

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'
Mandatory fields are marked with an asterisk

Project Document

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

| | | | |
|--|---|---|--|
| (A) Organization* | Save the Children | | |
| (B) Type of Organization* | <input type="checkbox"/> UN Agency <input type="checkbox"/> International NGO <input type="checkbox"/> Local NGO <input type="checkbox"/> International NGO | | |
| (C) Project Title* | Emergency nutrition drought response - child and maternal nutrition programme for most vulnerable IDP households and their host communities in humanitarian crisis in Abudwaq, Galgaduud | | |
| (D) CAP Project Code | Not required for Emergency Reserve proposals outside of CAP | | |
| (E) CAP Project Ranking | Required for proposals during Standard Allocations | | |
| (F) CHF Funding Window* | Emergency Reserve | | |
| (G) CAP Budget | Must be equal to total amount requested in current CAP | | |
| (H) Amount Request* | 278498.00 | Equals total amount in budget, must not exceed CAP Budget | |
| (I) Project Duration* | 6 months | No longer than 6 months for proposals to the Emergency Reserve | |
| (J) Primary Cluster* | Nutrition | | |
| (K) Secondary Cluster | Only indicate a secondary cluster for multi-cluster projects | | |
| (L) Beneficiaries | 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) | | |
| | Total beneficiaries | Men | Women |
| | | 1263 | 2027 |
| | Total | | |
| | 3290 | | |
| | Total beneficiaries include the following: | | |
| | Children under 5 | 1263 | 1264 |
| | Pregnant and Lactating Women | 0 | 763 |
| | | 0 | 0 |
| | | 0 | 0 |
| (M) Location | Precise locations should be listed on separate tab | | |
| | 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 | (List name, acronym and budget) | | |
| | 1 | Budget: | \$ - |
| | 2 | Budget: | \$ - |
| | 3 | Budget: | \$ - |
| | 4 | Budget: | \$ - |
| | 5 | Budget: | \$ - |
| | 6 | Budget: | \$ - |
| | 7 | Budget: | \$ - |
| | 8 | Budget: | \$ - |
| | 9 | Budget: | \$ - |
| | 10 | Budget: | \$ - |
| | | Total | Budget: \$ - |
| | | Remaining | Budget: \$ 278,498 |
| 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* | Sonia Zambakides | Title |
| | Email* | s.zambakides@scuk.or.ke | Emergency Manager |
| | Address | Riverside Mews, Off Riverside Drive, P.O. Box 39664 - 00623, Nairobi | Phone* |
| | | | Direct Mobile: +254 (0) 734 622833 Office Mobile: +254 (0) 734 622833 |

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) * | Results of FSNAU post deyr 2010/11 nutritional assessment (SMART) in Galgaduud Region indicated a serious nutrition situation with GAM rates of 12.6% (10.0-15.9) and a SAM rate of 1.5% (0.8-2.9) with no oedema cases reported. Results further indicate that slightly more than one third of the assessed children in the region (33.9%) reported to have suffered from one or more communicable childhood diseases in the two weeks prior to the assessments. High (10.7%) incidences of diarrhoea by mother's recall were reported in the region. High incidences of febrile illness (24.2%) and suspected measles (4.3%) were also reported. Morbidity is associated with the increased risk of acute malnutrition, and the children assessed who reportedly fell sick two weeks prior to the assessment, were almost two times more likely to be acutely malnourished than their counterparts who were not ill (RR=1.57; CI: 1.16-2.13). The infant and young child feeding practices reported among the households still remain sub-optimal, with only 30.7 % of the assessed children aged 6-24 meeting the recommended minimum feeding frequencies and 33.7 % still |
| (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) * | OCHA has described Hiraaan, South Mudug and Galgaduud as 'the epicentre' of Somalia's humanitarian crisis (OCHA CAP Report Somalia 2011 p23). Central Southern Somalia (CSS) has 75% of the acutely malnourished caseload of the country and, in March 2011, there were over 149,000 people displaced in Galgaduud alone. In Galgaduud there are 253,000 people in AFLC while 131,000 are in HE of whom 25,000 are pastoral destitute. It is clear that, even though there have been some recent rains in the region, these will not be sufficient to mitigate the devastating effects of the drought on livestock, livelihoods and increased rates of malnutrition. Due to the drought, already some 50,000 Somalis have been displaced within the country. IDP's across the country are also continuing to report malnutrition rates above emergency thresholds. With urgent need in Abduwak - and in the absence of Central South Somalia nutrition funding in the second CHF allocation - we are applying for ERF for immediate and life-saving nutrition intervention. The supplementary feeding programme aims to prevent and address the main causes of morbidity and |
| (C) List and describe the activities that your organization is currently implementing to address these needs. (maximum 1500 characters) | Save the Children is directly implementing access to education programmes in Abduwak and Adado districts bringing life saving and sustaining support to children (funded by the Swedish International Development Agency - SIDA and Save the Children - Australia). SC has been operating in South Central Somalia since 1992 implementing both long and short-term programmes. SC has great expertise in implementing nutrition and has capacity to carry on such project. In Hiraaan, Save the Children already delivers an extensive emergency nutrition programme for the most vulnerable children and their families. Save the Children has shown high levels of awareness and significant flexibility and adaptability in the face of previous challenges to its emergency nutrition programme delivery in Hiraaan. Emergency nutrition must be viewed within a wider, multi-sectoral drought response - cases of malnutrition must be treated whilst also supporting food access, livelihoods and safe, clean water at household level in the most affected areas. Save the Children's Emergency Drought Response Strategy incorporates and inter-connects all of these elements. |

4. LOGICAL FRAMEWORK (to be completed by organization)

| | | | |
|--|--|---|---------------------|
| (A) Objective* | To prevent and treat the main causes of morbidity and mortality through improved nutrition practices in vulnerable IDP and host popul | | |
| (B) Outcome 1* | Children under the age of 5yrs and PLWs are screened and provided with nutritional support through SFPs. | | |
| (C) Activity 1.1* | Conduct systematic screening and treatment of all cases admitted to SFP | | |
| (D) Activity 1.2 | Support the provision of appropriate micronutrient supplementation; immunisation and de-worming | | |
| (E) Activity 1.3 | Conduct community mobilisation and sensitisation | | |
| (F) Indicator 1.1* | Nutrition | MAM treatment programs achieve > 75% cured rates, default rate | Target* 1516 |
| (G) Indicator 1.2 | Nutrition | Number of children and PLWs who received vitamin A supplemen | Target |
| (H) Indicator 1.3 | Nutrition | Number of community mobilisation sessions conducted | Target |
| (I) Outcome 2 | Pregnant and lactating women have access to and increased awareness of Infant and Young Child Feeding (IYCF) practices | | |
| (J) Activity 2.1 | Weekly IYCF education sessions for PLW (integrated into nutrition) | | |
| (K) Activity 2.2 | Distribution of IEC materials and monitoring of individual counselling, breast feeding mother groups and focus group discussions in 18 | | |
| (L) Activity 2.3 | Support the provision and monitoring of micronutrient supplementation activities (Vit A and Multi-micronutrient) for PLWS. | | |
| (M) Indicator 2.1 | Nutrition | Number of mothers who received breastfeeding counselling inform | Target 763 |
| (N) Indicator 2.2 | Nutrition | Number of IYCF group counseling held | Target |
| (O) Indicator 2.3 | Nutrition | Number of eligible pregnant women receiving MMN during the an | Target |
| (P) Outcome 3 | Community Nutrition Volunteers (CNV) are trained and supervised in screening and referral processes in their communities. | | |
| (Q) Activity 3.1 | Community Nutrition Volunteers trained and supervised in screening and referral of SAM and MAM cases | | |
| (R) Activity 3.2 | Community Nutrition Volunteers trained and supervised in defaulter tracing and follow up of U5s and pregnant and lactating women | | |
| (S) Activity 3.3 | Supervision of 84 CNVs who will screen and refer for immunization U5. | | |
| (T) Indicator 3.1 | Nutrition | | Target 84 |
| (U) Indicator 3.2 | Nutrition | Number of beneficiaries followed up and return after defaulting | Target |
| (V) Indicator 3.3 | Nutrition | Number of beneficiaries refereed for immunization by CNVs | Target |
| (W) Implementation Plan* Describe how you plan to implement these activities (maximum 1500 characters) | <p>SFP in Abudwaq will be provided by WFP – an agreement is already in place with Save the Children and WFP will be providing food, storage, handling, distribution and monitoring in kind.</p> <p>OTP sites in Abudwaq will be directly implemented by Save the Children via a UNICEF funded nutrition intervention. In terms of added value, implementation will include provision of supplementary feeding by WFP in the target areas and the setting up and support of 18 SFP sites in Abudwaq as part of a larger UNICEF funded emergency nutrition programme for Abudwaq and Hiran .</p> <p>Working together, these strands will mean a more extensive, holistic and integrated implementation of emergency nutrition activity in CS Somalia. As mentioned above, the impact of the drought in Galgadud has meant an urgent need for ERF to immediately 'fast-track' a life-saving nutrition response. The I/MAM component of the proposed project targets moderately malnourished children aged</p> | | |

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 project will be monitored, evaluated and reported on using a range of mechanisms:
 •Existing and, where appropriate, new / updated nutrition surveys for Abudwaq to establish baseline.
 •Monthly SFP statistics, screening reports, review of SFP cards.
 •EPI and de-worming statistic
 •Training reports re: SFP staff / CNV's attending training and feedback / learning from training.
 •YCF attendance reports re: weekly education sessions with PLW.

Save the Children field staff stationed in the project areas will be responsible for ensuring the proper implementation of this operation in accordance with the agreed terms. This field staffs have been trained in monitoring, evaluation and reporting. Standardised monitoring formats have been developed. Save the Children monitors emergencies and constantly collects information from the field which strengthens the project-related decision-making process. Internally, project staff holds weekly meetings at the field level to review all operation plans and to offer updates on the project implementation status. Nutrition Coordinator will be responsible for monitoring and ensuring quality; this coordinator will also be responsible for providing all required technical support and back-stopping to the nutrition teams.

(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 | | | | | |
| | Week 1-4 | Week 5-8 | Week 9-12 | Week 13-16 | Week 17-20 | Week 20-24 |
| 1.1* Conduct systematic screening | X | X | X | X | X | X |
| 1.2 Support the provision of IEC materials | X | X | X | X | X | X |
| 1.3 Conduct community mobilization | X | X | X | X | X | X |
| 2.1 Weekly IYCF education sessions | X | X | X | X | X | X |
| 2.2 Distribution of IEC materials | X | X | X | X | X | X |
| 2.3 Support the provision of IEC materials | X | X | X | X | X | X |
| 3.1 Community Nutrition Voluntary Activities | X | X | X | X | X | X |
| 3.2 Community Nutrition Voluntary Activities | X | X | X | X | X | X |
| 3.3 Supervision of 84 CNVs | X | X | X | 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 ICRC | Abudwaq town and Adado - OTP, met and discussed on activities and avoid overlap |
| 2 Somalia RCS | Abduwaq town - targeting their OTP beneficiaries after discharge into SC SFP |
| 3 | |
| 4 | |
| 5 | |
| 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 | Gender is mainstreamed in all Save the Children interventions. The project staff |
| Capacity Building | | |