

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)**

<b>(A) Organization*</b>	Skills Active Forward				
<b>(B) Type of Organization*</b>	<input type="checkbox"/> UN Agency <input type="checkbox"/> International NGO <input type="checkbox"/> Local NGO <input checked="" type="checkbox"/> International NGO				
<b>(C) Project Title*</b>	Emergency nutrition intervention for acutely malnourished children and pregnant lactating women in 5 coastal villages in Mudug region, Somalia				
<b>(D) CAP Project Code</b>	Not required for Emergency Reserve proposals outside of CAP				
<b>(E) CAP Project Ranking</b>	Required for proposals during Standard Allocations				
<b>(F) CHF Funding Window*</b>	Emergency Reserve				
<b>(G) CAP Budget</b>	Must be equal to total amount requested in current CAP				
<b>(H) Amount Request*</b>	\$	150,036.00	Equals total amount in budget, must not exceed CAP Budget		
<b>(I) Project Duration*</b>	6 months		No longer than 6 months for proposals to the Emergency Reserve		
<b>(J) Primary Cluster*</b>	Nutrition				
<b>(K) Secondary Cluster</b>	Only indicate a secondary cluster for multi-cluster projects				
<b>(L) Beneficiaries</b> 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 ( <a href="http://www.fsnau.org">http://www.fsnau.org</a> )		<b>Men</b>	<b>Women</b>	<b>Total</b>	
	<b>Total beneficiaries</b>	17	1543	1560	
	<b>Total beneficiaries include the following:</b>				
	<b>Children under 5</b>	1067	1068	2135	
	<b>Pregnant and Lactating Women</b>	0	1525	1525	
<b>Staff (own or partner staff, authorities)</b>	17	18	35		
<b>Internally Displaced People/Returnees</b>	0	0	0		
<b>(M) Location</b> 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"/> 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"/> Salgadoudu <input type="checkbox"/> Hiraaan <input type="checkbox"/> Shabelle <input type="checkbox"/> M Shabelle <input type="checkbox"/> Nugaal <input type="checkbox"/> Sool <input type="checkbox"/> W Galbeed				
<b>(N) Implementing Partners</b> (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: \$ -	
		<b>Total</b>			Budget: \$ -
	<b>Remaining</b>			Budget: \$ 150,036	
<b>Focal Point and Details - Provide details on agency and Cluster focal point for the project (name, email, phone).</b>					
<b>(O) Agency focal point for project:</b>	Name*	Eng. Abdi Hashi	Title	Executive Director	
	Email*	info@safuk.org	Phone*	+254725449441	
	Address	G10 Eden House, School Grove, Westland P.O Box 102301 - 00100 Nairobi			

**3. BACKGROUND AND NEEDS ANALYSIS (please adjust row size as needed)**

<b>(A) Describe the project rationale based on identified issues, describe the humanitarian situation in the area, and list groups consulted. (maximum 1500 characters) *</b>	Civil unrest in south Mudug region has impacted negatively on the health and nutrition service infrastructures benefiting under five children, pregnant and lactating women. Increasing life-threatening gaps in the coverage of essential health and nutrition services are compounded by inadequate access to safe water and sanitation, increasingly eroded livelihoods and mass displacement. Unfortunately, in all the assessed villages in Mudug and in particular Eel-Dhanane and Dhinowda have recently attracted pirates who are not only having negative economic impacts in disrupting local livelihood capacities but are also terrorizing local communities with pirates related crimes. Furthermore, the area is new in the sense that has not been accessed and has gaps for many months hence elevated malnutrition rates. FSNAU assessment report Post Gu September 2011 indicates GAM 14.4% and 17.8% in Hawd and Addun respectively. Hawd region indicates a critical situation in nutrition whereas Addun is indicating a very critical nutrition situation. In Hawd and Addun region indicates alert status for immunization with increased morbidity cases of 37% and 36.7% respectively. Infant and child feeding practices remain suboptimal in the assessed areas with only 34.6 % and 35.9% of the children aged 6-24 months reportedly still breastfeeding from the Hawd and Addun livelihood zone respectively, while only 16.3% from the Hawd and 15.8 % from the Addun livelihood zone reportedly met the minimum recommended feeding frequencies. In addition more than half of the children consumed poorly diversified diets comprising of four or fewer food groups. Inappropriate breastfeeding and complementary feeding practices deprives the children of the essential nutrients required for growth and development while exposing them to a high risk of malnutrition and morbidity. The FSNAU post Gu' assessment classified Hawd and parts of Addun in AFLC, the nutrition situation remained serious for the Hawd pastoral livelihood. The populations of Addun are classified in critical nutrition situation, showing deterioration from serious in the previous season. The outbreaks of measles, AWD and cholera and deteriorating food security indicators are likely to cause further deterioration in the Hawd population if there is no intervention stepped up. The project aims at providing emergency nutrition intervention through OTP program to the targeted 400 severely malnourished children, 1735 moderately malnourished children and 1525 PLW in Dhinowda, Buq qalo, Eel Dhanane and Goryo wayn villages along the coastal strip of Mudug region.
<b>(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) *</b>	The target locations have no nutrition interventions. Recent needs assessment conducted by SAF UK International and Somali Consultants Association (SOCA), reflected a nutrition gap in nutrition service delivery in Qoryo-Wayn, Buq-Qal'o, Galhagooq, Eel-Dhanane and Dhinowda villages of Jarriban/Hobyoy district of Mudug region and lack of management of acutely malnourished children at the community level. Looking ahead through July, insecurity is expected to remain a significant driver of food insecurity. In areas controlled by militants, the food security of 1.7 million people in Crisis could decline sharply in the coming months due to the lack of access to humanitarian assistance, in particular the recent expulsion of most implementing agencies which remained in the south. On 8/20/2015 going military operations in southern Somalia are also anticipated to interrupt production and market activities, impeding consolidation of the recovery process. To this effect, SAF-UK has submitted this emergency proposal to respond to the current crisis as well as preparing resilience to prevent sudden future shocks to the vulnerable member of the community targeted in this proposal. It was noted that there was a need to implement a complete nutrition programme that meets the minimum life saving package and nutrition service delivery.
<b>(C) List and describe the activities that your organization is currently implementing to address these needs. (maximum 1500 characters)</b>	SAFUk-International has been working in the target locations since 2010 in health, nutrition and livelihood programs. The organization has been largely funded and supported by the friends in the Diaspora as well as CHF funding from UN-OCHA. Currently SAFUK has signed one year nutrition PCA with UNICEF in the coastal villages of Mudug region and Eastern Jilib vilages of Middle Juba region. Furthermore, SAF-UK is due to have an agreement for TSFP program supported by WFP in the coastal vilages of Mudug and South Hobyoy mudug region. SAF-UK also runs 1 MCH in Kax-Shirkal Mogadishu in provision of Micronutrient tablets and basic ANC services.  The proposed areas for intervention are new sites that have not been accessible, there has been a gap for many months hence elevated malnutrition levels in reference to the FSNAU situation map. SAF - UK has access to the area now hence the proposed activities in the area to reduce the malnutrition cases.

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

<b>(A) Objective*</b>	Improve nutritional status of 2135 children under five and 1525 pregnant and lactating women in 5 targeted villages in Mudug region	
<b>(B) Outcome 1*</b>	Increased case detection, prevention and treatment of acutely malnourished children, pregnant and lactating mothers	
(C) Activity 1.1*	Provision of OTP services to children aged 6-59 months at 5 OTP sites to support severely malnourished children	
(D) Activity 1.2	Active case screening and referrals of moderately malnourished children aged 6-59 months, pregnant and lactating mothers to be a	
(E) Activity 1.3		
(F) Indicator 1.1*	Nutrition	Number of children (6-59months) and pregnant and lactating wo <b>Target*</b> 400
(G) Indicator 1.2	Nutrition	1735 children admitted to SFP and 1525 PLW admitted <b>Target</b>
(H) Indicator 1.3		<b>Target</b>
<b>(I) Outcome 2</b>	Enhanced BNSP service provision to the beneficiaries	
(J) Activity 2.1	Promote IYCF activities with emphasis on Exclusive breast feeding and complementary feeding	
(K) Activity 2.2	Prevention and management of common diseases ( anemia, diarrhea, Malaria etc)	
(L) Activity 2.3	Hygiene promotion through community and beneficiary awareness on hand washing	
(M) Indicator 2.1	Nutrition	Number of IYCF promotion sessions held <b>Target</b> 4
(N) Indicator 2.2	Nutrition	Number of children, pregnant and lactating mothers receiving mi <b>Target</b>
(O) Indicator 2.3	Nutrition	Number of hygiene promotion sessions <b>Target</b>
<b>(P) Outcome 3</b>	Enhanced service delivery, active case screening with improved staff capacity at the health and community levels	
(Q) Activity 3.1	Training of 10CHW,5 nutrition assistants both male and female on nutrition screening, referrals and case follow up of acute malnou	
(R) Activity 3.2	Training of 10CHW male and female, 5 nurse nutritionists and 5 nutrition assistants on IYCF / complementary feeding and food pre	
(S) Activity 3.3	Conduct community awareness sessions on malnutrition, detection and referrals.	
(T) Indicator 3.1	Nutrition	Number of Staff/Community Health Workers/outreach workers tr <b>Target</b> 15
(U) Indicator 3.2	Nutrition	Number of CHW, nurses and nutrition assistants trained on IYCF <b>Target</b>
(V) Indicator 3.3	Nutrition	Number of community awareness sessions held <b>Target</b>
<b>(W) Implementation Plan*</b> Describe how you plan to implement these activities (maximum 1500 characters)	<p>SAF-UK staff in collaboration with community elders, community health workers and women household heads will mobilize and sensitize the target communities on the importance of the project. Children aged 6-59 months will be screened and admitted to the OTP programme as well as SFP programme. The treated cases in OTP will be referred for admission in the SFP program. Malnourished pregnant and lactating women will be screened and registered in the SFP programme. The target beneficiaries will be provided with nutrition packages throughout the project time. UNICEF will provide nutrition supplies including drugs and consumables as well as technical guidelines where necessary to the OTP and SFP staff. a Nutrition Technical Advisor will provide technical advice and support during the project implementation. SAF UK OTP and SFP staffs will carry out community awareness on management of malnutrition to target community members. SAF-UK is due to sign 7 months TSFP in a few days time with WFP for the implementation of TSFP.</p> <p>Progress reports will be recorded on monthly basis and shared with UNICEF Somalia using UNICEF monthly reporting template in disaggregated data. Interim and final reports will be shared with OCHA. There will be 5 OTP/SFP sites and with 5 teams; 4 teams mobile and one based at the Dhinowda Hospital. All the five teams will comprise of a supervisor, a nurse, an auxiliary nurse, two screeners and two registrars as well as two community health workers who will mobilize the target beneficiaries. Training of OTP/SFP staff will be conducted in the first month of the project for two days consecutively for the 30 staff consisting of a nurse, two screeners, a supervisor and two registrars per OTP/SFP site prior to commencement of screening, registration and admission of malnourished children aged between 6-59 months in to the program. Training of 10 community health workers including 5 women and 5 men will be conducted for two days, while Community education sessions will be conducted for 60 persons including 30 women and 30 men for four sessions conducted in alternate months the project to enlighten the target communities on malnutrition and the relevant mitigation measures to scale down the high rates of malnutrition.</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) \*

SAF UK project staff supported by the women household heads, community elders and local authority representatives will conduct regular monitoring of the project throughout the project time while evaluation will be conducted at the end of the project. Project monitoring will be continuous and will include both monitoring of the impact of the implemented activities, as well as its effectiveness in achieving the result indicators. The nutrition coordinator and field staff will carefully monitor the project regularly and document all activities to ensure effective implementation and in particular targeting the project beneficiaries. The project manager will produce monthly progress reports on activities till their completion. Monitoring from project start will be supported by the use of a logical framework. The project manager and project staff will ensure that monitoring and evaluation information is recorded in an accurate and consistent way, and that reporting is done in a timely manner. All stakeholders (target beneficiaries, SAF UK project staff, community elders and local authority representatives) will review the project progress to ensure project objectives are achieved. Project activities will be shared with the nutrition cluster on monthly basis as well as by updating the 3W matrix. Documentation of all project activities will be done to ensure effective implementation. Quality and timely reports will be provided to CHF, UNICEF, UNOCHA and other stakeholders as per the national guidelines. SAF-UK will also conduct regular supervisory visits to the health facilities and outreach sites and reports together with feedback to the staff given for continuous improvement of the nutrition programme.

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

Activity	Timeframe					
	Week 1-4	Week 5-8	Week 9-12	Week 13-16	Week 17-20	Week 20-24
1.1* Provision of OTP service	X	X	X	X	X	X
1.2 Active case screening and	X	X	X	X	X	X
1.3 Promote IYCF activities	X	X	X	X	X	X
2.1 Prevention and manage	X	X	X	X	X	X
2.2 Hygiene promotion throu	X	X	X	X	X	X
2.3 Training of 10CHW, 5 nu	X	X	X	X	X	X
3.1 Training of 10CHW male	X	X	X	X	X	X
3.2 Conduct community aw	X	X	X	X	X	X
3.3 Conduct community awareness sessions on malnutrition, detection and referrals.	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 Shadedley - Local NGO	General food Distribution Program, referral of malnourished cases to SAF UK OT
2 SDRO - Local NGO	Outreach programs, inter referral of children in case of long distance to their prog
3 Nutrition Cluster	Active participation in the cluster coordination meetings at Nairobi and field level
4 UNICEF	For supplies and monitoring support
5 Nutrition Cluster	Coordination with the cluster at Nairobi and field levels
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 project will benefit pregnant lactating women as well as boys and girls aged
Capacity Building		