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**

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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*  Dr. Abdiqani Sheikh Omar  Email*  Somyoungdoctors@gmail.com  Address  Mogadishu-Somalia, Maka almukaram Street, km4, 1st floor tripiano Building  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)*  The ongoing conflicts, extended droughts and lack of humanitarian access has created more new influx. IDPs settled in Hawl-based on identified issues, describe the humanitarian situation in the area, and list groups consulted. (maximum 1500 characters)*  Deyr 2010/11 analysis has revealed a sustained critical phase for the IDPs in Mogadishu which also indicating GAM rates ranging between 15.3 %) in recent August 2011 FSNAU report. In addition outbreaks of infectious diseases such as cholera, and diarrhea have resulted in in the deterioration of the precarious malnutrition levels. □  This project aims to tackle some of the problems mentioned above in order to contribute towards the overall aim of improving access to nutrition services particularly for vulnerable populations such as IDPs children and preganant and lactating women to the coations. List any baseline data. If necessary, attach a table with information for each location. List any baseline data. If necessary, attach a table with information for each location. (maximum 1500 characters)*  As per findings FSNAU Post Deyr 2010/11, The nutrition sasessment conducted in the IDP settlements in Mogadishu in June 2011reported a GAM rate of levels in post Gu ' 2011.A nutrition assessment conducted in the IDP settlements in Mogadishu in June 2011reported a GAM rate of	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*							
(O) Agency focal point for project:    Name   Dr. Abdiquani Sheikh Omar   Title   Executive Director	Focal Point and Details - Provide details on agency and Cluster focal point for the project (name, email, phone).  (0) Agency focal point for project:    Name*   Dr. Abdiqani Sheikh Omar   Title   Executive Director							
Dr. Abdiqani Sheikh Omar   Title   Executive Director   Phone*   +2526-15577282	(O) Agency focal point for project:  Name*    Dr. Abdiqani Sheikh Omar   Title   Executive Director	95,500						
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results all indicate deterioration from previous analysis (6 months earlier) when GAM was estimated at ~25 percent.4.37/10,000/day  (C) List and describe the activities that your organization is currently corrying out nutrition interventions in three OTP/SFP sites in Afgoi Corridor particulary Elasha, Lafole and Arbis improving access to out patient therapeutic assistance for severely malnourished children through the provision of ready to use foods and micronutrient supplements. With funding support from CHF/UNOCHA,SOYDA also providing basic health services to the IDP population in Afgoye and Mogadishu. The project involved the provision of consultation and basic treatment and prevention services.  Both Bondhere and Hawl-Wadag, SOYDA is going to open 2 OTP/SFP for the response current drought situation and Massive new influxs in this areas	locations. List any baseline data. If necessary, attach a table with information for each location. (maximum 1500 characters)*    Experienced an influx of IDPs fleeing from the volatile areas and conflict affected areas of Mogadishu. As well, these areas, like the configuration for each location. (maximum 1500 characters)*    Experienced an influx of IDPs fleeing from the volatile areas and conflict affected areas of Mogadishu. As well, these areas, like the configuration for each location. (maximum 1500 characters)*    Experienced an influx of IDPs fleeing from the volatile areas and conflict affected areas of Mogadishu. As well, these areas, like the processing the processing of the processing for the processing the processing of the pro	experienced an influx of IDPs fleeing from the volatile areas and conflict affected areas of Mogadishu. As well, these areas, like other parts of Somalia, are experiencing drought due to failure of deyr rains of 2010. However, since WFP food distribution stopped, the IDPs were face with lack of access to basic house hold food. ☐  As per findings FSNAU Post Deyr 2010/11, The nutrition situation among this IDPs has deteriorated to Very Critical from Critical levels in post Gu ' 2011.A nutrition assessment conducted in the IDP settlements in Mogadishu in June 2011reported a GAM rate of 39% and a SAM rate 15.3% indicating a Very Critical nutrition situation and deterioration from the Critical rates reported. These results all indicate deterioration from previous analysis (6 months earlier) when GAM was estimated at ~25 percent.4.37/10,000/day SOYDA, in partnership with UNOCHA and UNICEF currently carrying out nutrition interventions in three OTP/SFP sites in Afgoi Corridor particulary Elasha, Lafole and Arbis improving access to out patient therapeutic assistance for severely malnourished children through the provision of ready to use foods and micronutrient supplements. With funding support from CHF/UNOCHA,SOYDA also providing basic health services to the IDP population in Afgoye and Mogadishu. The project involved the provision of consultation and basic treatment and prevention services. ☐  Both Bondhere and Hawl-Wadag, SOYDA is going to open 2 OTP/SFP for the response current drought situation and Massive new						

## 4. LOGICAL FRAMEWORK (to be completed by organization)

T. LOUIGAL I NAMENONN	to be completed by orga	inization)						
(A) Objective*	Reduce malnutrition and imp	Reduce malnutrition and improve nutrition levels of children < 5 and pregnant/lactating women through 2 OTP/SFP (Bondhere and Ha						
(B) Outcome 1*	Improved nutritional status of children < 5 yrs and pregnant / lactating women.							
(C) Activity 1.1*	Screening of all children under five years and consequently register and admit those meeting the admission crieteria of SAM and MAN							
(D) Activity 1.2	Provision of the appropriate	Provision of the appropriate RUTF(ready to use therapeutic foods) to the admitted severely malnourished children without medical cor						
(E) Activity 1.3	Referral and follow up of beneficiaries							
(F) Indicator 1.1*	Nutrition	Nutrition % Coverage of the estimated caseload disagregated by type of rr Target* 11290						
(G) Indicator 1.2	Nutrition	More than 70% of children with severe malnutrition without medic: Target						
(H) Indicator 1.3	Nutrition	SAM treatment programs achieve > 70% cured rates, default rate <b>Target</b>						
(I) Outcome 2	Appropriate Basic Nutrition S	Appropriate Basic Nutrition Services package (BNSP) provided and availed						
(J) Activity 2.1	Provision of Vitamin A and i	iron and other micronutrient supplementation, appropriate IYCF services, deworming for malnourished child						
(K) Activity 2.2	Immunizations and prevention	Immunizations and prevention of common illness including malaria and offer treatment services at the SOYDA health and Nutrtion cer						
(L) Activity 2.3	Provide Sanitation and Hygi	Provide Sanitation and Hygiene education and promote appropriate infant and young child feeding and caring practices						
(M) Indicator 2.1	Nutrition	Number of children receiving vitamin A and deworming Target 5290						
(N) Indicator 2.2	Nutrition	% refered to the appropraite programmes Target						
(O) Indicator 2.3	Nutrition	Nutrition % number of Increased awaraness level of Sanitation and Hygier Target						
(P) Outcome 3	Capacity of Nutrtion staff enhanced though appropriate trainings for nutrition staff and community groups							
(Q) Activity 3.1	Conduct five sessions of SO	Conduct five sessions of SOYDA health and Nutrition staff training in IMAM and IYCF during the project						
(R) Activity 3.2	Conduct 2 sessions of training	Conduct 2 sessions of trainings for mothers, community health workers and other community groups for promotion of breast feeding (I'						
(S) Activity 3.3								
(T) Indicator 3.1	Nutrition	Target 15						
(U) Indicator 3.2	Nutrition	Number of Care givers/mothers trained for promotion of breast fe∈ Target						
(V) Indicator 3.3		Target						
(W) Implementation Plan*	SOYDA will implement this p	project directly whilst working closely with local authorities and partners at the field. SOYDA is planning						
Describe how you plan to	to open 2 OTP/SFP site centers medical teams to work at 2 different strategic locations in Mogadishu (Bondhere District and Hawl-							
implement these activities	Wadag District). The Staffs will comprise 2 nutritional officer, 2 nurses, and 2 nutrition screeners, 1 project support officer, 6							
(maximum 1500 characters)	community mobilizers and 1	community mobilizers and 1 doctor for suppervising and cons ulting with any medical complications for the target site areas. The						
	teams will be operational six	teams will be operational six days a week with 8 working hours per day. Each day daily attendance sheets registration of the staffs						
	and the patients shall be dep	and the patients shall be deployed and managed by the SOYDA field team, while the project coordinator will supervise the activities						
	at the field progress. UNICEF will provide all necessary supplies during the project□							

## 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) \*

SOYDA will involve the communities and other stakeholders to participate in the project monitoring including the elders and the IDPs caps leaders, this will make sure the effectiveness and the quality of the work done and the relevancy as well as the acceptance of the project among the beneficiariy groups.

Monitoring and evaluation will be done through on-site visits and daily supervision.

The main element of programme monitoring is through monthly reporting and, on an individual level, the use of OTP cards. The main indicators to be monitored and reported monthly are;

Admissions (by criterion (Children younger than 5 years (or less than 110 cm in height) who are severely malnourished (weight-for-height "less than -3 Z-scores" or "less than 70% of median") and/or children with oedema, Accumulation of fluid in inter-cellular spaces of the body related to a deficiency in the diet, Severely malnourished children older than 5 years, Low birth weight (LBW) babies, Live born babies with a birth weight less than 2500 g reflecting inadequate nutrition and ill health of the mother, Mothers of children younger than one year with breastfeeding failure (only in exceptional cases where relactation through counseling and traditional alternative feeding have failed).) and also referel of MAM with complications.

SOYDA will also apply standard project control mechanisms to ensure project effectiveness and efficiency in its operating environment.. Moreover, SOYDA will also give high consideration and seek community involvement and support through community

(B) Work Plan

Must be in line with the log frame. Mark "X" to indicate the period activity will be carried out

	Timeframe					
	Please selec	t 'weeks' for proje	cts up to 6 months	s, and 'months	' for projects up	to 12 months
Activity	Week 1-4	Week 5-8 W	eek 9-12 Wee	k 13-16 Weel	k 17-20 Week	20-24
1.1* Screening of all children	X	X	X	X	X	
1.2 Provision of the appropria	X	X	X	X	X	
1.3 Referral and follow up of	X	X	X	X	X	
2.1 Provision of Vitamin A a	X	X	Х	X	X	
2.2 Immunizations and preven	X	X	Х	X	X	
2.3 raise awareness on Sani	X	X	Х	X	X	
3.1 Conducting Five session	X	X	Х	X	X	
3.2 Conduct 2 sessions of tra	X				X	
<b>3.3</b> 0						

6. OTHER INFORMATION (to b	e comp	lieted by organization	on)		
(A) Coordination with other		Organization		Activity	
activites in project area	1	COSV and SAACID		SOYDA will coordinate and liaise with COSV and SAACID. All	these organizations
List any other activities by your or	2	NRC AND UNICEF		are involved in livelihoods and WASH programme in some of	the IDP camps with
any other organizations, in	3				
particular those in the same cluster,	4				
and describe how you will	5				
coordinate your proposed activities	6				
with them	7				
	8				
	9				
	10				
				T	
(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	SOYDA will consider the gender of the project as will involve the female	***************************************
		Capacity Building			
			•		