

For 'new-line' in text fields [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*	Humanitarian Africa Relief Development Organization				
(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* <small>For standard allocations, please use the CAP title.</small>	Emergency supplementary and therapeutic feeding to avert nutrition-related mortality and morbidity in Gedo south				
(D) CAP Project Code	SOM-11/H/39898	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 (Feb 2011)				
(G) CAP Budget	343500	Must be equal to total amount requested in current CAP			
(H) Amount Request*	271192.00	Equals total amount in budget, must not exceed CAP Budget			
(I) Project Duration*	12 months	No longer than 6 months for proposals to the Emergency Reserve			
(J) Primary Cluster*	Nutrition				
(K) Secondary Cluster	Water, Sanitation and Hygiene	Only indicate a secondary cluster for multi-cluster projects			
(L) Beneficiaries <small>Direct project beneficiaries. Specify target population disaggregated by number, and gender. If desired more detailed information can be entered about types of beneficiaries. For information on population in HE and AFLC see FSNAU website (http://www.fsnau.org)</small>		Men	Women	Total	
	Total beneficiaries	2515	4355	6870	
	Total beneficiaries include the following:				
	Children under 5	2515	2515	5030	
	Pregnant and Lactating Women	0	1840	1840	
	0	0	0		
	0	0	0		
(M) Location <small>Precise locations should be listed on separate tab</small>	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 type="checkbox"/> Mudug <input type="checkbox"/> Sanaag <input type="checkbox"/> Togdheer <input type="checkbox"/> Bakool <input type="checkbox"/> Bari <input type="checkbox"/> Galgaduud <input type="checkbox"/> Hiraaan <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 <small>(List name, acronym and budget)</small>	1		Budget:	\$ -	
	2		Budget:	\$ -	
	3		Budget:	\$ -	
	4		Budget:	\$ -	
	5		Budget:	\$ -	
	6		Budget:	\$ -	
	7		Budget:	\$ -	
	8		Budget:	\$ -	
	9		Budget:	\$ -	
	10		Budget:	\$ -	
		Total	Budget:	\$ 271,192	
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*	Abdiweli H Adon	Title	Executive Director	
	Email*	hardsomal@gmail.com	Phone*	0722323630/ 0734206001.	
	Address	P.o. box 00610-6263 Eastleigh Juja Road, Nairobi-Kenya			

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) *	un
(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) *	The post Deyr assessment conducted by FSNAU 2010/2011 Described Nutrition situation of childre and PLWs in Gedo is very critical with estimates GAM rate as >16.3 %, and a SAM rate as >3.7% indicating a Very Critical nutritional phase.The total population in crisis in Gedo region has significantly increased from about 14% in Gu '10 to 23% (75, 000) in the current season, of whom 10,000 are in HE and 65,000 are in Acute Food and Livelihood Crisis. Of the total in crisis, 5,000 people in HE and 20,000 in AFLC are from urban while the remaining are from rural livelihoods. The Post Deyr'10/11 analysis shows a deterioration in the food security situation with poor crop and animal production recorded in Gedo region. This deterioration has come as result of the poor Deyr rainfall performance which has significantly affected the rainfall dependent pastoral and agro-pastoral livelihoods.The FSNAU projected total caseloads in 2011 of moderate acute malnutrition in Gedo region is 17229 while 6305 is the projected caseload for those who are severely malnourished and for pregnant and lactating who are at risk was 3363 and out of the
(C) List and describe the activities that your organization is currently implementing to address these needs.(maximum 1500 characters)	Since 2010 HARD has been running emergency nutrition interventions targetting under fives through provision of SFP and OTP services in the target areas in Elwak and Bardheere districts with 18 SFP sites and 6 OTPs across the 2 Districts, supported by UNICEF and OCHA. HARD is conducting also IYCF is counseling and community mobilization on hygiene promotion awareness covering at target village applying PHAST methodology, HARD will build on the aforementioned intervention in the area to provide a holistic response to the emergencies to affecting drought and conflict populations. HARD believes an integrated, holistic intervention is required to meet the urgent and inter-connected food security, nutrition and WASH needs in gap geographic areas and (for example Nutrition is considered one of primary indicators for the poor children less 5years and PLWs population of target districts and Somalia as a whole.To achieve the intended proposed project objectives, HARD has a trained and qualified nutrition staffs, who did Nutrition project implementation for the last past 8 month and management in place on time and have in close consultation and

4. LOGICAL FRAMEWORK (to be completed by organization)

(A) Objective*	To reduce morbidity and mortality in Elwak and Bardheere district(Gedo) through improved and sustained access of integrated essen	
(B) Outcome 1*	At least 70% of estimated caseload of acute moderately and severely malnourished children and 40% of PLWs in targeted area receive	
(C) Activity 1.1*	635 Severely malnourished children are admitted and receive therapeutic care in the 6 OTP sites.	
(D) Activity 1.2	4,395 moderate acutely malnourished children and 1840 PLWs cases are admitted and receive supplementary ration in the 18 SFP sites	
(E) Activity 1.3	Train and actively involve community nutrition volunteers(CNV) in active case finding, defaulter tracing and referrals of OTP and SFP sites	
(F) Indicator 1.1*	Nutrition	SAM treatment programs achieve > 75% cured rates, default rate Target* 635
(G) Indicator 1.2	Nutrition	MAM treatment program achieve- cured>75%, defaulters<15%, d Target
(H) Indicator 1.3	Nutrition	Number of Community Nutrition Volunteers trained and involved in Target
(I) Outcome 2	At least 85% of Children and PLWS receive micro-nutrients, immunization, De-worming, promotion and support for optimal IYFC and d	
(J) Activity 2.1	Support the provision, training and monitoring of micronutrient supplementation activities (Vitamin A and Multi-micronutrient) in the 18	
(K) Activity 2.2	Measles vaccine will be given to all children at age 9 months in our OTPs and SFPs and TT will be given to pregnant mothers at both	
(L) Activity 2.3	Support the training, distribution of IEC materials and monitoring of IYCF activities run in the 18 SFP sites and 6 OTP sites, support cl	
(M) Indicator 2.1	Nutrition	Number of children receiving vitamin A and deworming Target 5030
(N) Indicator 2.2	Nutrition	Number of U5 children receiving measles vaccine Target
(O) Indicator 2.3	Nutrition	Number of IYCF promotion sessions held Target
(P) Outcome 3	Improved capacity and means in 2 districts of Gedo to effectively deliver the BNSP	
(Q) Activity 3.1	Capacity building and mentoring of strategic 80 community stakeholders for implementation of BNSP packages through training and te	
(R) Activity 3.2	Community nutrition volunteers are trained in the essential components of BNSP bi-annually	
(S) Activity 3.3	Holding quarterly meetings with community leaders on the progress of the implemented BNSP packages and planning on the way forw	
(T) Indicator 3.1	Nutrition	Target 80
(U) Indicator 3.2	Nutrition	Number of community nutrition volunteers trained on BSNP Target
(V) Indicator 3.3	Nutrition	Number of meetings held Target
(W) Implementation Plan* Describe how you plan to implement these activities (maximum 1500 characters)	HARD will implement an integrated nutrition programme targeting children under five, pregnant and lactating through screening of MAUC, H/W and school going children with deworming. The nutrition programme will include Outpatient Therapeutic Care programme targeting severely malnourished children able to be admitted in the OTP, severely malnourished children with medical complication will be referred to stabilization centres operated by either COSV and Trocaire. HARD will address underlying causes of malnutrition especially micronutrient deficiencies. The overall strategy will be at two levels: Developing and strengthening the capacity of facility based health worker to identify, treat, manage, refer and prevent acute malnutrition through training and strengthening the capacity. Level two is to empower community nutrition volunteers plus the community stakeholders to prevent and manage acute malnutrition and use of BNSP services through formal training. Out of 6 OTP sites, 4 will be fixed with 2 mobile sites, 1	

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

(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) *

The program performance will be assessed through monthly monitoring of program activities to establish progress towards meeting the targets set in the logical framework. In order to ensure the most effective monitoring, Hard has put the following mechanisms in place, in addition to the regular reporting systems:

- Periodic monitoring exercises (monthly meetings with internal staff, quarterly meetings with relevant partners) will allow the opportunity to address management and monitoring issues.
- Information related to indicators in the logical framework will be collected by nutrition officer at regular on a weekly and monthly basis. Progress in relation to these indicators will be presented in monthly, interim and final reports.
- Monthly financial monitoring against disbursement plan
- Other monitoring events include planned visits to communities, project sites, discussions, meetings, and consultations with authorities and other project partners; workshops, stakeholder meetings, and feedback meetings

The Nutrition coordinator will be take overall technical responsibility of the program and represent the organization in during the nutrition cluster meetings in Nairobi while the nutrition Officer will participate in the regional nutrition cluster meetings. The executive Director will take full responsibility of financial and program activities and may represent the he program in the monthly nutrition cluster meetings during the absence of the nutrition coordinator.

(B) Work Plan
Must be in line with the log frame. Mark "X" to indicate the period activity will be carried out

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* 635 Severely malnourish	X	X		X	X	X
1.2 4,395 moderate acutely	X	X	X	X	X	X
1.3 Train and actively involv	X	X	X	X	X	X
2.1 Support the provision, tra	X	X	X	X	X	X
2.2 Measles vaccine will be d	X	X	X	X	X	X
2.3 Support the training, dist	X	X	X	X	X	X
3.1 Capacity building and m	X				X	
3.2 Community nutrion volun	X				X	
3.3 Holding quartely meeting		X		X		X

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 COSV	Information sharing and coordination of Activities and HARD will do refferrials to ch
2 HIRDA	Field coordination and regional meetings, refferrials children to HIRDA MCHs
3 AMA	Implementing SFP programme in Elwak supported coordination of working hand in
4 SRCS	conducting primary Health care services in Elwak (MCH) referring sick PLWs and
5 UNICEF/other partners	HARD will participate in national and regional coordination with other partners in H
6	
7	
8	
9	
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	HARD will work with gender equality to the in all program activities . community	
Capacity Building		