

For 'new-line' in text fields pres [ALT] and [ENTER] keys on keyboard (do not insert spaces to create line shift)
Please do not change the format of the form (including name of page) as this may prevent proper registration of project data.



For new proposals, please complete the tab for 'Project Document', 'Budget' and 'Locations'
Mandatory fields are marked with an asterisk

Project Document

1. COVER (to be completed by organization submitting the proposal)

(A) Organization*	WARDI Relief and Development Initiatives																																						
(B) Type of Organization*	<input type="checkbox"/> UN Agency <input type="checkbox"/> International NGO <input type="checkbox"/> Local NGO <input type="checkbox"/> Local NGO																																						
(C) Project Title*	Integrated Emergency WASH Support to the Crises Affected Populations in Beledweyne																																						
(D) CAP Project Code	SOM-12/WS/48282	Not required for Emergency Reserve proposals outside of CAP																																					
(E) CAP Project Ranking	High	Required for proposals during Standard Allocations																																					
(F) CHF Funding Window*	Standard Allocation 2 (Oct 2012)																																						
(G) CAP Budget	\$ -	Must be equal to total amount requested in current CAP																																					
(H) Amount Request*	\$ 599,998.00	Equals total amount in budget, must not exceed CAP Budget																																					
(I) Project Duration*	10 months	No longer than 6 months for proposals to the Emergency Reserve																																					
(J) Primary Cluster*	Water, Sanitation and Hygiene																																						
(K) Secondary Cluster	Only indicate a secondary cluster for multi-cluster projects																																						
(L) Beneficiaries	<table border="1"> <thead> <tr> <th></th> <th>Men</th> <th>Women</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Total beneficiaries</td> <td>11232</td> <td>13728</td> <td>24960</td> </tr> </tbody> </table> <p>Total beneficiaries include the following:</p> <table border="1"> <thead> <tr> <th></th> <th>Men</th> <th>Women</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Internally Displaced People</td> <td>3744</td> <td>4056</td> <td>7800</td> </tr> <tr> <td>Urban Poor</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td></td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td></td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Men	Women	Total	Total beneficiaries	11232	13728	24960		Men	Women	Total	Internally Displaced People	3744	4056	7800	Urban Poor	0	0	0		0	0	0		0	0	0								
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Focal Point and Details - Provide details on agency and cluster focal point for the project (name, email, phone).																																							
(O) Agency focal point for project:	Name*	Hussein Abdi Isak	Title																																				
	Email*	wardiorg@yahoo.com	Chairman																																				
	Address	Woodlands Road 10B, Next Chinese Embassy Kilmani - Nairobi, Kenya - KMS, Opposite National Eye Center, Wadajir District, Mogadishu, Somalia																																					
		Phone*	+252 699988260/61 5501688 or *254 722559006																																				

3. BACKGROUND AND NEEDS ANALYSIS (please adjust row size as needed)

(A) Describe the project rationale based on identified issues, describe the humanitarian situation in the area, and list groups consulted. (maximum 1500 characters) *	<p>The project targets urban households and IDPs in Belet Weyne town and its environs. Beledweyne district has experienced mixed natural and man-made disasters including recurrent droughts, floods and prolonged civil/political conflicts disturbs livelihoods and limited humanitarian aid access to the affected population. FSNAU- Quarterly brief focus on Post GU 12 season early warning issued on June 25, 2012 indicated that Hiran includes the regions experienced below normal rains compounded by pest attacks on crop fields which reduced crop establishment and has resulted in several rounds of re-planting, while the most affected sorghum crops were in most of the sorghum belt regions including Hiran.</p> <p>Furthermore, FSNAU estimates that 63.44% about 86,000 out of the total population of 135,580 in Beledweyne/Mataban district are affected in which 14,000 are in stress, 22,000 are in crises and 11,000 persons are in emergency. Malnutrition levels of the target populations are critical affecting mainly children, lactating women, seek and aged. GAM and SAM rates are estimated as 16.6% (11.7-22.9) and 3.3% (1.7-6.3) respectively. The current integrated nutrition situation analysis indicated as critical and improvements from likely very critical in the Deyr '11/12 while under five mortality rates is remaining of concern and reported as 0.80 (0.53-1.22) and 2.32 (1.30-4.11) which is the highest reported rate in the country.. The overall morbidity was also indicted very high with 63.8% of the assessed children falling ill in the two weeks prior to the survey, while 40% (27.9-52.1) suffering from diarrhea predisposing the children to acute malnutrition. Vulnerability for the target populations is driven by: weakened livelihood assets due to recurrent droughts and floods; limited access of food due to weak purchasing power, displacement due to conflicts/floods and lack of basic services such as WASH which contributes the increase of malnutrition and AWD/Cholera diseases.</p> <p>However, with the above reported food security and nutrition crisis compounded with the consequences of the current floods reported death toll of 55 people including children and displacements of 6,247 HH HHs those either left or destroyed their household assets due to the flooding are highly in need of emergency assistance and majority of them has no capacity to meet their basic needs such as shelter, water, food, health and NFIs without external assistance. It was also reported the large number of livestock and domestic animal death, destroyed houses, assets and completely submerged all latrines and shallow wells making people more risk to AWD *</p>
(B) Describe in detail the capacities and needs in the proposed project locations. List any baseline data. If necessary, attach a table with information for each location. (maximum 1500 characters) *	<p>With the current food security and nutrition situation analysis reported the total of 86,000 people in Belet Weyne district mainly women and children are affected in which 14,000 indicated as in stress, 22,000 in crises and 11,000 in emergency (Source FSNAU Post GU 12) compounding current floods in the town makes people require an immediate WASH interventions with aim to reduce the risks of AWD/cholera with increased sustained access to WASH through rehabilitation or construction of strategic water sources, flood improved sanitation facilities and comprehensive community based hygiene promotion activities.</p> <p>WARDI made rapid assessment on 23/09/2012 have seen that the situation was alarming especially to the poor female headed households with increased malnutrition children due to their low purchasing power. Thus, WARDI observed in the assessment the following:</p> <ol style="list-style-type: none"> 1- An urgent need for providing life saving interventions in water, sanitation and hygiene for vulnerable men, women and children who are currently under AWD/Cholera risk and high likelihood the flooding could continue according to SWALIM report. 2- Need to protect unprotected shallow wells, in order to reduce the risk of the recurrent AWD/Cholera outbreaks 3- Drilling one strategic borehole in Belet Weyne town for the use of the permanent IDPs and the host community in the area. The IDPs will collect their water needs at 12 water points with free of charge, while the host community will pay little amount of money for the water, in order to cover the running expenses and O&M of the water source, but WARDI will support O&M for three months until a management system is developed. 4- In the IDP camps male and female share latrines, but women should get privacy. Thus it is urgently require constructing gender sensitive latrines with hand-washing facility in the 6 targeted IDP camps 5- Distribution of ceramic filters and Jerry cans to the households with malnutrition children, who are mostly at risk for AWD/Cholera diseases. 6- In order to control the extend and spread of AWD/Cholera outbreaks, a comprehensive hygiene promotion activities should be taken including house-to-house, schools, markets, health and nutrition centers visits by trained community mobilizers with the supervision of health promoters recruited only for hygiene promotion services. <p>During the assessment all groups were consulted and actively participated in needs assessments and design-making to meet the needs of young and old, male and female, and ensure that all have benefited the project. WARDI also made through community based participatory and gender/conflict sensitivity approach including but not limited to a serial consultative meetings with the local authorities, traditional elders, private sector, stakeholder analysis, resource mapping, crises affected men and women and labor market assessment through physical visits and random interviews with different market actors, while an individual women interview has been conducted during the period of the assessment.</p>

<p>(C) List and describe the activities that your organization is currently implementing to address these needs.(maximum 1500 characters)</p>	<p>According to the minutes of the Hiran flood taskforce meeting held at SC compound in Beledweyne town on 29th September 2012 and Inter-agency coordination meeting for flood response organized by OCHA held in Beledweyne on 3rd October 2012, the partners of the both coordination meetings has agreed that WARDI to start water trucking for 4000 HHs among populations displaced at bacaadaha and Abdisomane school area of Howl-wadaag section in Beledweyne and HWS to cover 3500 families among those displaced at El-Jaale & Doomeey IDP.</p> <p>Therefore, to address the current flood response, WARDI has already started with bellow listed interventions including:</p> <ol style="list-style-type: none"> 1. Participation of Hiran flood task force and coordination with other humanitarian partners, local authority and AMISOM 2. Distribution of water purification agents and soap for 1350HH in Howladaag section 3. Water trucking (45cubic meter at Israac and Suuqaxoolaha sites 4. Hygiene promotion at Israac and suuqa xoolaha sites 5. Dispatched health mobile teams at Israac and suuqa xoolaha sites 6. Distribution of FRKs to 900HH in Suuqa xoolaha sites 7. Burning and burying death animals <p>II) WARDI with partnership of WHO and UNICEF is currently running one health post in Hawlwadaag section of Belet Weyne town</p> <p>III) WARDI with WHO is running mobile clinics in Belet Weyne and Jalalaqsi districts</p> <p>IV) Blanket Supplementary Food Programme (BSFP) in Belet Weyne district with UNICEF</p> <p>V) Supplementary Food Programme (SFP) project in Belt Weyne district with UNICEF</p>
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4. LOGICAL FRAMEWORK (to be completed by organization)

(A) Objective*	To increase access to life saving sustained safe water, sanitation facilities and comprehensive hygiene promotion activities to		
(B) Outcome 1*	27100 people (4878men, 5962women, 8130girls and 8130boys) of crises affected and AWD/Cholera risk populations have increased access to safe water		
(C) Activity 1.1*	Construction of one strategic water system in Belet weyne town with equal access to men, women, and children for sustained safe water		
(D) Activity 1.2	Rehabilitation of 20 strategic shallow wells and construction of 3 solar powered water supply with water storage facility and water collection		
(E) Activity 1.3	Capacity building training to 24 WASH/WES committees (each committee composing 4men and 3women) on better management		
(F) Indicator 1.1*	Water, Sanitation and Hygiene	Number of people with sustained access to safe water	Target* 15600
(G) Indicator 1.2	Water, Sanitation and Hygiene	Number of people disaggregated by sex, with access to rehabilitated	Target 11500 (2070men and 2530women)
(H) Indicator 1.3	Water, Sanitation and Hygiene	Number of WASH committees disaggregated by sex benefited through	Target 168 (96men and 72women)
(I) Outcome 2	3600 persons (648men, 792women, 1080girls and 1080boys) among IDPs at 6 IDP camps in Belet Weyne town have increased access to safe water		
(J) Activity 2.1	Construction of 120 gender sensitive and flood proof IDP latrines with hand-washing basins to the 6 targeted IDP camps. The design		
(K) Activity 2.2			
(L) Activity 2.3			
(M) Indicator 2.1	Water, Sanitation and Hygiene	Number of people with increased access to appropriate sanitation	Target 3600
(N) Indicator 2.2			Target
(O) Indicator 2.3			Target
(P) Outcome 3	Reduced the risk of AWD/Cholera diseases and other WASH related diseases to 62,400 (11232men, 13728women, 18720girls and 18720boys)		
(Q) Activity 3.1	Trained community HPs will make KAP survey at the inception of the project to evaluate the community's knowledge to KAP behavior		
(R) Activity 3.2	3 days training of 125 (75 women and 50 men) community mobilizers on hygiene and sanitation awareness methods using WASH communication		
(S) Activity 3.3	5 days training to 6 hygiene promoters shared equally by men and women on hygiene and sanitation awareness methods using WASH communication		
(T) Indicator 3.1	Water, Sanitation and Hygiene	Number of people who have participated in interactive hygiene promotion	Target 62400
(U) Indicator 3.2	Water, Sanitation and Hygiene	Number of community mobilizers (CMs) disaggregated by sex participated	Target 125 (50men and 75women)
(V) Indicator 3.3	Water, Sanitation and Hygiene	Number of hygiene promoters disaggregated by sex participated	Target 6 (3men and 3women)
(W) Implementation Plan* Describe how you plan to implement these activities (maximum 1500 characters)	WARDI will directly implement the project with participation of stakeholders using participatory approaches and the project is complementary to already WARDI WASH intervention activity in the area. Mobilization and consultative meetings with communities and other stakeholders will be held regularly. Proposed approaches are: 1) Construction of water supply system in Belet Weyne town that will target most vulnerable households and 6 IDP camps in the town, construction of 3 solar powered water supply systems to 2 schools and 1 health post, rehabilitation of 20 unprotected shallow wells. 2) Improving sanitation facilities through construction of 120 gender sensitive latrines with lockable doors. 3) Improving of hygiene promotion: WARDI will prepare data collection sheets to evaluate the communities' knowledge to KAP behavior of hygiene and will assess the extent to which proper knowledge of hygiene was associated with personal hygiene characteristics at the inception and the end of the project. Data will consist of hygiene and hand washing practices, knowledge about sanitation, personal hygiene characteristics and presence of gastrointestinal parasitic infection that will guide the design and planning hygiene awareness promotion activities to have positive impact on hand washing access to safe water, open defecation and access to sanitation facilities; this will guide the development of comprehensive health and hygiene intervention programs in targeted beneficiaries. Successful implementation of this program is likely to substantially attenuate the transmissible disease burden borne. Comprehensive hygiene promotion activities will do by trained 125 CMs and 6 CHPs through house-to-house, schools, nutrition centres, and health posts visits and through sign boards. Each trained CM will reach 500 persons once a week, four times a month and each CHP will supervise 20 CM in accordance to WC/HP guideline. Awareness campaigns, house-to-house, health posts, nutrition and feeding centers and public gatherings will be utilized supported by IEC materials with HP messages developed under the WASH and health cluster. Messages on AWD/Cholera prevention, ORS preparation and use on emergency preparedness, hand-washing, free open defecation and etc. HP kits will be distributed to 3000 households with malnutrition children and households with AWD disease background with the reference from WARDI health posts and feeding centers in the target beneficiaries' locations and with the community committees' consultation. In addition to that, through participatory approach the specific community needs identified and prioritized, women who are the most affected will be given special focus encouraging them to address their concerns and motivated to share responsibility and decision making with male. However to ensure women's participation in decision making it will be highly motivated male supportive role and respecting with religion and traditional cultures of the beneficiary community, therefore our approach is based only to sensitize men sharing responsibility with women but not pushing them women to lead men since both religion and culture are not opposing women to share responsibility with men and we believe once men accepted to share responsibility with women then we can leave with time to bring women in top of leadership. In conclusion, it's well known that Somali women have limited access to decision making forums at all levels, therefore our approach is to bring a number of women in the community project implementation committee [PIC] and WASH committee sharing responsibly with men		

5. MONITORING AND EVALUATION (to be completed by organization)

<p>(A) Describe how you will monitor, evaluate and report on your project activities and achievements, including the frequency of monitoring, methodology (site visits, observations, remote monitoring, external evaluation, etc.), and monitoring tools (reports, statistics, photographs, etc.). Also describe how findings will be used to adapt the project implementation strategy. (maximum 1500 characters) *</p>	<p>The project will adopt and employ a monitoring and evaluation plan developed for ensuring updates on activities, outputs, actual against planned achievements, and the implementation process. A workshop will be organized to the stakeholders at the project inception period to prepare the plans and ensuring participation of women as it is a precondition for the workshop. The respective roles and responsibilities of stakeholders in M&E will be clearly defined in the plan, womens role in the project activities, participation of the different committees members will also be defined. Project objectives and key indicators shall be documented in Somali language and shared with the beneficiaries, local administration and other local stakeholders to enable them keep track on the project performance and transparency. Benchmarks and target for each quarter will be outlined in the monitoring plans prepared jointly and reviewed by stakeholders on quarterly basis. Complaints mechanisms will be put in place and monitoring tools will be developed to enable the beneficiaries and other stakeholders provide constant feedback to project processes and impacts. Contact details of committees and local administration such as; telephone numbers and contact persons locations will be provided. Monitoring will start right from inception throughout baseline data collection and will be undertaken throughout project period and will relate to objectives indicators and activities as highlighted in the log frame. WARDI project staff will provide monthly activity and monitoring report with photos of the infrastructures before and after construction to the WARDI headquarter office. WARDI has technical staffs based in Mogadishu who will make frequent visits to the project areas and give the project staff technical support. Two levels of monitoring will be applied: 1) Activity level through progress monitoring and 2) Impact level. The activity level will be done by the community members through PIC committees who will use of developed tools/sheets to ensure the community is aware of the support being given. In the villages where facilities are already exist, WARDI and respective communities will form and train gender responsive WASH committees, however, where WASH committees do not exist WARDI in consultation with local communities will form and train new WASH committees. The training will emphasis on basic hygiene promotion initiatives, sustainable water source management and community based participatory impact monitoring. The impact level will be done filling by community level monitoring sheets as per need and will address water access, supply of water, inefficiencies, diseases at community level and general community conception. Monitoring will involve impact indicators as: % of people accessing at least 7.5l/p/d; Number of people trained and are practicing safe hygiene; KAP behaviour survey (hygiene and hand washing practices, knowledge about sanitation, personal hygiene characteristics and presence of gastrointestinal parasitic infection) before and after the project is implemented. % of people accessing sanitation facilities; Number of beneficiaries trained on operation and maintenance of WASH facilities; effectiveness of water supply system management and reliability, reduction of open defecation, improvement of hand-washing and % decline in diarrhea disease. Data from the field will be continuously collected, collated, analyzed, documented and disseminated including lessons and best practices learnt. WASH cluster matrix updates will be done for coordination, sharing and dissemination. Monthly reports will be</p>																																																																												
<p>(B) Work Plan Must be in line with the log frame. Mark "X" to indicate the period activity will be carried out</p>	<table border="1"> <thead> <tr> <th rowspan="2">Activity</th> <th colspan="6">Timeframe</th> </tr> <tr> <th>Month 1-2</th> <th>Month 3-4</th> <th>Month 5-6</th> <th>Month 7-8</th> <th>Month 9-10</th> <th>Month 11-12</th> </tr> </thead> <tbody> <tr> <td>1.1* Construction of one strata</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td></td> </tr> <tr> <td>1.2 Rehabilitation of 20 strata</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td></td> </tr> <tr> <td>1.3 Capacity building training</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td></td> </tr> <tr> <td>2.1 Construction of 120 gen</td> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.2 Trained community HPs</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> </tr> <tr> <td>2.3 3 days training of 125 (7)</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.1 5 days training to 6 hygie</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.2 3 days training of 125 (75 women and 50 men) community mobilizers on hygiene and sanitation awareness methods using WASH clu</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.3 5 days training to 6 hygiene promoters shared equally by men and women on hygiene and sanitation awareness methods using WAS</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Activity	Timeframe						Month 1-2	Month 3-4	Month 5-6	Month 7-8	Month 9-10	Month 11-12	1.1* Construction of one strata	X	X	X	X	X		1.2 Rehabilitation of 20 strata	X	X	X	X	X		1.3 Capacity building training	X	X	X	X	X		2.1 Construction of 120 gen	X	X	X				2.2 Trained community HPs	X	X	X	X	X	X	2.3 3 days training of 125 (7)	X						3.1 5 days training to 6 hygie	X						3.2 3 days training of 125 (75 women and 50 men) community mobilizers on hygiene and sanitation awareness methods using WASH clu							3.3 5 days training to 6 hygiene promoters shared equally by men and women on hygiene and sanitation awareness methods using WAS						
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6. OTHER INFORMATION (to be completed by organization)

<p>(A) Coordination with other activities in project area List any other activities by your or any other organizations, in particular those in the same cluster, and describe how you will coordinate your proposed activities with them</p>	<table border="1"> <thead> <tr> <th>Organization</th> <th>Activity</th> </tr> </thead> <tbody> <tr> <td>1 HWS</td> <td>WASH activities in east side of Belet Weyne villages, BSFP in east Belet Weyne</td> </tr> <tr> <td>2 SAMRADO</td> <td>WASH activities in east Belet Weyne villages, BSFP in east Belet Weyne</td> </tr> <tr> <td>3 HAPO CHILD</td> <td>WASH activities in east Belet Weyne, School WASH activities in east Belet Weyne</td> </tr> <tr> <td>4 HARDO</td> <td>Intergency food Aid intervention in Belet Weyne town</td> </tr> <tr> <td>5 WARDI</td> <td>WASH, BSFP, SFP and Health activities in west Belet weyne with no overlapping v</td> </tr> <tr> <td>6 SC-UK</td> <td>Emergency WASH for flood affected commnity in BW town, Education activities</td> </tr> <tr> <td>7</td> <td></td> </tr> <tr> <td>8</td> <td></td> </tr> <tr> <td>9</td> <td></td> </tr> <tr> <td>10</td> <td></td> </tr> </tbody> </table>	Organization	Activity	1 HWS	WASH activities in east side of Belet Weyne villages, BSFP in east Belet Weyne	2 SAMRADO	WASH activities in east Belet Weyne villages, BSFP in east Belet Weyne	3 HAPO CHILD	WASH activities in east Belet Weyne, School WASH activities in east Belet Weyne	4 HARDO	Intergency food Aid intervention in Belet Weyne town	5 WARDI	WASH, BSFP, SFP and Health activities in west Belet weyne with no overlapping v	6 SC-UK	Emergency WASH for flood affected commnity in BW town, Education activities	7		8		9		10	
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