**THE DANISH EMERGENCY RELIEF FUND**

APPLICATION FORM – humanitarian Intervention: RAPID RESPONSE

x

Yes: reference no.: Financial ceiling:

No – if no, an OCA application must be submitted together with the intervention application.

Has your organization prequalified for DERF funding?

## The humanitarian intervention

*Describe within max 3 pages:*

* **What sectors will the proposed interventions most relate to (please tick ALL boxes that apply)?**

[](https://www.google.com/url?sa=i&url=https://www.pngegg.com/en/png-bztly&psig=AOvVaw1aNGrYoF1_m47P15TMDRs7&ust=1604386801559000&source=images&cd=vfe&ved=0CAIQjRxqFwoTCLC6hN6k4-wCFQAAAAAdAAAAABAD) **WASH (Water, Sanitation & Hygiene)**

**Health**



[](https://www.google.com/url?sa=i&url=https://www.pngegg.com/en/png-bztly&psig=AOvVaw1aNGrYoF1_m47P15TMDRs7&ust=1604386801559000&source=images&cd=vfe&ved=0CAIQjRxqFwoTCLC6hN6k4-wCFQAAAAAdAAAAABAD) **Shelter**

* **Nutrition**
* **Camp Management**

**Education**

[](https://www.google.com/url?sa=i&url=https://www.pngegg.com/en/png-bztly&psig=AOvVaw1aNGrYoF1_m47P15TMDRs7&ust=1604386801559000&source=images&cd=vfe&ved=0CAIQjRxqFwoTCLC6hN6k4-wCFQAAAAAdAAAAABAD) **Protection**

[](https://www.google.com/url?sa=i&url=https://www.pngegg.com/en/png-bztly&psig=AOvVaw1aNGrYoF1_m47P15TMDRs7&ust=1604386801559000&source=images&cd=vfe&ved=0CAIQjRxqFwoTCLC6hN6k4-wCFQAAAAAdAAAAABAD) **Emergency FSL (Food Security and Livelihoods)**

* **Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **The overall purpose in short, including the objectives, activities, expected results and indicators to be applied.**

The overall purpose of the intervention is to reduce the vulnerability of the most vulnerable populations affected by the armed conflict in Pemba, Metuge and Mecufi districts in Cabo Delgado region with focus on children, women, particularly children without care. The project aims to achieve 3 objectives:

1. Reduce the vulnerability and restore the psychosocial wellbeing for children, young people and women affected by the armed conflict
2. Reduce de risk of sexual exploitation and abuse especially for girls by providing safe environments, identification and referral of protection cases and support persons with special needs
3. Contribute to long term recovery and economic sustainability to affected people by providing food assistance and livelihood means.

The proposed project will respond to the needs of the affected population trough four main components; health, emergency livelihood (Food Security), shelter, and child protection. Then, for that end we are proposing the following activities:

1. **Health Component**

**Result 1:** *Prevention and treatment of diarrheal diseases and COVID 19 in children, young people and Women:*

As part of intervention on the health component following activities are proposed:

**Activity. 1**.1 Purchase and distribute 100 preventions kits (it includes 20 boxes of alcohol gel, 20 boxes of liquid soap, 3500 protective masks) for 1500 children, 1000 young people and 1500 women, to protect children & women from COVID 19

**Activity 1.2.** Purchase and distribute water filters and chlorine at river intake and water sources

**Activity 1.3.** Purchase and distribute 100 boxes of dignity kits to 3500 school going girls (dignity kits containing standard hygiene items such as sanitary napkins, hand soap, toothbrushes, toothpaste and underwear)

**Activity 1.4.** Install water storage and 50 small handwashing facilities in primary and secondary schools, health facilities and temporary IDP cites

**Indicator for result 1**: By the end of the intervention, at least 70% of the target beneficiaries adopt preventative measures

1. **Food Security & Livelihood component**

**Result 2:** *Improve the resilience and economic wellbeing of the conflict affected population by supporting with food assistance and the livelihood restoration*

**Activity 2.1 .**Purchase and distribute food packages to 2500 families;

**Activity 2.2** Purchase and distribute seeds and agricultural tools, to 1350 families;

**Activity 2.3** Provide support with Income Generation Activities (IGA) for 800 families;

**Indicator for result 2:** by the end of project 60% of target beneficiaries have their source of livelihood restored

1. **Shelter component**

**Result 3**: *Improved the living conditions of 2,500 families affected by the conflict through the provision of non-food items and access to renewable energy sources*

**Activity 3. 1** Purchase and Distribute Non Food (kitchen sets, blankets, water containers, locally produced mats) Items to 2500 families

**Activity 3.2** Purchase and Distribute solar lamps and solar modules to 2500 families

**Indicator for result 3**. By the end of the project 2500 families have improved their living conditions

1. **Children Protection component**

**Result 4:** *Provide psychosocial support and awareness raising activities to children and adolescents in a protective environment*

**Activity 4.1** Build and equip 03 children friendly spaces

**Activity 4.2** Provide training for 27 volunteers and government staff on Child Protection and Gender Based Violence prevention and referrals

**Activity 4.3** Provide psychosocial support to children and adolescent victims of violence

**Activity 4.4** Organize awareness raising campaigns on child protection and Gender Based Violence prevention’s and referrals

**Indicator for result 4:** By the end of intervention 500 children and adolescent have access to psychosocial support

* **The context of your selected response, in relation the relevant DERF call. Is the intervention appropriate and relevant (CHS 1) effective and timely (CHS 2) and are the resources managed and used in an effective, efficient and ethical manner (CHS 9)?**

The proposed emergency humanitarian relief assistance is to contribute and supplement the Government’s efforts to alleviate the suffering of conflict armed affected population, in the Northern Province of Cabo Delgado in Mozambique. The crisis has changed from slow onset to protracted humanitarian crisis. The crisis started in October 2017, with the attacks to government institutions such as the police station in Mocimboa da Praia district, killing two police officers. Three years later, the insurgence is now affecting 9 of the 17 districts of Cabo Delgado, and there is a high risk that it will escalate to other districts and the neighbourhood provinces of Nampula and Niassa. The recent development has increased the number of IDPs and according to Amnesty International, the violent attacks grew by 300% in the first four months of 2020, resulting in more than 2000 people killed, over 300,000 IDPs and 712,000 people in need of humanitarian assistance. In addition, The United Nations Office for the Coordination of Humanitarian Affairs (OCHA), reveal that more than 350,000 people are facing severe food insecurity.

The population, which is severely affected by the conflict and displaced, have urgent needs related to shelter, water, food assistance and access to health facilities. According to OCHA, the situation is affecting mostly children & women which are exposed to different types of violence against civilian such as loss of life, trafficking, exploitation, abuse and neglect, sexual and gender based violence, sexual exploitation, and psychosocial distress. With the vast majority of schools and health facilities non-functional, and without access to land for crops production, Internally Displaced People, especially children & women, are in urgent need of humanitarian assistance of food, shelter, non-food items, and health care.

Currently there is humanitarian agencies responding to the humanitarian crises through the Flash Appeal for COVID-19 and the Cabo Delgado Rapid Response Plan ([Rapid Response for Cabo Delgado](https://reliefweb.int/report/mozambique/rapid-response-plan-cabo-delgado-province-mozambique-may-december-2020)). However, despite s enormous efforts by humanitarian agencies and the Mozambican government, a budget deficit of almost 42 percent of the total $ 35.5 million needed for the plan still prevails.

Thus, the proposed intervention comes at a critical juncture and following the Mozambican Government calls for rapid intervention. SOS Mozambique is seeking funding from DERF to implement activities in IDPs host districts, namely Pemba, Metuge and Mecufi, trough integrated interventions related to provision of immediate food assistance, access to health facilities in order to alleviate human suffering arising out of conflict.

Once an immediate response to the need of those affected is ensured, SOS proposes to implement activities aimed to restoring livelihoods in the new displaced settlements.

For that end, all interventions will be planned and coordinated with local government bodies, specifically charged with the coordination of humanitarian response, in this case the National Disaster Management Institute.

**How you will start your activities within 7 days of the Danish CSO receiving the first transfer**

For this Armed conflict emergency response, SOS Mozambique has already a functional system and structure and readiness (human resource, office space, logistics and strong partnership with the local government) in place in the target armed conflict affected districts, that can be used to swiftly embark the project within seven days. In addition, the organization has already conducted emergency need assessment in the affected areas and done the necessary preparation for timely response, and that is why SOS Mozambique initiated and raised the alert note to DERF. In fact, SOS Mozambique has already started a very small-scale intervention such as distribution of water filter, water treatment chemicals and provision financial support for transportation of NFI has been done immediately in the aftermath of the armed conflict impact. The aforementioned intervention and the availability of stand by emergency response team, in addition to the existing partnership and engagement we had with other development projects in the affected district, will leverage SOS Mozambique to quickly start the lifesaving response to the affected people.



|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Planned target population** (direct target group only) | | | | | | | |
| Type of Activity | **Female** (by age) | | | **Male** (by age) | | | Total |
| Under  18 | Between  18-50 | Over  50 | Under  18 | Between  18-50 | Over  50 |  |
| Purchase and distribute preventions kits, to prevent diarrethical disease and COVID 19 | 1200 | 1000 |  | 1200 | 1100 |  | 4500 |
| Purchase and distribute 100 boxes of dignity kits to school going girls | 3500 |  |  |  |  |  | 3,500 |
| Purchase and distribute food packages for 2500 affected families | 1000 | 500 |  | 500 | 500 |  | 2500 |
| Purchase and distribute water filters and chlorine at river intake and water sources | 1200 | 1000 | 450 | 1200 | 1100 | 450 | 5400 |
| Purchase and Distribute Non Food Items to 2500 families | 1000 | 500 |  | 500 | 500 |  | 2500 |
| Purchase and Distribute solar lamps and solar modules to 2500 families | 1000 | 500 |  | 500 | 500 |  | 2500 |
| Build and equip 03 children friendly spaces | 150 | 100 |  | 150 | 100 |  | 500 |
| Raise awareness campaign in communities about the prevalence of abuse and violence | 1200 | 1000 | 450 | 1200 | 1100 | 450 | 5400 |
| Provide trainings on alternative care to community members |  | 15 |  |  | 12 |  | 27 |
| Total: | 6750 | 4615 | 900 | 5250 | 4912 | 900 | 26,827 |
| Total adjusted for double counting\*: | 1000 | 500 | 450 | 1000 | 500 | 450 | 3900 |
| Total vulnerable persons of the above | 1000 | 500 | 450 | 1000 | 500 | 450 | 3900 |

*Please fill in the table below and note that total and total adjusted for double counting must be filled in for all ages of both female and male.*

\*correct the number if the same persons are listed in more than one activity. Each person can only be counted once.

* **How do you calculate the number of people who shall be assisted through the various activities?** *For example, if you target households, how many family members (male/female / below 18) do you count per household?*

SOS Mozambique uses headed-count beneficiary targeting system. Because of multi-layered nature of the humanitarian crisis, SOS Mozambique concluded that a single support service is not sufficient to alleviate the problem. Integrated interventions in a form of different inputs, training, IGA support are required to save lives and restore livelihoods. In the respect, in Mozambique the average family members in the household is 5. Then, the total of direct beneficiaries is 3900 children, young people and women disaggregated in the previous table.

* **Which vulnerable groups are you specifically targeting? *(****Note that you can include budget for additional vulnerability assessments as relevant in the application to DERF)*? *Please explain*

The proposed intervention will focus on most vulnerable and at risk people especially children and young people who have lost parental care; children and young people who are at risk of losing parental care; and female headed household affected by the conflict.

SOS Mozambique, will facilitate for the development of beneficiary selection criteria, holistic committee establishment and leading the verification process whereby the target beneficiaries are approved by the community committee and government representatives and finally registering and informing the appropriate beneficiaries. Furthermore, SOS Mozambique will conduct supplementary needs assessment in order to know the distinct needs of the people and inform the project accordingly

* **Source of goods: Briefly explain how you plan to source your goods and tick the boxes that apply.**

**Internationally**



**Regionally / neighbouring country**



**In country / locally**



SOS Mozambique is promoting grand bargaining and localization agenda, where the approach is more efficient and effective for rapid emergency response program. The priority source of goods will be the local market. All goods and services will be optimally utilized at local level and this will encourage the local economy and social interaction/integration between the affected people and various service providers such as suppliers, contractors, trainers, logistics and financial institutions. However, due to the challenges posed by the weak supply chain at the local level, SOS Mozambique also expects to acquire the goods both regionally and internationally, mainly for goods related to health sector.

* **Does the intervention include cash-based programming?**
  + **Yes**

**No**



*If yes, please describe which type of cash-based programming*

* **Financial localization of the intervention** *Take the following two figures from your budget format:*

**% of DERF intervention funding which is spent by local or national partner CSOs, from the intervention budget: 96 %**

**% funding spent on activities & goods for crisis affected persons, from the intervention budget: 82 %**

## The implementing organization

* **What is the capacity, experience and expertise of the proposed partner organisation(s) (CHS 8) undertaking the proposed intervention substantiating whether the humanitarian response can be delivered up to standard and to the needs of particularly vulnerable persons?**

SOS Mozambique is nonprofit and humanitarian organization operating in Mozambique since 1986 and at the time when the country was deeply immersed in civil war. Since then, SOS Mozambique has implemented several recovery programs in response to humanitarian crises that has plagued the country. Recently, in collaboration with the government of Mozambique through the Provincial Directorate of Social Action and the Children Protection Cluster lead by UNICEF, SOS launched an emergency response to support 600 households affected by Cyclone Idai which came ashore near the coastal city of Beira in March 2019. The intervention included construction of Child Friendly Space to support children living in shelters, provision of support to vulnerable families to restore their livelihoods, provision of schools supplies and educational material to children so they can resume their education, provision of support to SOS caregivers and other staff in repairing or rebuilding personal homes damaged or lost during the storm. In the same intervention, provided psychosocial support to address the social and emotional well-being of children and SOS staff.

Currently SOS is implementing Strengthening Programmes in 06 locations of Mozambique, namely Maputo city, Inhambane, Beira, Chimoio, Tete and Pemba with aim to prepare communities to better cope with the impacts of disasters.

In Pemba, SOS is working collaboratively with local government, local organizations implementing development programs since 2002, with focus on health, education and livelihood sectors. These programs are implemented in Pemba, Mecufi and Metuge the regions where currently most of the armed conflict are taken place and the geographical areas that host most of the displaced victims of the armed conflict. In addition, our local staff has received training in emergency preparedness and have developed an emergency plan to identify the greatest risks and possible means and response mechanisms.

SOS Mozambique have strong financial and procurement system procedures with dedicated professionals from field office up to international office level which is central. The organization has an internal auditor that oversees and ensures that the procurement and financial procedures are adhered according to the given quality standards. Beside, external audit is conducted every year by an authorized audit firm and there is no challenges observed in this regard. Concerning access to the affected people, the organization has an office in Pemba and run operations in the IDP host districts and can easily access the target beneficiaries and provide need based humanitarian assistance.

* **Is the Danish CSO proposing to self-implement?**

[](https://www.google.com/url?sa=i&url=https://www.pngegg.com/en/png-bztly&psig=AOvVaw1aNGrYoF1_m47P15TMDRs7&ust=1604386801559000&source=images&cd=vfe&ved=0CAIQjRxqFwoTCLC6hN6k4-wCFQAAAAAdAAAAABAD)**Yes**

**No**

* **Partnership:** 
  + **Kindly explain whether you have entered into partnership agreement, the main features of this agreement(s) and whether this agreement(s) was developed with the local partner**.
  + **Describe the contributions, roles and areas of responsibilities of all partners (including the Danish CSO) within this intervention**

SOS Mozambique and SOS Denmark has a long term frame work agreement working jointly towards addressing the needs of the people affected by different humanitarian crisis. However for this particular project a separate partnership agreement is signed in order to facilitate the proposal development with clear role and responsibilities in financial management, monitoring and reporting, technical assistance and the overall project grant management. For instance SOS Denmark is responsible for carrying out the overall administration of the project, for the utilization of the grant, accounting and auditing for reporting to DERF according to the agreement with DERF and DERF Guideline. Whereas SOS Mozambique is responsible for implementation of the project in accordance with the project application and obliged to secure all activities are carried out in conformity with national law and regulations.

## Local strengthening

*Describe within max 1 page:*

* **How does the intervention strengthen local capacities and avoid negative effects (CHS 3)?**

In order to ensure that the intervention strengthen local capacities, the overall activities implementation will be done by our local partner, SOS Mozambique through its office established in Pemba. Overall planning, implementation and monitoring process, will be carried out in coordination with local partners, namely the Government of Mozambique trough Disaster Management National Institute, Protection Cluster led by UNICEF, and a committee representing the beneficiaries to ensure that the intervention enhances the local capacity and is applied to the cultural, linguistic and political context. Furthermore, SOS Mozambique will support selected families to engage in diversified livelihood activities that will build household resources, which will in turn increase local and individual level non-agricultural response capacity to withstand future disasters. Training delivered to local communities on parental care, is designed to build the capacity of the communities to provide good parental care to his children

* **How are the local actors including the target group informed and involved (CHS 4)?**

We will adopt the participatory approach. Before any intervention we will carry out need assessment and hold a consulting meeting to discuss intervention plan with local authorities namely the provincial government, local civil society, local leaders and representative of beneficiaries in order to ensure that their aware about the proposed intervention. Once the implementation plan is approved by the participants, we will hold a kick off meeting to inform the local actors and target group about the intention to start the project implementation. Moreover, we will organize weekly reviews meetings and provide regular reports regarding the implementation progress. We will also outline procedures for the involvement of target group in implement, monitoring and evaluation of implementation process.

## M&E, LEARNING AND ACCOUNTABILITY

**How are risk management systems applied in the appropriate context?**

|  |  |  |
| --- | --- | --- |
| **Type of Risk** | **Risk Level** | **Mitigation Measures** |
| **Economic**  High commodity price, especially on health items, water storage equipment, transportation (due to shortage of foreign currency, risk is higher particularly if the commodity is imported). | M | The project will regularly monitor the trends and impacts of high commodity prices and disseminate information for timely and appropriate responses and actions. Bulk purchase of commodities will be done where appropriate. |
| **Political**  The security situation in Cabo Delgado, tend to deteriorate and may condition the programme implementation. | L | Monitor the security issue and if necessary initiate programming from more stable areas. |
| **COVID 19**  Massive spread of infections by COVID-19, pressures the availability of financial resources and the provision of basic social services | H | Monitor the situation & Advocate with government and relevant stakeholders to strengthen preventive measures against COVID 19 and increase financial resources to prevent the pandemic of covid-19 |
| **Institutional**  Weak commitment by government offices and community organizations. | L | The project will promote joint planning and decision-making in order to increase the level of commitment. |

* **How do the implementing partners apply monitoring, feedback and accountability systems (CHS 5), including a complaint mechanism that works in the specific context?** *Include here a description of how you monitor results (e.g. by formulating indicators), how you report back to the target population (feedback) and describe how you will receive, handle, and address complaints.*

1. **Internal Monitoring and Review**

SOS Mozambique will task monitoring and evaluation staff to undertake follow up of project performance, impact, reporting and documentation. SOS Mozambique’s M&E unit will coordinate and oversee the overall project monitoring and evaluation activities.

In addition a context specific complaint mechanism such as a suggestion box, and a regular focused group discussion will be organized and accordingly compliant and feedback will be collected in order to inform the project and make sure relevant issues are sorted out and communicated to the beneficiary in an ethical and confidential manner. The project will organize a series of sessions and consistently make the crisis affected people aware about the established compliant mechanism and encourage them to report any issues related to programing, sexual exploitation and abuse without fear. The senior management at SOS Mozambique will undertake regular reviews of project progress, results, impacts and adherence to plans, budget and set standards. Process monitoring data will be used to guide the day-to-day management and planning of the project. Impact monitoring will involve an appropriate mix of quantitative and qualitative data.

1. **Participatory monitoring and evaluations**

Participatory impact and process monitoring of the project is to assess if the desired changes on the target groups’ livelihoods have been achieved in line with objectives, and identify problems encountered in the course of implementation. It takes into account target groups’ perception of key change indicators. The project team will facilitate participatory monitoring and document the key lessons and take corrective measures in the course of the project execution. Baseline surveys, stakeholder review workshops, case studies and Post Distribution Monitoring tools (PDMs) will be used as appropriate. The mid-term and end of project evaluation will be carried out using external specialists and involving all key stakeholders.

* **How will learning and reflection be applied in terms of improving humanitarian action (CHS 7)?**

SOS Mozambiquehas substantial experience in producing and disseminating learning materials in the areas of humanitarian emergency, sectoral and integrated interventions to protect from and build resilience for such disasters, systems strengthening, local empowerment and capacity building for early warning and actions. Feeding into the policy area through discussion briefs and case study reports against the Core Humanitarian Standards commitment will provide valuable mechanisms for information dissemination. Relevant publications will be shared with a range of governmental and non-governmental organizations within and outside of Mozambique, through SOS Mozambique website and at local and national conferences. The outcome of the project will be replicated by institutionalizing the best practices into the government structures and systems through local and national sectoral clusters and networks (e.g. Child Protection cluster etc.). The fact that the community and the government are directly involved in the design and implementation of the action will ensure the continuity and replication of the outcomes beyond the project life for wider, longer and greater impact.

## Coordination

*Describe within max 0,5 pages:*

* **Are the implementing organisations involved in a coordination mechanism?**

**Yes**



* + **No**

*If yes, please describe which clusters and on which level*

SOS Mozambique is currently actively participating in the Children Protection Cluster led by UNICEF in Pemba. In addition, we are active members of the local Forum of Non-Profit Organization operating in Pemba, which is the dialogue platform between civil society and local Government.

* **How does the intervention contribute towards coordination and complementarity of humanitarian assistance (CHS 6)?**

*This includes cooperation and coordination with relevant stakeholders and coordination mechanisms to ensure that particularly vulnerable people at-risk of being affected by the anticipated food security crisis do not experience avoidable gaps and overlaps in the humanitarian assistance;*

The intervention will be developed and implemented in close coordination with the relevant stakeholders, namely the National Institute for Disaster Management to ensure that the response is aligned with the Mozambique Government priorities. In parallel, and in order to ensure that the intervention is in line with humanitarian principles and contribute to different clusters overall objectives, as well to avoid duplication of efforts, SOS will work with the humanitarian country team based in Pemba, especially the Children Protection Cluster led by UNICEF. Most importantly, in the coordination process, we will work with the affected population and local authorities of Pemba, Mecufi and Metuge, mainly in the need assessment, definition of appropriate implementation strategies, to ensure that designed activities are appropriate to the local context and to respond to real needs of affected population.