

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*	SWISSO - Kalmi			
(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*	Humanitarian response for the treatment and prevention of severe and moderate malnutrition in Lower Shabelle and Bay regions			
(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*	176770.00	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	Food Assistance			
(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	7708	15417	
	Total beneficiaries include the following:			
	Children under 5	4590	9180	
	Pregnant and Lactating Women	0	6237	
	Pregnant and Lactating Women	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:	\$ 176,770		
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 Abdi Hersi	Title	Regional coordinator
	Email*	hers1959@yahoo.co.uk	Phone*	0722777455
	Address	Kawi Complex, Woodland road, Suite 3, Hurlingham; P.O.Box: 573-00610, 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) *	Currently, Somalia has been in situation of humanitarian crises; tens of thousands of people have died and many more lives are at risk; 3.7 million people, more than half the population, require humanitarian assistance; in some regions such as Lower Shabelle and Bakool the nutrition situation reached the highest ever. On July 21st 2011, UN has declared famine in Somalia as acute malnutrition for under 5 children exceed 30% in some regions in South Somalia. There has been high number of IDPs moving towards places where they can get food/nutrition and water as these are their main priority; Many people have already reached the capital Mogadishu, while many others crossed the borders between Somalia, Kenya and Ethiopia. However, the majority of affected communities are still remaining in their original places where there is no humanitarian access. In Lower Shabelle region where SWISSO is operating, there are new IDPs, the biggest one is in K50. In this camp, more than 7,000 families arrived in July only (SWISSO mission report, July 2011). There are other IDPs in other districts in the region such as Sabale, Kurtunwarey, Qoryoley
(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 nutrition situation in Lower Shabelle is one of the worst of all Somalia where severe malnutrition rate has reached 50% with the highest death rates exceeding six deaths in 10,000 per day. Famine has been declared in Lower Shabelle and parts of Bakool in southern Somalia. The nutrition situation is aggravated by the insecurity and the poor access of humanitarian interventions in many parts of the region. Due to the high level of insecurity experienced in South Somalia, it has been very difficult for FSNAU and other nutrition partners to conduct regular surveys and in-depth nutrition surveillance activities. Consequently the nutrition information collected from the area has been mainly through rapid MUAC nutrition assessments. FSNAU conducted a rapid nutrition assessment on April 2011 using MUAC indicates that the proportion of children at risk of acute malnutrition were 22% and 19.1% (13.8-25.7) in the Lower Shabelle. The nutrition information from our health facility and nutrition sites showed a high level of children with severely malnourished. These results indicate a likely Very Critical nutrition situation in the region, a likely deterioration from
(C) List and describe the activities that your organization is currently implementing to address these needs. (maximum 1500 characters)	In this project, SWISSO is planning to implement OTP and SFP operations at 6 nutrition sites (2 TSFPs/OTPs in Merka district; 1 TSFP/OTP in Qoryoley district; 1 TSFP/OTP in Kurtunwarey district; and 2 TSFP/OTP in Baidoa). SWISSO is supporting 76 health staff working nutrition sites including nurses, nutrition screeners, vaccinators and volunteers by providing incentives, technical and logistic assistants, capacity building as well as monitoring and evaluation. Each OTP/TSFP site is operational 5 days a week, screening and admitting severely and moderately malnourished children under 5 years of age, and treats malnourished pregnant and lactating women. All children and pregnant women seen at therapeutic feeding centers receive anthropometric measurements. Children <-3 WFH z-score (WHO) or with MUAC <115mm and/or oedema are admitted into the OTP; Malnutrition cases with medical complications are referred to inpatient treatment/SC; Children with <-2 and >=-3 WFH z-score (WHO) or with MUAC <125mm and >=115mm are referred to TSFP. As an emergence situation, SWISSO will rehabilitate new facilities in Baidoa

4. LOGICAL FRAMEWORK (to be completed by organization)

(A) Objective*	To improve the nutritional status of children < 5 years of age and Pregnant and Lactating Women (PLW) in Lower Shabelle and Bay re		
(B) Outcome 1*	Improved access and utilization for women and children of community - based nutrition services		
(C) Activity 1.1*	Provision of therapeutic feeding for malnourished children and pregnant and Lactating Women (PLW)		
(D) Activity 1.2	Provision of measles immunization in all nutrition sites;		
(E) Activity 1.3	Provision of adequate nutrition supplies to all SWISSO nutrition sites		
(F) Indicator 1.1*	Nutrition	% Coverage of the estimated caseload disaggregated by type of r	Target* 15417
(G) Indicator 1.2	Nutrition	4680 children will be immunized for measles	Target
(H) Indicator 1.3	Nutrition	6 TSFPs/OTPs will receive nutrition supplies	Target
(I) Outcome 2	Capacity of health staff improved for the management of malnutrition		
(J) Activity 2.1	18 health and nutrition staff will be trained including nutrition sreeners and nurses		
(K) Activity 2.2	80 community mobilizers will be trained for malnutrition awareness and nutrition surveillance		
(L) Activity 2.3			
(M) Indicator 2.1	Nutrition	Number of Staff/CHW trained on the management of acute malnu	Target 18
(N) Indicator 2.2	Nutrition	80 community mobilizers will be trained	Target
(O) Indicator 2.3			Target
(P) Outcome 3	Exclusive breastfeeding and maternal nutrition promoted through behavior change and awareness campaign		
(Q) Activity 3.1	Distribution IEC materials for breastfeeding messages		
(R) Activity 3.2	Training of community outreach workers		
(S) Activity 3.3	Community awareness campaign workshops/events will be conducted		
(T) Indicator 3.1	Nutrition		Target 3000
(U) Indicator 3.2	Nutrition	Number of community workers trained	Target
(V) Indicator 3.3	Nutrition	Number of workshops/events conducted	Target
(W) Implementation Plan* Describe how you plan to implement these activities (maximum 1500 characters)	SWISSO –Kalmo, in collaboration with local communities and IDP committees, will implement this project directly. SWISSO –Kalmo will strengthen the existent selective feeding centers and establish new ones in the newly formed IDPs in Lower Shabelle and Baidoa regions. In this project, SWISSO will support 6 TSFPs/OTPs in 5 locations in Lower Shabelle and Baidoa. SWISSO–Kalmo has technical staff in the field who will provide continuous support supervision and provide on the job training to field staff (76 staff in total), 12 of which have been operating at the OTP centers since 2010 in Merka district. SWISSO will train 18 new staff for Community – Based therapeutic feeding programme. Children and PLW with moderate malnutrition will be admitted in TSFP, while those with severe malnutrition will be admitted in OTP; severely malnourished children with medical complications will be transferred into nearby SCs. SWISSO will provide referral for (whether for referral to the family going to the SC. TSFP activities will be carried		

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) *

SWISSO has a field-based team who monitors the implementation of the project against the agreed work plan and set targets on a day-to-day basis. SWISSO has a technical team based in Nairobi and Zurich who will monitor the project on a daily basis, review the implementation plans weekly and analyses programme financial data on a monthly basis. A detailed project implementation plan will be developed before the start of the project activities. A Technical person (Nutrition specialist) will implement the project and he/she will be responsible the overall nutrition activities in the area of operation. All TSFP/OTP sites admit and treat cases 6 days per week, while Friday is off day. Weekly TSFP/OTP reports, documenting daily admissions and discharges are entered in SWISSO data base. Weekly reports are combined to complete the required monthly OTPs/TSFPs by UNICEF. In addition to the regular weekly and monthly reports, overall quarterly financial and narrative project reports will be provided to UNOCHA.

(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* Provision of therapeutic f	X	X	X	X	X	X
1.2 Provision of measles imr	X	X	X	X	X	X
1.3 Provision of adequate nu	X	X	X	X	X	X
2.1 18 health and nutrition st	X					
2.2 80 community mobilizers	X					
2.3 Distribution IEC material	X	X	X	X	X	X
3.1 Training of community ou	X					
3.2 Community awareness c	X					
3.3 Community awareness campaign workshops/events will be conducted						

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	Referral of severely malnourished children with medical complication to SC Provision of Supplies and technical support
2 UNICEF	
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	The overall pro posed project activities are specifically targeting to women and	100,521,005,310,056
Capacity Building		