

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

SECTION I:

CAP Cluster	WASH
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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
<ul style="list-style-type: none"> Emergency water treatment unit Emergency latrines and sanitation Pre-positioning of core pipeline Rehabilitation of existing water points and/ or appropriate Pre-positioning of refugee pipeline supplies in Maban and/ or northern Unity. 	<ul style="list-style-type: none"> Jonglei-likely Pibor Upper Nile- Renk, Manyo, Melut, Makal (aka Malakal); host community in Maban; Unity- northern counties (host community for refugee response) Warrap Northern Bahr el Ghazal- Aweil, north to the border

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)	
Nile Hope Development Forum (NHDF)	State	County
Project CAP Code	%	
SSD-13/WS/56146/8452	Jonglei	50 Akobo and Pigi
CAP Project Title (please write exact name as in the CAP)	Upper Nile	50 Ulang and Nasir
Provision of emergency safe water, sanitation and Hygiene services for IDPs, Returnees and acutely Vulnerable host communities in Akobo, Pigi, Fangak, Nasir, Ulang counties of Jonglei and Upper Nile states.		

Total Project Budget requested in the in South Sudan CAP	US\$845,000	Funding requested from CHF for this project proposal	US\$350,000
Total funding secured for the CAP project (to date)	US\$0	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 i of the budget sheet)	

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:	7,910	20,000
Girls:	9000	16,000
Men:	4,664	10,000
Boys:	6800	10,000
Total:	28,374	56,000

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

Contact details Organization's Country Office	Indirect Beneficiaries
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Contact details Organization's Country Office	Indirect Beneficiaries
Organization's Address	Juba, Tongping.
Project Focal Person	John Bilok, johnbilok@yahoo.com Tel. +211911401168/ +211929321904
Country Director	Paul Biel, paulbiel@yahoo.com Tel. +211912249550
Finance Officer	Sophia Njeri, soffi28@yahoo.com

CHF Project Duration (12 months max., earliest starting date will be Allocation approval date)

Indicate number of months: 6 (April – September)

Contact details Organization's HQ	Catchment Population (if applicable)
Organization's Address	Akobo, Jonglei
Desk officer	Lazarus Kiir: kiirul2003@yahoo.com
Finance Officer	Name: Jidayi Zaton: jidayiz@rocketmail.com Tel: +211911898747

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

Ensuring that all children have access to clean water and sanitation is a fundamental step towards fulfilling their rights. Goal 7 of the Millennium Development Goals (MDGs) is to half the number of people without access to safe water and sanitation, but progress towards these goals has been extremely uneven (Early Childhood in Focus, 8 (2012)). Lack of access to safe drinking and adequate sanitation coupled with continuing conflict in the Greater Upper Nile Region of the Republic of South Sudan over the past two years has imposed a toll on the coping capacity of the affected population, resulting in massive displacements within Upper Nile and Jonglei States. The IDPs, returnees and acute vulnerable host communities have challenges of accessing safe drinking water and sanitation mostly among women and girls who suffer from inadequate access to equitable basic services particularly water, sanitation and hygiene. According to the Upper Nile and Jonglei States humanitarian Action Plan 2011 County Data, the proportion of households with access to adequate sanitation and hygiene is still critical in counties like Akobo (1%), Nasir (15%), Ulang and Pigi (1%) respectively. NHDF has an emergency preparedness plan to respond to the water and sanitation needs of newly displaced persons. The vital role of women in water, sanitation and hygiene is undeniable, even though women involvement in the planning, design and implementation of such projects and programmes has proved to be fruitful and cost-effective; the benefits of this approach are not properly recognized. One result is that women are not regarded as central when it comes to leadership position and engage in water, sanitation and hygiene efforts as they should be. The studies have shown that lack of safe, separate private sanitation and washing facilities in schools is one of the main factors preventing girls from attending schools, particularly when menstruating. NHDF is working very hard to ensure that girls, boys, women and men are directly involved in consultation, planning and management in developing hygiene campaigns. It is important to consult with women, girls, boys and men to understand cultural and social norms of their engagement in WASH activities. Akobo County, Nasir, Ulang are hotspot areas during the dry season due to inter-tribal and militia groups such as Dak Kueth and David Yau Yau skirmishes that might cause unexpected civilian displacement. As the Early Childhood In Focus, 8 (2012) notes, "The quality of housing, water and sanitation has a direct impact on young children's (a key target for the project) health." NHDF is particularly apprehensive that due to 2012 floods and now the consequent drought and lack of pasture that has resulted in considerable depletion of herds, pressures for pasture can bear conflict that could complicate

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.

The need to increase access of safe water, sanitation and hygiene is critical for returnees, IDPs and vulnerable population affected by conflicts, floods and other emergencies. The areas targeted in this proposed intervention sometimes experience floods, Kalazar, cholera/AWD, malnutrition, chronic food insecurity and tribal conflict which sometimes are related to water scarcity and competition; as a result this has led to many loss of lives among different ethnic groups fighting over control of water resources. These selected counties are also among areas with low levels of WASH services in Upper Nile and Jonglei States respectively. Effect of high returns and IDPs has increased the pressure of sharing these few water and sanitation amenities for the population in particular. In 2012, NHDF expanded the WASH Program to Nasir and Ulang Counties in Upper Nile state focusing on these underserved areas where large numbers of returnees have come back home. Inadequate excretal and poor disposal coupled with lack of proper good hygiene practices characterized by rampant open defecation leaves a large portion of the population at high risk of preventable water related diseases such as diarrhea. Akobo, Pigi, Nasir and Fangak are already under great pressure from 2012 caseload and the floods reported by humanitarian partners, and are likely to face similar scenario in 2013. The demand for WASH services will be critical and there is high chance of water-related diseases, including cholera and diarrhea. The presence of large concentrations of IDPs and returnees create health and nutritional problems for the IDPs, returnees and the local host communities. Flooding and inter-communal conflicts are the prominent features of 2012/2013 in these parts of Jonglei and Upper Nile states and nearly 300,000 persons have been affected. Floods occur annually and in 2012, the floods led to the collapse of several houses, schools, community latrines and some water sources worsening the vulnerability index of the local populations.

Based on the situation gap, access to safe drinking water, safe sanitation and hygiene remain critical for IDPs, returnees and vulnerable host community and emergency funding is urgently required to support the proposed activities. The implication if nothing is done is the increase of morbidity and mortality rates especially among children due to Acute Watery Diarrhea Disease and other water-related diseases, population displacement and high levels of poverty due to recurrent food insecurity. NHDF being present in the above locations has achieved limited results in terms of sanitation improvement. By midyear 2012, the water, Sanitation and Hygiene Department of NHDF had managed to increase access to safe water supply, sanitation and hygiene by at least 57,434 persons who benefited from rehabilitated and existing water facilities institutional latrines and uptake of hygiene promotion messages and services. NHDF shares in the message that, "The positive benefits of improved water and sanitation extend beyond disease reduction to an enhanced overall quality of life," (Early Childhood in Focus 8, 2012). NHDF has the requisite infrastructure/material capacity (compounds, speed boats, offices, computer equipment, internet facilities....), technical expertise and social capital (and local knowledge and networks) to implement the proposed activities.

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.

CHF funding will be used to increase access to improved safe drinking water supply and safe sanitary means of excretal disposal as well as increase awareness on proper personal and hygiene practices in flood, conflicts and Acute Watery Diarrhea Disease affected areas, enable capacity-strengthening of communities to respond to emergencies more effectively and efficiently at County

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.

and payam levels.
<p>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)</p> <p>The overall objective is to increase access to safe water, sanitation and hygiene services among conflicts, floods and AWD affected communities including IDPs, returnees and acutely vulnerable host community in Akobo, Pigi, Ulang and Nasir counties by end of September 2013.</p> <p>Specific Objectives</p> <ul style="list-style-type: none"> Increased timely and equitable access to safe water, sanitation and hygiene services to affected communities by conflicts and other emergencies through rapid rehabilitation of water facilities and institutional latrines. Facilitate behavior change in acutely vulnerable communities through targeted hygiene promotion focusing on emergencies service. Strengthen capacity of the acutely vulnerable community members to withstand emergency WASH crisis and support the operation and maintenance of their facilities
<p>iii) Proposed Activities <u>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).</u></p> <ol style="list-style-type: none"> 1. Conduct social mobilization, sensitization, awareness and campaigns for 4,500 people to promote safe water, sanitation and hygiene good practices involving women: 2500, boys: 500, girls: 1000, and men: 1500 from IDPs, returnees and host community. 2. Rehabilitate and maintain 20 existing broken hand pumps (Akobo 10, Nasir 6 and Ulang 4, ensuring the women have an opportunity to work as hand pump operators and daily labor. 3. Rehabilitate 1 Small Water Distribution System motorized borehole in Akobo 4. Conduct immediate rehabilitation and maintenance of 4 existing Emergency Water Treatment Units, all four in Pigi County. 5. Rehabilitate 8 existing institutional school latrines to provide some degree of privacy for girls (Nasir 4, Ulang 4) 6. Distribute WASH Emergency hygiene kits to 500 targeted individuals to be provided through the WASH Core Pipeline and more emphasis will be people with special needs such as the elderly and the girl child. 7. Enhance the capacity of 120 Hygiene Promoters; 30 per county, 100 Teachers WASH in School, 70 male teachers and 30 female teachers. 8. Carry out Refresher training courses for 154 Water Management Committees, consulting women on the location of the trainings 9. Strengthen WASH Cluster coordination especially at the County level and reporting in all levels. 10. Support Community Led Total Sanitation Type Approaches in order to scale up sanitation provision targeting 10 villages, 2 villages per county, both male and female.
<p>iv) Cross Cutting Issues Briefly describe how cross-cutting issues (e.g. gender, environment, HIV/AIDS) are addressed in the project implementation.</p> <p>NHDF will continue advocating and encourage the participation of women more so their role in decision making in relevant community WASH management bodies, to ensure better management of facilities in recognition of the rights of women. We shall ensure all gender, including women and girls participate in the implementation of the initiative and are prominent beneficiaries and recipients of the WASH knowledge and supplies. Data will be disaggregated to highlight beneficiaries in terms of sex, and where possible, age. WASH facilities like latrines will consider the special needs of women and girls (e.g. separate latrines for ladies at the market place), especially because of the underlying cultural issues. We shall work to ensure there's minimal damage of the WASH supplies and activities (like latrine construction) to the environment. Proper location of the latrines will be very important, especially to ensure there's no encroachment to water sources like rivers. We shall work with the community to ensure proper waste disposal, e.g. through appropriate knowledge provision and attitudinal change. Throughout the intervention, we shall work to strengthen the capacities of various cadres of staff like the hygiene promoters and water user committees; this is important to ensure quality and sustained delivery of services to the affected community. NHDF will ensure proper environmental awareness on siting of latrines for general public and plans with community to conduct environmental impact assessment and will encourage the community to plant trees around the rehabilitated water points to minimize the effect of soil erosion and run off as well as educate users to promote good drainage that will reduce the transmission of water related diseases. As far as possible, we shall encourage formation and support School Environmental Clubs; In addition the Programs Office will work to coordinate, and create synergies with, other Programs/Sectors such as Education, Protection-GBV, Food Security and Livelihoods and Health and Nutrition to enable a holistic, sustainable and cost-effective intervention.</p>
<p>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.</p> <p>NHDF anticipates that about 20,000 people will have access to sustained safe water supply in Nasir, Ulang, Akobo and Pigi through the 20 rehabilitated broken down boreholes and 4 emergency water treatment plants rehabilitated and 1 Small distribution system done in Akobo. About 2100 school children and teachers will have increased access to safe sanitation and hygiene amenities in two schools. Key project outcomes/results shall include addressing the pressing needs of 28,374 individuals that are severely affected among the IDPs, returnees and host population through increased knowledge and capacity strengthening of the community to maintain water points; Gradual positive behavior practices especially in regard to latrine construction and consistent usage and hand-washing practices; Increased access to WASH facilities and amenities and improved knowledge of usage of the same;</p>

Improving WASH infrastructure (water points, latrines, hand-washing facilities) that meets the immediate water, hygiene and sanitation needs of the target audience. NHDF will increase awareness on Key Sanitation Hygiene Practices at all levels with emphasis on IDPs, returnees and vulnerable host community through trainings/workshops and other channels of communication. There will be a general improvement of beneficiaries' wellbeing courtesy of the program synergies created and the attendant holistic approach.

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)
	1.	Number of people disaggregated by gender reached with key Sanitation and Hygiene messages.	Women: 2500 Men: 1500, Girls : 1000, Boys: 500
X	2.	Number of people provided with sustained access to safe water supply 15 liters per person per day according to the SPHERE Standard disaggregated by gender	<ul style="list-style-type: none"> 20,000 individuals (Women:5000, Men 3000, Girls:7000, boys 5000)
X	3.	Number of existing water points rehabilitated	<ul style="list-style-type: none"> 20 boreholes rehabilitated and maintained 4 Emergency Water Treatment units rehabilitated and maintained in Pigi County 1 Small Water Distribution System(SWDs) broken in Akobo town rehabilitated
X	4.	Number of people provided with sustained access to sanitation and hygiene facilities disaggregated by gender	<ul style="list-style-type: none"> 2100 school children (Girls :700, Boys 1300, Teachers 100, 30 female teachers and 70 male respectively
X	5.	Number of existing institutional latrines rehabilitated	<ul style="list-style-type: none"> 8 school emergency school latrines rehabilitated
	6.	Number of households received emergency hygiene kits	<ul style="list-style-type: none"> 500 individuals (women :200, Girls: 300)
X	7.	Number of people trained on Hygiene Promotion to be shared with their communities disaggregated by gender	<ul style="list-style-type: none"> 120 (Women:80, Men 40) Hygiene Promoters WASH in Schools 100 (Men 70, Female teachers 30)
	8.	Number of community members trained on water management, Sanitation and Hygiene services disaggregated by gender	<ul style="list-style-type: none"> 154 Water management Committees (Women:100, Men 54)
	9.	Number of villages Triggered	<ul style="list-style-type: none"> 10 villages triggered

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 planned mechanism for implementation of the project is to work closely with County Rural Water Supply and Sanitation Department by strengthening the coordination mechanism with government and other relevant partners. NHDF will strengthen community and local government capacity to collaborate in the planning, building, operation, and maintenance of water and sanitation systems in Akobo, Pigi, Ulang and Nasir. The overall oversight of the project implementation will be done by NHDF WASH structure headed by the WASH Manager and supported by the WASH Assistants in the field in the respective counties with regular support from Juba Office coordination desks as well as the state head quarter Bor. NHDF's WASH structure is administered from the top by a WASH Manager, who works with an assistant/s, WASH Assistant Manager/s. NHDF's Programs Coordinator shall work to harmonize the effort (and create cross program synergies) and ensure direction towards the common objective. The team will work with local and existing networks of WASH pillars/institutions such as the County Rural Water Supplies and sanitation Departments of the respective counties, the Water User Committees (WUCs), pump mechanics and hygiene promoters. There shall be one state focal point that shall be based in the state capital that will run all WASH activities with partners including coordination meeting, because of the attendant emergency preparedness and response issues. This technical team shall secure full administrative and coordination support from NHDF's Executive Director, Human Resource Manager as well as from the Finance/Grants Office. NHDF has its Headquarter in Akobo with sub offices/compounds in Pigi, Bor, Malakal, Fangak Ulang and Nasir.

vii) Monitoring and Reporting Plan

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

To improve implementation of the project, monitoring, reporting and supervision of the project progress will be done by the responsible staffs of NHDF which is the implementing partner WASH Manager and NHDF's Program Coordinator and other support staff. NHDF will respectively report to the CHF steering committees the progress of the activities using the appropriate tools of reporting. The result will be measured basing on the number of people served and the number of water facilities and sanitation facilities rehabilitated as per the Project Logical Framework. NHDF will work with local government and community groups to progressively build the capacity of water management committees over the period of the project to successfully assume ownership of the rehabilitated water and sanitation facilities.

NHDF shall ensure there is effective and timely monitoring of the activities especially during the implementation and shall conduct a project-exit evaluation to find out the impact or otherwise of the intervention. NHDF's WASH Department will not spare any effort and will ensure the provision of basic service delivery to the affected communities. NHDF Department will track the progress of the activities and ensure proper documentation is done using the organization's internal M&E tools. NHDF will use the following monitoring tools that include borehole rehabilitation form, School latrines construction form, School visit Assessment questionnaire, Sign-Up Sheet, Field Observation form and hand pump visit questionnaire. Qualitative and quantitative data analysis of number of people with access, and disaggregated by gender, monthly quarterly monitoring reports from the WASH field staff with visit to sites. Data will be analyzed quarterly getting a summation of completed water, sanitation facilities. NHDF is upgrading its systems and will

– in due course - be able to use such advanced analytical tools such as the SPSS software.

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)

SECTION III:

LOGICAL FRAMEWORK				
CHF ref./CAP Code: SSD-13/WS/56146/8452		Project Title: Provision of emergency safe water, sanitation and Hygiene services for IDPs, Returnees and acutely Vulnerable host communities in Akobo, Pigi, Fangak, Nasir, Ulang counties of Jonglei and Upper Nile states.		Organisation: NHDF
Overall Objective	Cluster Priority Activities for this CHF Allocation: To increase access to safe water, sanitation and hygiene services among conflicts, floods and AWD affected communities including IDPs, returnees and acutely vulnerable host community in Akobo, Pigi,Ulang and Nasir counties by end of September 2013.	Indicators of progress: <ul style="list-style-type: none"> Number of people provided with sustained access to safe water supply (15 litres/ person/day within 1 km distance) People provided with sustained access to hygiene latrine facilities 	How indicators will be measured: <ul style="list-style-type: none"> Monthly, quarterly and annual final reports. Disease Registers/Entries at the Health Facilities: Less people reporting watery diarrhoeas infection at the health units. School latrines reporting form 	
Purpose	CHF Project Objective: <ul style="list-style-type: none"> Increased timely and equitable access to safe water, sanitation and hygiene services to affected communities by conflicts and other emergencies through rapid rehabilitation of water facilities and institutional latrines. Facilitate behaviour change in acutely vulnerable communities through targeted hygiene promotion focusing on emergencies service. Strengthen capacity of the acutely vulnerable community members to withstand emergency WASH crisis and support the operation and maintenance of their facilities 	Indicators of progress: <ul style="list-style-type: none"> Number people provided with sustained access to safe water supply (15 litres/ person/day within 1 km distance). People provided with sustained access to hygiene latrine facilities People trained on hygiene promotion messages to be shared with their community Households receiving a hygiene kit. Community members trained on management of water, sanitation and hygiene services. 	How indicators will be measured: <ul style="list-style-type: none"> Monthly quarterly reporting Users register Rehabilitation photos before and after the work GPS coordinates for rehabilitated water points School latrine sanitation forms Rehabilitation Photos Observation of sanitation facilities at schools Household Registration form Observation of household receiving hygiene kits Participant attendant form Observation of Water User Committees exercising their roles Training photos 	Assumptions & risks: <ul style="list-style-type: none"> Inter-tribal conflict does not hinder the implementation process Funding not available on time Inaccessibility of areas due to insecurity Logistical challenge Availability of WASH supplies on time Community members are willing and participated in the training Availability of funding to facilitate the process. Training venue is accessible to all
Results	Results - Outcomes (intangible): <ul style="list-style-type: none"> Targeted beneficiaries have increased knowledge and skills to sustain WASH facilities and improved behaviors. Targeted beneficiaries have increased and timely equitable access to safe water, sanitation 	Indicators of progress: <ul style="list-style-type: none"> People have increased knowledge and skills shared among their communities People have improved knowledge to sustain and manage WASH 	How indicators will be measured <ul style="list-style-type: none"> Households able to mention 3 critical moment for hand washing Hygiene promoters shared their knowledge 	Assumptions & risks: <ul style="list-style-type: none"> The overall security improved to allow community to move without fear Funds/resources available on time Tribal conflict does not affect the activities Logistics effective

<p>and hygiene services.</p> <ul style="list-style-type: none"> • Targeted beneficiaries in four counties have less risk of transmission of water borne related diseases 	<p>facilities.</p> <ul style="list-style-type: none"> • People in four counties are able to mention 3 WASH key best practices 		
<p>Immediate-Results - Outputs (tangible):</p> <ul style="list-style-type: none"> • Targeted beneficiaries have increased and timely equitable access to improved water through rehabilitation of existing water facilities. • Targeted beneficiaries provided with equitable access to safe sanitation through rehabilitation of existing school latrines. • Improved WASH monthly coordination and humanitarian meetings. 	<p>Indicators of progress:</p> <ul style="list-style-type: none"> • Existing water points rehabilitated • Existing Latrines rehabilitated • Number of WASH monthly coordination meeting/humanitarian attended 	<p>How indicators will be measured:</p> <ul style="list-style-type: none"> • GPS for the rehabilitated water points • Water points rehabilitation form • Observation of water operational • Observation of rehabilitated school latrines being used by children and teachers • Rehabilitation Photos • Observation of partners attending the monthly coordination meeting • Signed up sheet for meeting 	<p>Assumptions & risks:</p> <ul style="list-style-type: none"> • The overall security improved to access the rehabilitation site • Funds/resources available on time • Tribal conflict does not affect the activities • Logistics effective and accessibility to the sites • There is no failed boreholes • Availability of the spare parts and other rehabilitation materials
<p>Activities:</p> <ul style="list-style-type: none"> • Conduct social mobilization, sensitization, awareness and campaigns for 4,500 people to promote safe water, sanitation and hygiene good practices involving women: 2500, boys: 500, girls: 1000, and men: 1500 from IDPs, returnees and host community. • Rehabilitate and maintain 20 existing broken hand pumps (Akobo 10, Nasir 6 and Ulang 4, ensuring the women have an opportunity to work as hand pump operators and daily labor. • .Rehabilitate 1 Small Water Distribution System motorized borehole in Akobo • Conduct immediate rehabilitation and maintenance of 4 existing Emergency Water Treatment Units, all four in Pigi County. • .Rehabilitate 8 existing institutional school latrines to provide some degree of privacy for girls (Nasir 4,Ulang 4) 	<p>Inputs:</p> <ul style="list-style-type: none"> • IEC Materials(Posters, banners and T-shirts) • Social mobilizers • Fuel • Boat/Car • Stationery • Food/e\upkeeps • Microphones • Spare parts • Cement • Local Materials • Speed boat/vehicle • Rehabilitation team • Fuel • Spare parts • Labors • Local materials • Horse pipes • Water pumps • Fuel • Local materials • Transportation • Labors • Cements • Timbers • Assorted nails 		<p>Assumptions, risks and pre-conditions:</p> <ul style="list-style-type: none"> • Beneficiaries will to participate • Overall security situation remain stable in the villages • Availability of funding to implement activities • Spare parts and other rehabilitation materials are available • All sites for the broken water points remain accessible • No failed boreholes • Funds are available on time • Availability of spare parts eg submersible pump • The overall security improved to allow community to move without fear • Funds/resources available on time • Tribal conflict does not affect the activities • Logistics effective • Availability of consumable supplies eg chlorines and other supplies • Expect good cooperation from the education authorities

	<ul style="list-style-type: none"> • Distribute WASH Emergency hygiene kits to 500 targeted individuals to be provided through the WASH Core Pipeline and more emphasis will be people with special needs such as the elderly and the girl child. • Enhance the capacity of 120 Hygiene Promoters; 30 per county, 100 Teachers WASH in School, 70 male teachers and 30 female teachers. • Carry out Refresher training courses for 154 Water Management Committees, consulting women on the location of the trainings • Strengthen WASH Cluster coordination especially at the county level and reporting in all levels. • Support Community Led Total Sanitation Type Approaches in order to scale up sanitation provision targeting 10 villages, 2 villages per county, both male and female 	<ul style="list-style-type: none"> • WASH Emergency supplies • Distributors • Fuel and boat • Storage facilities • Transportation of supplies • Facilitators • Food for participants • Assorted stationery • Training manuals • Boat/vehicle • Facilitators • Food for participants • Assorted stationery • Training manuals • Boat/vehicle • Soft drinks and refreshment • Stationery • Venue • Boat • Facilitators • Stationery 		<ul style="list-style-type: none"> • Needed resources are available on time • WASH emergency hygiene kits are available to be distributed at • All the affected community are able to access the needed supplies on time • Availability of funds and facilitator • Readiness of Beneficiaries to participate • Training venue is accessible to all including women • Availability of funds and facilitator • Readiness of Beneficiaries to participate • Training venue is accessible to all including women. • Agencies are willing and motivated to attend coordination and humanitarian county Forum. • Willingness of community to embrace the concept of CLTS and participate in the triggering exercise
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PROJECT WORK PLAN

This section must include a work plan 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 Conduct social mobilization, sensitization, awareness and campaigns for 4,500 people to promote safe water, sanitation and hygiene good practices involving women: 2500, boys: 500, girls: 1000, and men: 1500 from IDPs, returnees and host community.				x	x	x	x	x	x					
Activity 2 Rehabilitate and maintain 20 existing broken hand pumps (Akobo 10, Nasir 6 and Ulang 4, ensuring the women have an opportunity to work as hand pump operators and daily labor.				x	x	x	x	x	x					
Activity 3.Rehabilitate 1 Small Water Distribution System motorized borehole in Akobo				x	x	x								
Activity 4 Conduct immediate rehabilitation and maintenance of 4 existing Emergency Water Treatment Units, all four in Pigi County.				x	x	x								
Activity 5 Distribute WASH Emergency hygiene kits to 500 targeted individuals to be provided through the WASH Core Pipeline and more emphasis will be people with special needs such as the elderly and the girl child.				x	x	x	x	x	x					
Activity 6.Rehabilitate 8 existing institutional school latrines to provide some degree of privacy for girls (Nasir 4,Ulang 4)				x	x	x								
Activity 7 Enhance the capacity of 120 Hygiene Promoters; 30 per county, 100 Teachers WASH in School, 70 male teachers and 30 female teachers.				x	x	x	x	x	x					
Activity 8 Enhance the capacity of 120 Hygiene Promoters; 30 per county, 100 Teachers WASH in School, 70 male teachers and 30 female teachers.				x	x	x	x	x	x					
Activity 9 Carry out Refresher training courses for 154 Water Management Committees, consulting women on the location of the trainings				x	x	x	x	x	x					
Activity 10 Strengthen WASH Cluster coordination especially at the county level and reporting in all levels.				x	x	x	x	x	x					
Activity 11 Support Community Led Total Sanitation Type Approaches in order to scale up sanitation provision targeting 10 villages, 2 villages per county, both male and female				x	x	x	x	x						

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