

For 'new-line' in text fields press [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'

Project Document

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

(A) Organization*	Mandatory fields are marked with an asterisk*			
(B) Type of Organization*	<input type="checkbox"/> UN Agency <input checked="" type="checkbox"/> International NGO <input type="checkbox"/> Local NGO			
(C) Project Title* Please use a precise and informative title that accurately reflects the project.	Emergency Nutrition Response in South Mudug and Galgaduud region			
(D) CAP Project Code	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 1 (July 2010)			
(G) CAP Budget	\$	297,500.00	Must be equal to total amount requested in current CAP. Equals total amount in budget. Grey cells are completed automatically.	
(H) Amount Request*	\$	293,738.14		
(I) Project Duration*	12 months		No longer than 6 months for proposals to the Emergency Reserve.	
(J) Primary Cluster*	Nutrition			
(K) Secondary Cluster	please select Only indicate a secondary cluster for multi-cluster projects.			
(L) Beneficiaries Direct project beneficiaries. Specify target population disaggregated by number. As part of the beneficiaries, list any other groups of relevance (e.g. children under 5, IDPs, pastoralists)	Total*	Men	Women	Children under 18
	16,800		8,000	8,800
	People in HE	People in AFLC	Children under 5	IDPs
	6,500	5,000	8800	about 7,500 people
(M) Location Region(s) and District(s) only, precise locations should be annexed	Regions	<input type="checkbox"/> Awdal <input type="checkbox"/> Banadir <input type="checkbox"/> Bay <input type="checkbox"/> Gedo <input type="checkbox"/> L. Juba <input type="checkbox"/> M. Juba <input checked="" type="checkbox"/> Mudug <input type="checkbox"/> Sanaag <input type="checkbox"/> Togdheer <input type="checkbox"/> Bakool <input type="checkbox"/> Bari <input checked="" type="checkbox"/> Galgaduud <input type="checkbox"/> Hiraa <input type="checkbox"/> L. Shabelle <input type="checkbox"/> M. Shabelle <input type="checkbox"/> Nugaal <input type="checkbox"/> Sool <input type="checkbox"/> W. Galbeed		
(N) Implementing Partners (List name, acronym and budget)	1		Budget:	\$ -
	2		Budget:	\$ -
	3		Budget:	\$ -
(O) Focal Point and Details - Provide details on agency and Cluster focal point for the project (name, email, phone).				
Agency focal point for project:	Name: *	Elena Perego	Title:	Programme Manager
	Email: *	health@cisf-nairobi.org	Phone: *	020 2726772/3
	Address:	Theta Lane, Off Lenana Road, Nairobi		

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.*	The epicenter of the humanitarian crisis continues to be in Mudug, Galgaduud and Hiraa regions of south and central Somalia due to the ongoing drought and civil unrest, which has left 70% of the populations in those regions in Crisis. According to the FSNAU post Gu '09 integrated food security phase classification analysis, the situation in Central regions had significantly deteriorated in severity since the Deyr '08/09, with the number of people in Humanitarian Emergency (HE) increasing by 20% in all livelihoods. An estimated 79% of the population of Galgaduud and 51% of the population of Mudug were either in Acute Food and Livelihood Crisis (AFLC) or Humanitarian Emergency (HE), with 75% of the 440,000 people in crisis falling in HE. An estimated 385,000 of those in crisis were rural pastoralists and 55,000 were urban poor. Emergency levels of acute malnutrition continue to be reported in Somalia with the highest rate in Central Regions, with 1 in 5 children acutely malnourished of which 1 in 20 are severely malnourished. Recent FSAU nutrition assessment (May 2010) in Haud
(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.*	CISP proposes the establishment of 7 OTP and 7 SFP centers to be located in seven different villages in Galgaduud and Mudug region. One of the main criteria for establishing these centers, in addition to the high SAM rate reported, is our existing presence in the areas targeted. Additionally, CISP, in partnership with UNICEF, has been running a out patient therapeutic feeding program in 7 locations in Eldere and Harardere district since January 2009. Thus, based on this and on the gaps in terms of nutrition activities in the considered area, the proposed 7 locations were considered for OTP and SFP intervention. Refresher training of SFP and OTP staff in community based approaches and treatment of moderate and severe malnutrition will be conducted at the commencement of program activities. Supplementary feeding activities will be carried out on a monthly basis, whereas OTP activities will be conducted on a weekly basis. Prior notice will be given to communities on the specific days of these operations. Immunization will also be carried out as part of the
(C) List and describe the activities that your organization is currently implementing to address these needs.	CISP, in partnership with UNICEF has been carrying out nutrition interventions in seven OTP sites in the following locations, Eldere, Wahwein, Mesagwein, Galad, Harardere, Jowle and Dabagalo in Galgaduud and Mudug region improving access to out patient therapeutic assistance for severely malnourished children through the provision of ready to use foods and micronutrient supplements. From Jan 2009 to Feb 2010, the program has admitted and treated 2,536 severely malnourished children surpassing the targeted number of beneficiaries (2,250). High rates of defaults were experienced in the first quarter, which had a direct impact on the recovery rate of the children admitted. However, a significant improvement was seen in the second quarter following deliberate outreach activities. CISP has also been providing maternal and child health services to communities in these seven towns/villages for the past 12 months with the support of UNICEF. So far, 16,200 children have been treated for various diseases mainly malaria, diarrhea and ARI at the 7 MCH clinics under the ongoing program. This represents over 60% of the targeted beneficiaries (children <5) for health

4. LOGICAL FRAMEWORK (to be completed by organization)

(A) Objective*	Reduce malnutrition and improve nutrition levels of children < 5 and pregnant/lactating women through OTP and targeted supplemental		
(B) Outcome 1*	improved nutritional status of children < 5 yrs and pregnant / lactating women.		
(C) Activity 1.1*	set up running and functioning of 7 OTP sites in Dusamareeb, Guriceel, Hannaburo, Elgula, Hobyobitaale and Budbud MCHs		
(D) Activity 1.2	set up 7 targeted SFP in Dusamareeb, Guriceel, Hannaburo, Elgula, Hobyobitaale and Budbud MCHs		
(E) Activity 1.3			
(F) Indicator 1.1*	Nutrition	NUTRITION - SAM treatment programs achieve > 75% cured rate	Target:* 600 SAM (children under 5)
(G) Indicator 1.2	Nutrition	NUTRITION- N. of children targeted by TSFP	Target: 7000 (children under 5 and P
(H) Indicator 1.3	Nutrition		Target:
(I) Outcome 2	Reduced cases of moderate acute malnutrition in children aged 6-59 months		
(J) Activity 2.1	set up, running and functioning of 7 targeted SFP in MCH's in Dusamareeb, Guriceel, Hannaburo, Elgula, Hobyobitaale and Budbud		
(K) Activity 2.2	micronutrient supplementation, deworming and routine vaccination		
(L) Activity 2.3			
(M) Indicator 2.1	Nutrition	NUTRITION - MAM treatment programs achieve > 75% cured rate	Target: 7000 MAM (children under 5
(N) Indicator 2.2	please select	NUTRITION/health - N. of women receiving micronutrient supplement	Target: 8000 (children under 5 and P
(O) Indicator 2.3	please select		Target:
(P) Outcome 3	Capacity of health and nutrition staff in treating malnutrition strengthened		
(Q) Activity 3.1	Conduct refresher training for health workers on the management of malnutrition		
(R) Activity 3.2			
(S) Activity 3.3			
(T) Indicator 3.1	Nutrition	NUTRITION - Number of Staff/CHW trained on the management of acute malnutrition	Target: 35+21
(U) Indicator 3.2	please select		Target:
(V) Indicator 3.3	please select		Target:

<p>(W) Implementation Plan* Describe how you plan to implement these activities</p>	<p>Selective feeding to address moderate and severe acute malnutrition will be conducted at the supplementary feeding program and outpatient therapeutics centres. The program will link supplementary and therapeutic feeding to more development oriented activities .i.e food demonstration minimum package of care and community involvement, during screening days health and nutrition workers will</p>
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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. *</p>	<p>CISP will monitor the project through direct presence and remote management methodology developed taking into consideration the specific security constraints of this area of Somalia and making the most of its prolonged and consolidated presence in the area. In particular:</p> <ul style="list-style-type: none"> - National staff based in the field will be responsible of direct implementation of the activities and to provide weekly flash reports of the activities to the international staff. On a monthly base a more detailed report will be provided including an update of baseline data, information on the evolution of potential beneficiary numbers (in particular IDPs), photo documentation, GIS data, financial and admin data following CISP management system rules, etc. - The field manager through regular field visits (in principle on a monthly base) will supervise field implementation of the activities the collection of baseline data and their regular update by the national staff. The schedule of the visits will be constantly updated on the base of the evolution of the security situation. - A constant flow of information about the intervention to and from the local community and an exchange of information and data from other humanitarian organisations and agencies operating in the area will be part of the monitoring and evaluation system - International staff will be responsible of the management of the intervention following contractual arrangements and CISP
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(B) Work Plan Must be in line with the log frame	Activity	Timeframe					
		Please select 'weeks' for projects up to 6 months, and 'months' for projects up to 12 months					
		Month 1-2	Month 3-4	Month 5-6	Month 7-8	Month 9-10	Month 11-12
1.1* set up 7 new OTP sites	X	X					
1.2 set up 7 SFP in MCH's		X					
1.3							
2.1 set up 7 SFP in MCH's							
2.2 micronutrient supplement	X	X	X	X	X	X	
2.3							
3.1 training of health workers	X	X					
3.2							
3.3							

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6. OTHER INFORMATION (to be completed by organization)

(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	Organization	Activity
1	MSF Belgium	MSF B is currently managing the only district hospital in Guriceel, CISP has already
2		
3		
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10		

(B) Cross-Cutting Themes Please indicate if the project supports a Cross-Cutting theme(s) and briefly describe how. Refer to Cross-Cutting respective guidance note	Cross-Cutting Themes (Yes/No)	Outline how the project supports the selected Cross-Cutting Themes.	Write activity number(s) from section 4 that supports Cross-Cutting theme.
Gender	Yes	Children targeted will be both boys and girls	all
Capacity Building	Yes	The technical capacities of CISP staff members will be enhanced through	3.1