

South Sudan 2013 CHF Standard Allocation Project Proposal

for CHF funding against Consolidated Appeal 2013

For further CHF information please visit <http://unocha.org/south-sudan/financing/common-humanitarian-fund>
or contact the CHF Technical Secretariat chfsouthsudan@un.org

This project proposal shall be submitted by cluster partners in two stages to the Cluster Coordinators and Co-coordinators for each project against which CHF funds are sought. In the first stage, before cluster defenses, applying partners fill sections I and II. The project proposal should explain and justify the activities for which CHF funding is requested and is intended to supplement information already available in the CAP Project Sheets. The proposals will be used by the cluster Peer Review Team in prioritizing and selecting projects for CHF funding during CHF Standard Allocation round. Partners should also fill and submit to cluster coordinator/ co-coordinator the CHF Project Summary (Annex 1). In the second stage projects recommended for funding by the CHF Advisory Board must complete Section III of this application and revised/update sections I and II if needed.

SECTION I:

CAP Cluster	PROTECTION
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CHF Cluster Priorities for 2013 First Round Standard Allocation

This section should be filled by the cluster Coordinators/Co-coordinators before sending to cluster partners. It should provide a brief articulation of Cluster priority activities and geographic priorities that the cluster will recommend for funding from the CHF in line with the cluster objectives highlighted in the CAP 2013.

Cluster Priority Activities for this CHF Round	Cluster Geographic Priorities for this CHF Round
<p>Emergency response (general):</p> <ul style="list-style-type: none"> i) Rapid protection assessments to identify vulnerable persons and risks/gaps for response. ii) Community protection networks; conflict reduction and early warning systems. iii) Enhance capacity and training of frontline responders (police, health workers, community networks etc.), relevant for both GBV and child protection iv) Coordination with UNMISS and UNISFA on Protection of Civilians initiatives <p>GBV</p> <ul style="list-style-type: none"> v) Direct support and response services to GBV survivors, including immediate medical and psychosocial care (incl. PEP kits) vi) GBV emergency response teams (establish, train) vii) Special Protection Units <p>Child Protection</p> <ul style="list-style-type: none"> viii) Prevention and response to unaccompanied and separated children Family Tracing and Reunification (FTR); Provision of temporary care arrangement for boys and girls. ix) Protection assistance to Children Associated with Armed Group and Armed Forces x) Recreational and psycho-social support for children and community affected by emergency <p>HLP</p> <ul style="list-style-type: none"> xi) Assist populations affected by displacement, incl. returnees and host communities, on access to land. xii) Capacity development of formal and traditional authorities on land and property rights. xiii) Collaborative dispute resolution mechanisms to solve conflicts among communities and/or individuals over access to land and/or natural resources <p>Cross Cutting</p> <ul style="list-style-type: none"> xiv) Mainstreaming HIV in intervention planning/implementation xv) Targeted support for civil status documentation focused on persons with specific needs from conflict impacted populations and emergency returns xvi) Continued support for populations in displacement 	<ul style="list-style-type: none"> i) Upper Nile ii) Lakes iii) Jonglei iv) Unity v) Warrap vi) NBeG vii) Central Equatoria

Project details

The sections from this point onwards are to be filled by the organization requesting CHF funding.

Requesting Organization	Project Location(s) (list State, and County (or counties) where CHF activities will be implemented. If the project is covering more than one State please indicate percentage per State)		
INTERSOS	State	%	County
Project CAP Code	Warrap	100	Gogrial West, Twic county (kuajok, Mayan Abun, Malual Achote, Turalei)
CAP Project Title (please write exact name as in the			

CAP)
 Strengthening Protection and GBV knowledge of IDP, Returnees and Host Community in Abyei Administrative Area (AAA) and Warrap State.

Total Project Budget requested in the in South Sudan CAP	US\$528.366
Total funding secured for the CAP project (to date)	US\$0

Direct Beneficiaries (Ensure the table below indicates both the total number of beneficiaries targeted in the CAP project and number of targeted beneficiaries scaled appropriately to CHF request)

	Number of direct beneficiaries targeted in CHF Project	Number of direct beneficiaries targeted in the CAP
Women:	294	1500
Girls:	228	200
Men:	157	40
Boys:	223	200
Total:	902	1940

Implementing Partner/s (Indicate partner/s who will be sub-contracted if applicable and corresponding sub-grant amounts)

Contact details Organization's Country Office

Organization's Address	NimraTalata, Block 15, Juba
Project Focal Person	Andrea Martinotti, Area Coordinator, warrap.south.sudan@intersos.org
Country Director	Mauro Modena south.sudan@intersos.org
Finance Officer	Antonella Luciano admin.south.sudan@intersos.org

Funding requested from CHF for this project proposal	US\$180.000
Are some activities in this project proposal co-funded? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (if yes, list the item and indicate the amount under column of the budget sheet)	

Indirect Beneficiaries

2000

Catchment Population (if applicable)

CHF Project Duration (12 months max., earliest starting date will be Allocation approval date)
 Indicate number of months: 6 months (April – September)

Contact details Organization's HQ

Organization's Address	Address: via Aniene, 26/A – 00198 Roma, Italy
Desk officer	Marcelo Garcia Dalla Costa marcelo.garcia@intersos.org
Finance Officer	Mario Rusconi mario.rusconi@intersos.org

SECTION II

A. Humanitarian Context Analysis

Briefly describe (in no more than 500 words) the current humanitarian situation in the specific locations where CHF funded activities will be implemented. Provide evidence of needs by referencing assessments and key data, including the number and category of the affected population¹

During 2012 INTERSOS has been able to identify during its activities, especially through confidential and individual interviews held by INTERSOS Psychosocial Counselors to provide basic emotional support and the Rapid Needs Assessment (RNA) carried out on December 2012 in Twic County and Kuajok, many gaps in GBV prevention and response strategies in place in AAA and Warrap State. From the data collected in the focus group discussions with IDP women held during the mentioned RNA (Rapid Need Assessment), it is clear that there is a high level of violence against women and girls in terms of early/forced marriage and marital abuses, and lack of services for survivors. INTERSOS identified that: GBV cases are underreported by survivors due to stigmatization and a lack of knowledge on where and how to report incidents; there is a need to sensitize local leaders on the impact and consequences of these issues in order to improve prevention from and response to systematic harmful traditional practices against girls and women (early/forced marriage, domestic violence, denial of property and ownership) at community level. Then awareness is needed in order to inform stakeholders on GBV issue and GBV services. In fact there are no legal support services for GBV survivors and residents are unaware of their rights under both customary and state law.

Regarding GBV activities, there are no INGO/Agency or NNGO doing psycho-social counseling or GBV programming in the area and there is a concrete need, which has already been discussed and recognized by some NGOs, to train local authorities, community members and health workers on this issue in order to create a timely and effectively referral mechanism and to assist GBV survivors. Especially in Warrap State, the idea to start with the training and mobilization of women CBOs is due to a proved concern from the Ministry of Gender and Social Development (JOC report 17 September 2012), that expressed concerns about inactivity of women groups as result of a low understanding of women issues among women themselves, low capacity of leadership structure and cultural barriers.

B. Grant Request Justification

Briefly describe (in no more than 500 words) the reasons for requesting CHF funding at this time. Explain how CHF funding will help address critical humanitarian gaps in your cluster. Explain the value added by your organization (e.g. geographical presence). Indicate if any other steps have been taken to secure alternative funding.

INTEROS is operating in Warrap State since May 2011 working in Protection focusing its activities on protection monitoring, material and emotional assistance to IDPs and PSNs in Twic County, and developing a protection monitoring network with local stakeholders in Gogrial West and East, Grater Tonj and Twic.

CHF funds would support and supplement INTERSOS actions in Twic County and Abyei Administrative Area thanks to a project funded by UNHCR, and could enable it to start focusing on GBV and related issue in areas (Mayan Abun, Turalei, Malaul Achote and Myen Gumel) where, following latest RNA assessment, has been identified the need of GBV services and awareness for women, youths and local Authorities. Especially regarding emotional support for GBV survivors will be an opportunity to have a team composed by two Psychosocial Counselors and one protection monitoring Team leader, skilled, ready to assess the above mentioned areas to respond any time with material assistance or emotional support.

From the latest RNA assessment carried out by UNHCR, INTERSOS and other partners in Kuajok and Twic County and from the information gathered, it has been stressed the importance to organize Awareness sessions on GBV for youths, women and men.

Another important need to be immediately addressed will be the organization of GBV basic training for Health Workers, Police Officers and Local Authorities. In a long term strategy this will be the first step to organize and set up a referral mechanism on GBV which will involve all Key stakeholders. The aim is to help the community itself to recognize GBV cases and refer the survivors to actors trained on GBV and therefore available to provide services according to standards. Identification of PSN and Protection assessments will be other important activities in order to have a constant updated overview of IDPs and Returnees communities concerns and challenges faced in the respective area. The data collected during the assessment will enable INTERSOS to provide assistance directly or through referral to other partners. Finally, identification of PSNs will be crucial to provide a timely and effectively emotional and/or material support to the most vulnerable people.

CHF funds will be used to improve INTERSOS capacity to have emergency protection assessment in Kuajok areas focus on GBV situations and Person with Specific Needs. Assessment will be carry out also in Twic County, in order to strengthen INTERSOS presence in the area and to collect much more accurate data especially on IDPs movements to areas above Kiir river in AAA.

Thought CHF funds will be possible to ensure the organization of a training for a Women CBO/association on GBV and related issue which then will carry out awareness session in schools respecting the local context. INTERSOS considers essential the involvement of a local women association as a matter of ownership on GBV issues and of capacity-building. CHF funds will therefore guarantee to strengthen the humanitarian presence in the area and, in a mid/long term strategy point of view, to start bigger operation focusing on GBV response and Psychosocial Counseling.

C. Project Description (For CHF Component only)

i) Contribution to Cluster Objectives

Briefly describe how CHF funding will be used to contribute to the achievement of the cluster priority activities identified for this allocation.

All the activities proposed are in line with cluster priorities: training on GBV to health Workers, Police Officer, Local Authorities, will increase capacity of key actors on GBV and related issue and will enable them to react properly to support GBV survivors; help GBV survivors to have access to emotional support through confidential and individual interviews with INTERSOS Psychosocial Counselors and material assistance if needed; increase number of young women and youth having information on GBV, sexual violence and exploitation, force and early marriage; protection assessment that will help to identified GAP and needs of most vulnerable people. And raise-up the knowledge of GBV and related issue to one Woman CBO that will be able to spread the message within the community. The project impact on environment, itself, will be limited due to the kind of activities planned that are not involving construction component or any other activity that will modify the environment in the area of implementation. However considering that environment is composed by human being, in a long term prospective, the project can have an impact on the human resources. This not only due to employment of staff, but, mainly, to a change of perspective about Human rights and GBV

¹ To the extent possible reference needs assessment findings and include key data such as mortality and morbidity rates and nutritional status, and how the data differs among specific groups and/or geographic regions. Refer situation/data/indicators to national and/or global standards.

that can lead to a change, in a long term point of view, on the behaviour of the beneficiaries. This can result in a increase of services provided for example by the Key actor operating in the area of implementation as well as for the beneficiaries in the different communities.

ii) Project Objective

State the objective/s of this CHF project will achieve. Objective/s should be Specific, Measurable, Achievable, Relevant and Time-bound (SMART)

The project aims at strengthening the protection and GBV prevention and response for Returnees, IDPs and Host Communities members in Warrap State. Monitoring and ensuring that Persons with Specific Needs have access to basic services (such as water, hygiene and health facilities, etc) and a timely and effectively material assistance (soap, clothes, school uniform, and NFIs in general) will be of primary importance. In both Twic and Gogrial West Counties the project will ensure that IDPs and Returnees population in Mayan Abun, Malual Achote, Turalei and Mayem Gumel have access to basic services and a constant monitoring of their conditions and needs through monitoring missions. INTERSOS Protection Team will identify concerns, GAPS and problems faced by the communities and provide immediate support or a timely and effectively referral to other partners working in the area.

With the trainings on GBV INTERSOS intends to reduce the number of human rights violations against women and girls and to increase the number of cases referred to competent Authorities, and to skill Women CBO members, Police Officers and local Authorities (such as competent Ministries, RRRRC, community chiefs, Payam administrators, etc) on how to handle GBV cases and refer them to appropriate services.

Local Authorities will be also trained in basic knowledge of protection, safety and security for women at risk of GBV .

The sessions on GBV carried out in the communities will increase their awareness on Gender Based Violence with particular focus on early/ and force marriage, marital violence.

iii) Proposed Activities

List the main activities to be implemented with CHF funding. As much as possible link activities to the exact location of the operation and the corresponding number of direct beneficiaries (broken down by age and gender to the extent possible).

- Conduct 1 training on GBV (What GBV stands for, type of GBV, related risks, health related problems, response, how to deal with survivors, referral) and Protection Monitoring for INTERSOS staff in Warrap State (Kuajok) and for Women association members in Kuajok to enable them to conduct participatory awareness sessions on GBV and related risks in schools. (10 participants)
- Conduct 1 training on GBV and related issues (What GBV stands for, type of GBV and related risks, response, case referral) for Health workers, Police and Local Authorities in Kuajok for 30 participants in total
- Identify a reliable women's CBO in Kuajok to be trained on GBV (What GBV stands for, type of GBV and related risks, health related problems, response, case management, referral, community based approach to GBV)
- Conduct 4 GBV awareness sessions in 4 schools of Kuajok for a total of 400 students (concentrating on gender similarities/differences, women and children's rights)
- Conduct 6 GBV awareness session in Mayem Gumel and Mayan Abun and turalei IDP's Sites targeting IDP's population for a total of 300 people, 50% of them women.
- Provide material assistance (blankets, Grinding Pots, plastic sheet, soap, cloths, school uniform, NFI's) to 150 extremely vulnerable people such as elderly, single parent caregiver, children and disabled targeted after identification of special needs and verification
- Provide emotional support through basic psychosocial counseling to 12 GBV survivors and refer them to the competent services
- Establish a referral mechanism among community, health workers and authorities in Kuajok through identification of a focal person for each stakeholder involved and adopting the GBV Standard Operating Procedures of Warrap State already in place.
- Conduct 6 protection monitoring exercises in Twic county and Kuajok and surroundings areas to identify PSNs and the most vulnerable people.

iv). Cross Cutting Issues

Briefly describe how cross-cutting issues (e.g. gender, environment, HIV/AIDS) are addressed in the project implementation.

The creation of a strong and timely referral mechanism with health facilities that can allow GBV survivors to have a medical check-up, including HIV testing, within 72 hours after the violence will complement the psycho-social counseling made available through this project. HIV/AIDS will be included as part of the GBV training in order to sensitize participants about the risk of GBV violence and to sensitize about HIV stigma as consequence of violence.

v) Expected Result/s

Briefly describe (in no more than 300 words) the results you expect to achieve at the end of the CHF grant period.

INTEROS is expecting to timely respond to needs of people in terms of material assistance as well as psychosocial support with a specific focus on Gender Based Violence issues, as identified during the latest RNA assessment carried out in December 2012. INTERSOS aim to raise knowledge of youths, women and Men regarding early/forced marriage, marital violence and rape, psychological violence and to sensitize people on GBV related risks such as HIV/AIDS and other sexual transmitted disease. Once community is aware about GBV the second step will be to conduct training to Health Workers, Police Officers and Local authorities in order to improve knowledge and capability of those Key actors that will be in charge to respond to GBV cases. With training to health workers INTERSOS will try to spread knowledge regarding not only rape or violence, but other type of Gender Based Violence that can be related to medical complication such as stress and trauma. Training with Local Authorities and police Officer will be fundamental to sensitize them and it will be an opportunity to identify focal point that will be able to refer GBV cases to INTERSOS psychosocial counselor, or to provide information to the survivors. Moreover INTERSOS is expecting to improve the capacity to provide timely and effectively psychosocial and/or material assistance to PSNs and monitoring the situation at IDPs and Returnees sites in Twic County and Kuajok. Considering the importance of ownership of the project, one of the result expected is to provide specific skills to INTERSOS staff to raise their knowledge and enable them to perform their tasks independently.

List below the output indicators you will use to measure the progress and achievement of your project results. At least three of the indicators should be taken from the cluster defined Standard Output Indicators (SOI) (annexed). Put a cross (x) in the first column to identify the cluster defined SOI. Indicate as well the total number of direct beneficiaries disaggregated by gender and age.

SOI (X)	#	Output Indicators (Ensure the output indicators are consistent with the output indicators that will be used in the results framework section III of this project proposal).	Target (indicate numbers or percentages) (Targets should be disaggregated by age and sex as per the standard output indicators list and add-up to the number of direct beneficiaries identified page 1)
x	1.	Joint protection assessments or monitoring missions carried out with reports completed (with sex and age disaggregated data, and particular reference to vulnerable groups). Also consider: no. of joint conflict assessments, including strategic early warning	6 assessment/missions with reports .
x	2.	GBV survivors reporting who receive relevant response services (legal, health, psychosocial, shelter and other available services) in line with standards for quality care	% of beneficiaries receiving services (broken down by sex and age): 100% (70% women; 0% men; 30% girls; 0% boys) No. of beneficiaries receiving services (broken down by sex and age): 12 beneficiaries (8 women; 0 men; 4 girls; 0 boys)
x	3.	Beneficiaries reached with behavior change messages through interpersonal communication campaigns and outreach activities on GBV related issues and available services in emergency settings.	No. of beneficiaries 700 beneficiaries (220 girls; 220 boys; 150 women; 110 men).
	4.	Training on GBV and related issues to Health workers, Police Officer, Local Authorities in Kuajok	No. of training participants 30 beneficiaries (15 women; 15 men; 0 girls; 0 boys)
	5.	Training on GBV and related issues to Women association members and INTERSOS staff in Kuajok	No. of training participants 10 beneficiaries (8 women; 2 men; 0 girls; 0 boys)
	6.	Material Assistance (blankets, Grinding Pots, plastic sheet, soap, cloths, school uniform, NFI's) to PSNs	No. of people assisted 150 PSNs: 113 women; 30 men; 4 girls; 3 boys.

vi) Implementation Mechanism

Describe planned mechanisms for implementation of the project. Explain if it is implemented through implementing partners such as NGOs, government actors, or other outside contractors.

The project will be implemented mainly by INTERSOS staff for all the component of trainings, psychosocial Counseling, material assistance to PSN awareness session for community members. However participation and commitment of local authorities and other key actors such as health workers and police officers will be of primary importance as well as the Woman CBo/Association.

The commitment of key actor will be important to establish a timely and effectively referral mechanism. For this reason trainings will be important not only to improve knowledge on GBV and related issue but even to identify reliable focal point to create a referral mechanism.

All the activities and assessment will follow a Community Based Approach in order to involve communities as much as possible using the same communication channel that the community is using. All the protection monitoring missions and assessments as result will be organized with participation of community member which will be mobilized by INTERSOS Psychosocial Counselors and Protection team Leaders. Importance will be given to mobilize women, men and youth at the same time for GBV awareness session; in case of focus groups discussions or interviews all the privacy principle, especially in regards of GBV cases, will be respected.

For this reason training of INTERSOS staff will be of primary importance in order to enable them to work independently and to involve as much as possible beneficiaries in all the implementation phases of the project.

In regards of material assistance to PSN community chiefs will be involved during the identification as well as local authorities as key actor of the communities. This will be important to minimize complaints from communities and will give INTERSOS staff a precise idea of the problems that communities are facing and will be much easier to verify the information. During identification and verification the selection criteria will be based on UNHCR standards. Primary importance will be given to elderly, child at risk, woman at risk and disable persons, which have been identified during our assessments as the most vulnerable.

INTERsos staff will implement the project from Kuajok as most of the activities are implemented in town, the state capital of Warrap State. However protection monitoring mission will be carried out regularly in Twic County as well as in Mayen Gumel, returnees site in Kuajok in order to have a constant updated picture of problems faced by the community in the above mentioned areas and in order to respond quickly to their needs.

Psychosocial counseling will be given HH by HH respecting privacy principle and consensus. Protection monitor |team leaders will play a crucial role in order to support psychosocial activities, in terms of coordination and in case to refer to health facilities or other NGOs or UN Agencies.

INTERsos will utilize its own procurement rules and regulations as per INTERsos' Organization, Management and Control Model.

vii) Monitoring and Reporting Plan

Describe how you will monitor and report on the progress and achievements of the project. Notably:

1. Explain how will you measure whether a) Activities have been conducted, b) Results have been achieved, c) Cross-cutting issues have been addressed, and d) Project objectives have been met
2. Indicate what monitoring tools and technics will be used
3. Describe how you will analyze and report on the project achievements
4. Ensure key monitoring and reporting activities are included in the project workplan (Section III)².

²CHF minimum narrative reporting requirements will include the submission of a final narrative report and where applicable a narrative mid-term report. Narrative reports will include a progress on the project achievements using the outputs indicators listed in this project proposal.

Basically activity results and progress will be monitored using the aforementioned criteria, this will be done especially in regards to measurable activities such as number of persons attending trainings, awareness session on GBV, protection monitoring mission carried out, persons with specific needs receiving material assistance and GBV survivor counseled.

As we are all aware, quantitative indicator will not offer at the end a good picture of the implementation, for this reason some qualitative indicators will be used during the ongoing analysis in order to have a broader view of the effectiveness of the project. This will be important to understand if the information given during trainings and awareness sessions reached the key actors which are fundamental for the implementation of our Project.

Regarding trainings and awareness sessions on GBV and related issues an analysis on the impact they have had is planned through an initial-test and a final-test to be done by the participants before and after each activity.

In regard of the protection monitoring mission qualitative data regarding needs concerns and challenges faced by the communities will be recorded and analyzed and will be compared to old assessments in order to have a picture of how the situation is evolving during the months of the implementation. This will be a good indicator for GBV trend. During the protection monitoring missions some indicators will be used as for example how many GBV cases have been identified and reported to our counselors and particular attention will be given to the cases reported in order to understand if community has the capacity to recognize GBV cases and typologies.

During the years INTERSOS has developed a monitoring system that consists in weekly report submitted by Protection Team Leader to the Project Manager in order to have a monitoring report on weekly basis on project implementation, results achieved, challenges faced and constraints. For mission reports this will be compiled by the protection team leader and will be shared with protection cluster partner and other relevant actors. INTERSOS will also refer to its Management and Control Model (Protocol I – section 4) and will use as monitoring tool the Project appraisal Tool - PAT (refer to annex 6 to the protocols).

Basically the Project report is done on a weekly basis and a mid term report will be done every 3 month in order not to lose precious information, especially qualitative. INTERSOS will use the GBV IMS to have a reliable data base and to better analyze the situation concerning GBV cases.

An internal report on the activities is submitted on a weekly basis by the Project Manager to the Area Coordinator, the Protection Coordinator and the Head of Mission to have a broader picture of the implementation's state level.

INTEROS will follow up on the quality of project implementation according to the indicators in the log frame and to the work plan.

The narrative reports will highlight the successes and challenges during implementation and will suggest possible ways forward.

Attendance forms and specific monitoring format will be used in accordance with the activities implemented.

Rapid assessment questionnaire and baseline questionnaire will be done in the communities at the beginning of the project and there will be an evaluation at the end of the activities compiling the same questionnaire and looking at the differences between the information collected, having a clear understanding of the life improving of the people and specific results.

During the implementation of the project a Monitoring and Evaluation mission is foreseen in order to ensure that the objectives of the project are met.

E. Total funding secured for the CAP project

Please add details of secured funds from other sources for the project in the CAP.

Source/donor and date (month, year)	Amount (USD)
none	0

SECTION III:

LOGICAL FRAMEWORK				
CHF ref./CAP Code: SSD-13/P-HR-RL/55138/5660		Project title: Strengthening Protection and GBV knowledge of IDP, Returnees and Host Community in Abyei Administrative Area (AAA) and Warrap State.		Organisation: INTERSOS
Overall Objective	Cluster Priority Activities for this CHF Allocation: <i>What are the Cluster Priority activities for this CHF funding round this project is contributing to:</i> <ul style="list-style-type: none"> Strengthen protection and GBV prevention and response for Returnees, IDPs and Host Communities members in Warrap State 	Indicators of progress: <i>What are the key indicators related to the achievement of the CAP project objective?</i> <ul style="list-style-type: none"> Number of GBV cases reported and people supported with psychosocial support, material assistance and referrals 	How indicators will be measured: <i>What are the sources of information on these indicators?</i> <ul style="list-style-type: none"> Final report 	
Purpose	CHF Project Objective: <i>What are the specific objectives to be achieved by the end of this CHF funded project?</i> <ul style="list-style-type: none"> To improve prevention and knowledge on GBV to 740 individuals among IDPs and Host communities in Kuajok, Mayan Abun, Malual Achote, Turalei and Mayen Gumel To improve response for 12 GBV survivors in Mayan Abun, Malual Achote, Turalei and Mayen Gumel To improve the accessibility to basic services and material assistance for 150 Person with Specific Needs among people of concern in Mayan Abun, Malual Achote, Turalei and Mayen Gumel 	Indicators of progress: <i>What indicators will be used to measure whether the CHF Project Objectives are achieved. Indicators may be quantitative and qualitative</i> <ul style="list-style-type: none"> Number of persons involved in activities concerning GBV awareness. Breakdown of the population involved (age, sex, social category, location). Number and type of cases referred to competent actors. Number and type of services accessed by PoC. 	How indicators will be measured: <i>What sources of information already exist to measure this indicator? How will the project get this information?</i> <ul style="list-style-type: none"> Reports of the activities carried out, events organized. Weekly and monthly reports, referral reports, map of services available in the areas of project, final report 	Assumptions & risks: <i>What factors not under the control of the project are necessary to achieve these objectives? What factors may get in the way of achieving these objectives?</i> Availability of Ministry of Social Development
Results	Results - Outcomes (intangible): <i>State the changes that will be observed as a result of this CHF Project. E.g. changes in access, skills, knowledge, practice/behaviors of the direct beneficiaries.</i> <ul style="list-style-type: none"> Knowledge on GBV and related issue improved and skill acquired on approach and case management of GBV survivors for Women CBO, Health workers, local 	Indicators of progress: <i>What are the indicators to measure whether and to what extent the project achieves the envisaged outcomes?</i> <ul style="list-style-type: none"> Number of training and awareness session conducted on GBV and related issues Number of GBV cases identified and referred 	How indicators will be measured: <i>What are the sources of information on these indicators?</i> <ul style="list-style-type: none"> Weekly and monthly report Case management reports, referral reports, weekly and monthly reports Identification forms of PSNs, distribution lists. 	Assumptions & risks: <i>What factors not under the control of the project are necessary to achieve the expected outcomes? What factors may get in the way of achieving these objectives?</i> <ul style="list-style-type: none"> Availability of services in the targeted areas at the time of intervention

<p>authorities, and INTERSOS staff</p> <ul style="list-style-type: none"> • Access to competent services for GBV survivors improved to ensure a proper recovery • Access to psychosocial support and material assistance improved for extremely vulnerable people • Access to information improved on the services available in specific areas 	<ul style="list-style-type: none"> • Number of GBV survivors identified and referred to competent services • Number of Persons of Concern (PoC) counseled • Number of PoC supported with material assistance 		
<p>Immediate-Results - Outputs (tangible): <i>List the products, goods and services (grouped per areas of work) that will result from the implementation of project activities. Ensure that the outputs are worded in a manner that describes their contribution to the outcomes.</i></p> <ul style="list-style-type: none"> • Women CBO, Health workers, local authorities, and INTERSOS staff trained on GBV and related issues. • Awareness sessions conducted on GBV and related issues targeting Students and IDPs communities • Plastic sheetings, blankets, jerry cans, kitchen sets, mosquito nets, grinding pots, clothes, soap, school uniforms provided to extremely vulnerable people identified • Basic psychosocial support provided to the extremely vulnerable people identified and GBV survivors • Referral mechanism established 	<p>Indicators of progress: <i>What are the indicators to measure whether and to what extent the project achieves the envisaged outputs? Ensure the indicators identified in Section II (v) of this proposal are adequately inserted in this section.</i></p> <ul style="list-style-type: none"> • Number of participants at the trainings • Number participants at awareness sessions • Number of people assisted and number of items provided • Number of PoC counseled and referred 	<p>How indicators will be measured: <i>What are the sources of information on these indicators?</i></p> <ul style="list-style-type: none"> • Attendance lists, weekly and monthly reports. • Attendance lists, weekly and monthly reports • Distribution lists, weekly and monthly report, items purchase receipts • Case management reports, referral reports, weekly and monthly reports 	<p>Assumptions & risks: <i>What factors not under the control of the project are necessary to achieve the expected outcomes? What factors may get in the way of achieving these objectives?</i></p> <ul style="list-style-type: none"> • Availability of schools administrations to host GBV awareness sessions • Interest and participation of the identified actors to trainings and awareness sessions • Availability in the local market of the items for material assistance. • Availability of NFIs from the cluster pipeline.

<p>Activities: <i>List in a chronological order the key activities to be carried out. Ensure that the key activities will results in the project outputs.</i></p> <ol style="list-style-type: none"> 1. Identification of a reliable women CBO in Kuajok 2. Conduct 1 training on GBV and Protection Monitoring for women CBO and INTERSOS staff. 3. Conduct 1 training on GBV for Health workers, Police and Local Authorities in Kuajok. 4. Conduct 4 awareness session in 4 schools of Kuajok 5. Conduct 6 awareness session in Mayen Gumel and Mayan Abun and turalei IDP's Sites 6. Provide emotional support through basic psychosocial counselling to 12 GBV survivors and refer them to the competent services 7. Provide material assistance to 150 extremely vulnerable people 8. Establish a referral mechanism among community, health workers and authorities in Kuajok 9. Conduct 6 protection monitoring exercises in Twic county and Kuajok to identify PSNs and the most vulnerable people. 	<p>Inputs: <i>What inputs are required to implement these activities, e.g. staff time, equipment, travel, publications costs etc.?</i></p> <ol style="list-style-type: none"> 1. Staff time, transportation 2. Staff time, publication costs for training materials, organization costs, 3. Staff time, publication costs for training materials, organization costs (stationary, refreshment, room rental) 4. Staff time, publication costs for awareness session materials, water, stationary, transportation. 5. Staff time, publication costs for awareness session materials, water, stationary, transport 6. Staff time, transportation, printing costs for incident forms 7. Staff time, transportation, materials for assistance, printing costs for registration forms and distribution lists. 8. Staff time, transportation. 9. Staff time, transportation, printing costs for identification forms. 		<p>Assumptions, risks and pre-conditions: <i>What pre-conditions are required before the project starts? What conditions outside the project's direct control have to be present for the implementation of the planned activities?</i></p> <ul style="list-style-type: none"> • Acceptance of the Communities targeted; • interest and collaboration of local Authorities, Health workers and Police to establish a referral mechanism • Collaboration of a CBO composed by women to sign an agreement and carry out the awareness sessions; • Security situation calm and stable. • Accessibility to site of concern during project implementation.
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PROJECT WORK PLAN

This section must include a workplan with clear indication of the specific timeline for each main activity and sub-activity (if applicable).

The workplan must be outlined with reference to the quarters of the calendar year.

Activities	Q1/2013			Q2/2013			Q3/2013			Q4/2013			Q1/2014	
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	
Activity 1. Identification of a reliable women CBO in Kuajok			X											
Activity 2. Conduct 1 training on GBV and Protection Monitoring for women CBO and INTERSOS staff			X											
Activity 3. Conduct 1 training on GBV for Health workers, Police and Local Authorities in Kuajok				X										
Activity 4. Conduct 4 awareness session in 4 schools of Kuajok				X	X	X	X	X						
Activity 5. Conduct 6 awareness session in Mayen Gumel and Mayan Abun and turalei IDP's Sites				X	X	X	X	X						
Activity 6. Provide emotional support through basic psychosocial counselling to 12 GBV survivors and refer them to the competent services				X	X	X	X	X						
Activity 7. Provide material assistance to 150 extremely vulnerable people			X	X	X	X	X	X						
Activity 8. Establish a referral mechanism among community, health workers and authorities in Kuajok				X	X									
Activity 9. Conduct 6 protection monitoring exercises in Twic county and Kuajok to identify PSNs and the most vulnerable people.				X	X	X	X	X						

*: TIMELINE FOR EACH SPECIFIC ACTIVITY MUST BE MARKED WITH AN X AND SHADED GREY 15%