objectives

- The project will contribute to the achievement of the objectives of the NHDP (2018-2025). The Specific objectives are to: i) Improve access to primary healthcare and nutrition services for targeted areas of the project and ii) Strengthen the surveillance and prevention of epidemics and infectious diseases in the communities. The key expected results are: i) 400 medical doctors, 400 nurses and midwives, 600 health assistants are recruited, trained and deployed in rural areas to provide health and nutrition services to communities, ii) 4157 community health workers are recruited and deployed in their communities to provide home-based health and nutrition services, iii) the National Nutrition Strategy is developed and disseminated to key stakeholders and, iv) The district health information system is strengthened.
Project Components:

The project activities are based on the following components:

❖ Component A = Provision of community health services
   - Train, equip, and maintain 4000 CHWs for provision of community health services
❖ Component B = Development of HR
   - Train and deploy: 600 general medicine doctors; 495 nurses and midwives; 1950 assistants (aides soignantes)
❖ Component C = Strengthening the provision of nutrition services to poor urban communities
   - Scaling up nutrition intervention in 77 communes
   - Strategy for prevention and treatment of malnutrition
   - Capacity of doctors, nurses, and midwives concerning nutrition
   - Integrating nutrition into the national health information system (SNIGS)
❖ Component D = Cross-cutting
   - Sustainability plan
   - Skills development for PMU staff
   - Research, rapid learning, and adaptive management
**Key project information**

**IC Approved:** in April 2021

**Total Project Cost:** US$ 52.8 Million

**LLF Financing:** $ 32.4 million, OCR $ 17.5 million, includes 35% LLF Grant

**Co-financing:** $ 2.8 million (GoB)

**Project duration:** 5 years from effectiveness

**Benefits and impact**

- 4,000 additional communities (approximately 2.5 million people) will have access to the basic basket of services at the primary care level
  - increased treatment of communicable diseases and NCDs in the community
  - early care seeking for illness
  - fewer complications from the combination of malnutrition and communicable disease
  - reduced loss of work (by adults) and study time (by children) due to ill health
  - reduced out-of-pocket spending for health
  - lower demand on hospital care for conditions treatable in the community or at health centers
  - lower acute malnutrition, over-nutrition, and poor diets in urban areas

**Donor Partners**

- **Abu Dhabi Fund for Development (ADFD)**

The Abu Dhabi Fund for Development (ADFD) is an aid agency established by the government of Abu Dhabi in 1971. ADFD aims to help developing countries to achieve sustainable socio-economic growth; through financial assistance in the forms of concessionary loans, managing government grants and equities. ADFD also peruses investments to encourage the private sector in the recipient countries to play an essential part in accelerating the economic development process, and at the same time playing a pivotal role in strengthening and diversifying the future resources of the Fund.
• Bill and Melinda Gates Foundation (BMGF)

The Bill & Melinda Gates Foundation (BMGF) is an American private foundation based in Seattle, Washington. The primary goal of the foundation is to enhance healthcare and reduce extreme poverty across the globe and expand educational opportunities and access to information technology in the U.S.

• Islamic Solidarity Fund for Development (ISFD)

The Islamic Solidarity Fund for Development (ISFD) is dedicated to reducing poverty in its member countries by promoting pro-poor growth, emphasizing human development, especially improvements in health care and education, and providing financial support to enhance the productive capacity and sustainable means of income for the poor, including financing employment opportunities, providing market outlets especially for the rural poor and improving basic rural and pre-urban infrastructure.

• King Salman Humanitarian Aid and Relief Centre (KS Relief)

Saudi Arabia established the King Salman Humanitarian Aid and Relief Centre (KS Relief) in 2015. KS Relief works in 46 countries around the world with a focus on humanitarian and relief work in the Middle East and North Africa region.

• Qatar Fund for Development (QFFD)

QFFD is a public development institution committed, on behalf of the State of Qatar, to improving the livelihood of communities around the world by providing financial tools to developing countries in the Arab and Muslim world and beyond for responsive and effective humanitarian and development aid.

• UK Aid – The Foreign, Commonwealth, and Development Office (FCDO)

UK Aid Direct is DFID’s main centrally managed funding mechanism for small and medium-sized civil society organizations, based in the UK and overseas, which are working to achieve the global goals. Formerly known as the Global Poverty Action Fund (GPAF), the fund was relaunched in 2014 as UK Aid Direct.