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*

CHF SOMALIA

Project Document

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

(A) Organization*	United Nations Children''s Fund				
(B) Type of Organization*	☐ UN Agency ☐ International NGO ☐ Local NGO UN Agency				
(C) Project Title* For standard allocations, please use the CAP title.	Nutrition response for treatment of severe acute malnutrition				
(D) CAP Project Code	SOM-13/H/56684	Not required for Emergency Reserve proposals outside of CAP			
(E) CAP Project Ranking	A - HIGH	Required for proposals during Standard Allocations			
(F) CHF Funding Window*	Standard Allocation 1 (May 2013)				
(G) CAP Budget	$ 34,614,728.00	Must be equal to total amount requested in current CAP			
(H) Amount Request*	$ 1,493,157.15	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		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)

	Men	Women	Total	
Total beneficiaries	100	100	200	
Total beneficiaries include the following:				
Children under 5	7825	7825	15650	
Staff (own or partner staff, authorities)	100	100	200	
Other (Select)			0	
Other (Select)			0	

(M) Location
Precise locations should be listed on separate tab

Regions							
☐ Awdal	☐ Banadir	☐ Bay	☐ Gedo	☐ L Juba	☐ M Juba	☐ Mudug	☐ Sanaag	☐ Togdheer
☐ Bakool	☐ Bari	☐ Galgaduud	☐ Hiraan	☐ L Shabelle	☐ M Shabelle	☐ Nugaal	☐ Sool	☐ W Galbeed

(N) Implementing Partners
(List name, acronym and budget)

		Budget:	
1	SCZ Implementing Patners	Budget:	$ 878,150
2		Budget:	$ -
3		Budget:	$ -
4		Budget:	$ -
5		Budget:	$ -
6		Budget:	$ -
7		Budget:	$ -
8		Budget:	$ -
9		Budget:	$ -
10		Budget:	$ -
	Total Budget:		$ 878,150
	Remaining Budget:		$ 615,007

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*	Sarah Nginja	Title	Donor Relations Specialist
	Email*	snginja@unicef.org	Phone*	020 7622814
	Address			

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) *

Somalia is in constant nutrition crisis with rates of acute and chronic malnutrition exceeding the emergency threshold in most areas. As noted by FSNAU Deyr and Gu surveys, this situation is affected by low coverage of primary health care facilities, poor care practices (especially those associated with infants, young children and PLWs), fluctuating food insecurity and poor access to hygiene and sanitation facilities. Additionally, although conditions have improved considerably since the height of the famine in 2011, the food and nutrition security crisis continues. A mix of factors contribute to the continued dire situation in Somalia, including insecurity from the on-going incursions, lack of humanitarian access in areas, reduced coping mechanisms, increased vulnerability and decreased resilience, areas with poor performance of crops, lack of access to markets, restriction of commercial and population movements and deep rooted poverty. Furthermore, high prices present the main and overriding barrier to access to food. The nutrition situation thus remains of high concern and sustained focus on a combined treatment and prevention nutrition programme focused at the community level is required. Acutely malnourished children will continue to require life-saving treatment, while their mothers learn improved feeding practices to reduce risks of malnutrition.

(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 Deyr 12/13 report highlights the continuation of a very critical nutritional situation in CSZ especially evident in Bay, Jubas, Bakool, Middle Shabelle and Hiraan. As of Feb 2013, median GAM prevalence across Somalia is estimated at 14.3% (215,000 children). Analysis results also identify a higher proportion of acutely malnourished PLW (MUAC<23 cm or 21 cm) than non-PLWs (MUAC<18.5 cm).
Of the 215,000 acutely malnourished children, 45,000 (3% of children < 5) are severely malnourished requiring immediate life-saving interventions. With a conservative estimate, UNICEF will target 60% of the resulting total yearly caseload of 135,000 children, i.e. 80,000 severely malnourished children (40,000 boys and 40,000 girls) in 2013.
A significant proportion of these malnourished boys and girls (66%) are located in south Somalia, where there are concerns about their ability to access vital basic services needed for survival. Restrictions on the population's ability to access humanitarian assistance; vulnerability to food insecurity; persistent high morbidity and sporadic disease outbreaks further aggravate the situation. Considering the high caseload and high risk of death associated with un-treated SAM (over nine times more risk of death) as compared to non-acutely malnourished children, treatment of SAM is a significant priority for UNICEF. UNICEF and Nutrition Cluster will support integration of preventative activities into curative services while building partner capacity.

(C) List and describe the activities that your organization is currently implementing to address these needs.(maximum 1500 characters)

UNICEF is unique in its scope, scale and convening power in the management of malnutrition in Somalia. UNICEF''s nutrition programme emphasizes an integrated approach to the nutrition crisis including the expansion of life-saving activities as well as addressing the underlying causes of malnutrition.
Additionally, strategic rationalization exercises in collaboration with the nutrition cluster are currently ongoing in order to ensure effective program delivery, continuing the shift in focus from case management to preventive community based nutrition initiatives such as IYCF, integrated nutrition, health and hygiene promotional activities and community development through a community health worker system. Community based systems will help to promote resilience within the community by empowering them to implement programmes which will support optimal nutrition, hygiene and health in their community. Quality of programmes will also continue to improve through the initiatives of the LTD unit in developing the capacity of nutrition and WASH partners.
UNICEF has established partnership agreements with more than 100 partners and also leads the Nutrition Cluster. Apart from MSF programmes, and some NGOs'' buffer stock, UNICEF is the sole channel of RUTF to the NGOs/implementing government partners in Somalia. Through the UNICEF Supply Division in Copenhagen, UNICEF is in a unique position to negotiate rates and obtain priority in production given the large scale of orders globally.

4. LOGICAL FRAMEWORK (to be completed by organization)

(A) Objective*	To avert excess mortality due to acute malnutrition and associated morbidities for 15,650 (7,825 boys and 7,825 girls) severely			
(B) Outcome 1*	7,825 severely malnourished boys under five and 7,825 severely malnourished girls under five will receive therapeutic care for the n			
(C) Activity 1.1*	Provide supplies to implementing partners providing services for treatment of severe acute malnutrition for boys and girls under five			
(D) Activity 1.2				
(E) Activity 1.3				
(F) Indicator 1.1*	Nutrition	Number of children (6-59months) and pregnant and lactating wo	**Target***	15650
(G) Indicator 1.2	nd pregnant and lactating women		**Target**	
(H) Indicator 1.3	nd pregnant and lactating women		**Target**	
(I) Outcome 2	Capacity of Nutrition cluster partners strengthened to contribute to the reduction of mortality caused by acute malnutrition for 100 m			
(J) Activity 2.1	Conduct capacity development activities for for 100 male and 100 female implementing partner staff. including appropriate training,			
(K) Activity 2.2				
(L) Activity 2.3				
(M) Indicator 2.1	Nutrition	Number of Staff/Community Health Workers/outreach workers tr	**Target**	200
(N) Indicator 2.2	orkers/outreach workers trained on		**Target**	
(O) Indicator 2.3	orkers/outreach workers trained on		**Target**	
(P) Outcome 3				
(Q) Activity 3.1				
(R) Activity 3.2				
(S) Activity 3.3				
(T) Indicator 3.1	orkers/outreach workers trained on	Number of Staff/Community Health Workers/outreach workers tr	**Target**	
(U) Indicator 3.2	orkers/outreach workers trained on		**Target**	
(V) Indicator 3.3	orkers/outreach workers trained on		**Target**	
(W) Implementation Plan* Describe how you plan to implement these activities (maximum 1500 characters)				

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) *

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

Activity	Month 1-2	Month 3-4	Month 5-6	Month 7-8	Month 9-10	Month 11-12
	Timeframe Please select 'weeks' for projects up to 6 months, and 'months' for projects up to 12 months					
1.1*	X					
1.2		X				
1.3		X				
2.1			X			
2.2			X			
2.3				X		
3.1				X		
3.2					X	
3.3					X	

6. OTHER INFORMATION (to be completed by organization)

(A) Coordination with other activites 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	FSNAU	Conduct needs assessment and evaluation of nutrition situation in selected regio
2	Clusters	Zonal and national cluster coordination
3	All Nutrition actors in SCZ	including organizing cluster meetings and facilitating review/verification of propos
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	In regards to mainstreaming gender, UNICEF is proactive in ensuring that boys	
Capacity Building			