

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	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)		
Plan International, South Sudan	State	%	County
Project CAP Code	Jonglei	100%	Pibor
SSD-13/WS/55951/5524			
CAP Project Title			
Improve Access to Sanitation and Hygiene for Vulnerable IDPs, Returnees and Host Communities in Jonglei State, South Sudan.			

Total Project Budget requested in the South Sudan CAP	US\$520,000	Funding requested from CHF for this project proposal	US\$340,000
Total funding secured for the CAP project (to date)	US\$80,000	Are some activities in this project proposal co-funded?	
		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (if yes, list the item and indicate the amount under column i of the budget sheet)	
		Plan matching funds – TBD	
		In kind – Unicef pipeline (4000 water purification kits, 500 buckets, 500 stirring sticks and straining cloth)	

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:	5,374	21,119
Girls:	2,157	6,359
Men:	4,721	13,249
Boys:	4,532	12,189
Total:	16,784	52,196

Indirect Beneficiaries
52,196 Individuals
Catchment Population (if applicable)

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

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

amounts)

Indicate number of months: 7.5 Months (15 Feb – 30 September)

Contact details Organization's Country Office	
Organization's Address	Plan International, South Sudan
Project Focal Person	Mules James James.Mules@Plan-International.org +211 955985953 / 926718961
Country Director	Gyan Bahadur Adhikari Gyan.Adhikari@Plan-International.org +211 956201698
Finance Officer	Gerald Magashi Gerald.Magashi@Plan-International.org +211 956249610

Contact details Organization's HQ	
Organization's Address	
Desk officer	<i>Name, Email, telephone</i>
Finance Officer	<i>Name, Email, telephone</i>

SECTION II

A. Humanitarian Context Analysis
<p>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</p>
<p>Jonglei State in South Sudan had experienced recurrent inter-communal fighting between the Lou Nuer and Murle characterized by continuous cycle of attacks and retribution affecting numerous communities on both sides. Since December of 2011 till late last year, large attacks took place against the Murle with thousands of young men from the Lou Nuer tribe attacking a number of Murle communities in Jonglei, with great loss of life. Based on anecdotal evidence from Plan South Sudan staff discussions with chiefs and community leaders in Lekuongole last year, at least 3,100 women, men and children were killed by the violence in that region since the conflict began at that time. The attacks were brutal and violent, leaving entire communities completely devastated with all tukuls, water points, schools, and any structures completely destroyed.</p> <p>Vast areas of Jonglei face underdevelopment and extreme levels of poverty. The attacks on Murle communities left nothing in terms of animals or crops, as all cattle were taken, and all crops burnt and destroyed. Most survivors of the attacks fled into the bushes and nearby communities; as they saw this as the only means of ensuring their safety and security. Unfortunately, most individuals and entire communities, fled with nothing but with only what they could carry on their backs. This has created a context of extreme vulnerability for tens of thousands of Murle who were displaced and took refuge in the nearby communities.</p> <p>During the month of March, 2012 inter-agency assessments determined that as many as 120 000 women, men and children may be in need of support, with the possibility of thousands more yet to come from the bush needing support at that time. Even as the initial attacks have ended, many have not returned to the villages of origin. Many among the Murle community still believe that another, much larger, attack is on the way, and have thus not yet returned to their communities. Schools and safe environments for children have also been destroyed. Children have been abducted, with many still unaccounted for.</p> <p>Furthermore, in the recent past, there has been massive displacement due to insurgencies caused by militia around the communities of Lekuangole and Gumuruk in Pibor County of Jonglei state. All the displaced persons in the aforesaid communities sought refuge in safer areas such as Pibor center which has resulted into overstretching of the already scarce resources such as functional water points as well as accessible sanitation facilities like latrines.</p> <p>This already fragile humanitarian situation of the communities in Jonglei was further exacerbated by floods that badly affected many communities in the months of July and August, 2012. According to inter-agencies' assessment on floods in Jonglei state conducted in August, 2012; over 35, 370 women, men and children have been displaced in the communities of Motot (Uror), Duk Padiet, Duk Payuel and Ayod alone. Access to clean drinking water which had always been a difficult resource to come by, with the floods, there is hardly any clean water source for the entire population affected. The sanitation and hygiene situation is alarming with displaced persons having limited access to toilet facilities which results in practicing of open defecation. Consequently, with limited access to improved sanitary facilities and hygiene education, the risk is high of a rise in diseases associated with poor sanitation and hygiene practices such as diarrhea and malaria especially among most vulnerable such as children under five years and the elderly.</p> <p>Plan South Sudan with its partners have already constructed seven (7) temporary teaching and learning spaces to replace destroyed schools of Pibor Boys, Pibor Girls, Kondako, Langachod and Tangnyan with a total of twenty-one (21) classrooms which host 2,214 pupils (1,699 boys, 515 girls) in order to ensure a safe environment and continual education for children. These schools were damaged and destroyed during the inter-communal conflicts. Also, Plan distributed 240,000 water purification kits (PUR sachets, straining clothe, stirring sticks and buckets) in Gumuruk Payam of Pibor County to address the dire lack of potable clean water. The community of Gumuruk experiences inadequate sources of safe clean water and as such they resort to collecting water from open sources like running surface water and seasonal streams which is not clean. Furthermore, Plan South Sudan in partnership with WFP has been doing general food distribution (GFD) reaching over 80,000 individuals in counties of in Pibor and Akobo. This will continue until such time that the local communities have the ability to ensure their own food sufficiency and will require beneficiaries' access to clean water.</p>

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.

The proposed Plan's WASH intervention will focus on communities affected by the inter-communal conflict and insurgency caused by militia in Pibor county. These communities include those found in the payasm of Gumruk, Lekuongole Vertet and Pibor center.. There is limited access to institutional toilet facilities in schools and health centers in the area and besides, the situation is made worse by the recent heavy rains which have either resulted into collapse of many of the existing latrines.. In Gumruk a temporary water treatment plant constructed by MSF was destroyed during the conflict last year.

The CHF funds requested will be utilized to ensure that immediate sanitation and hygiene needs are met as part of the food and NFI distribution work, water purification kits are distributed and water treatment plant is installed in Gumruk to replace the one that was destroyed. Plan, at its own cost, intends to also start assessment and design work to eventually install a reservoir in the area which will address longer term water access needs. Support for this will possibly be requested as part of a future CHF funding round.

B. Grant Request Justification

Currently Pibor and the surrounding communities are facing a situation of acute sanitation and hygiene problem marred with open defecation, lack of clean potable water and inadequate awareness on improved hygienic practices due to its remoteness, recurrent cycle of communal violence and inaccessibility due to flooded roads especially during rainy season. There are few NGOs currently providing emergency support to the affected communities they are often forced to work from Bor or even Juba due to access problems. Although agencies such as PAH provides emergency hygiene kits and Medair provides emergency latrines in Pibor, among other interventions, the need is way higher than any of them can meet., Sanitation has not been adequately addressed especially in schools as well as hygiene education awareness among the displaced persons and the host communities. According to Jonglei WASH cluster cumulative report for 2012, there were only 11,207 people who benefited from sanitation while hygiene has total of 44, 091 beneficiaries.

Plan South Sudan has established a permanent presence in Pibor and Akobo and over the last one year. Therefore, during the rainy season, when access is difficult, Plan was able to continue with limited programming despite huge challenges posed by poor infrastructure and rising insecurity. This capacity will be critical in ensuring that planned WASH initiatives under this CHF request are quickly rolled out within the narrow, six month, operating window and that follow up support that may be necessary is maintained even after the project has ended or the rains have come.

The main activities of this project will build on the progress Plan has already made, working with affected communities over the last one year. For instance, although Plan South Sudan has rehabilitated seven (7) schools in this area with a total of twenty-one (21) classrooms that had been damaged and destroyed during the inter-communal, these rehabilitated schools have limited access to sanitary facilities such as separate latrines for girls and boys as well as for female and male teachers. In addition the community campaigns and training activities that are necessary to reinforce good hygiene practices were not completed last year and will be carried out now. Besides, Plan South Sudan is implementing general food distribution funded by World Food Programme (WFP) in the area. Most of these displaced communities do not have temporary latrines at centers where they seek safety. Consequently, this project will target provision of WASH inputs in areas of sanitation and hygiene in order to complete the range of critical support services which Plan has been offering. This work will be done as a continuation of the partnership and collaboration with cluster members like Medair, MSF and Intersos. Thus, for instance, by agreement with MSF, Plan will be working to replace the destroyed temporary water treatment plant in Gumruk which MSF had set up.

The overall goal of the project is to address the dire sanitation and hygiene needs among 52,196 vulnerable children, youth and *adults (40% women, 25% men, 12% girls and 23% boys)* by improving sanitation and hygiene practices in 5 Payams of Pibor, Lekongole, Gumruk, Verthet and Pibor with 8 Bomas in Pibor County in Jonglei State of South Sudan. This will be done through enhancement of the capacity of women in sanitation and hygiene related decision making and training of the women on alternative water treatment methods. More so, there will be training of natural leaders, Community Health Promoters (CHPs), members of School Health Clubs and Parents Teachers' Association (PTA) and School Management Committees respectively on improved sanitation and hygiene practices which would pave way for introduction of approach to Community-Led Total Sanitation (CLTS) as well as School-Led Total Sanitation (SLTS). The project further aims at improving access to sanitation in seven schools of Pibor Boys, Pibor Girls, Kondako, Langachod, Lekuangole, Gumruk and Tangnyan through construction of school latrines. The schools have a total population of (1,699 boys, 515 girls). As evident in the total enrollment of the pupils, one of the causes for high school drop-outs among adolescent girls is attributed to inadequate sanitation and health conditions in the schools. Hence, there is need to construct child-friendly separate latrines for boys and girls with hand washing facilities.

Also, the project would increase sustained access to safe drinking water through rehabilitation of existing dysfunctional boreholes in Pibor and its surrounding and distribution of PUR as an alternative method of water purification. According to an assessment report conducted by PAH in Pibor from 19th -26th October, 2012; five boreholes were reported to have broken down in Pibor Payam alone and it's anticipated that the number of broken boreholes would increase due overarching of the existing boreholes as a result of high influx of displaced persons from the surrounding communities of Gumruk, Lekuangole and Verthet. Therefore, the funds requested in this project would be used to rehabilitate ten existing dysfunctional boreholes, training of communities around the water points on water management and village hand pump mechanics on maintenance. Furthermore, the funds would be used to establish storage facility for emergency WASH supplies such PUR sachets and hand pump spare parts from the Core Pipeline. This would hastened emergency response interventions especially during rainy seasons where there is difficulty of accessibility.

It is worth mentioning that Plan South Sudan add value to this project by the fact that planned activities will support, and in turn be supported by an integrated emergency response program that is already addressing community priority needs in nutrition, livelihoods, education and protection. Plan also has the ability to provide matching funds raised through its international family. Thus, for instance, approval of this request will draw guaranteed match to of 15%-20% plus additional technical support, resources that would otherwise not come to South Sudan.

C. Project Description (For CHF Component only)

i) Contribution to Cluster Objectives

This project contributes to cluster objective of facilitating behavior change in acutely vulnerable communities in sanitation and hygiene practice through improved access to and use of sanitation facilities and targeted hygiene promotion focusing on women and children. It has been noted that promotion of improved sanitation and hygiene practices has been the least funded according to the cumulative reports of WASH cluster last year. In Jonglei, only 11, 207 persons benefited from sanitation and 44,091 persons from hygiene compared to total beneficiaries of 146, 354 for WASH cluster last year.

Nevertheless, assuring communities to understand the importance of improved sanitation and hygiene practices in reducing infectious disease is the first step in changing communities hygiene behaviors for the better thus, reducing mortality related to poor sanitation and hygiene.

ii) Project Objective

- i) To increase access to improved sanitation facilities for boys and girls in seven schools in Pibor County.
- ii) To enhance the capacity for displaced communities in sustainable sanitation and hygiene practices in Pibor County.
- iii) To increase access to sustained safe clean drinking water in Pibor County.

iii) Proposed Activities

A1.1 Construction of emergency school latrines with separate blocks for girls and boys with hand washing facilities in seven schools of Pibor Boys, Pibor Girls, Kondako, Langachod, Lekuangole, Gumuruk and Tangnyan.

A1.2 Establishment of storage facility for emergency WASH supplies.

A1.3 Training of Community Hygiene Promoters (CHPs) volunteers to propagate improved sanitation and hygiene practices.

A1.4 Enhancing capacity of WASH Emergency Response team in Pibor

A1.5 Formation and training of School Health Club members on improved sanitation and hygiene practices.

A1.6 Conduct health and hygiene education sessions for girls, boys, women and men providing information and skills to be shared with their families and community members.

A1.7 Rehabilitation of existing dysfunctional boreholes.

A1.8 Training of members of communities on water management and sustainable sanitation.

A1.9 Training of village pump mechanics on hand pump maintenance.

A2.0 Distribution of water purification kits (PUR sachets, straining clothe, stirring sticks and buckets) to the vulnerable communities in Pibor County (to be procured through Unicef pipeline).

iv). Cross Cutting Issues

Plan South Sudan being a Child-Centered organization will actively work towards the eradication of gender based inequities in opportunities, and the access to and control over resources. Plan South Sudan would establish mechanisms (e.g. workshops, focus discussion groups, etc.) to make sure women's and men's voices are heard. Also, Plan South Sudan would reflect cultural and ethnic differences in the affected community in sanitation and hygiene programs where appropriate.

Plan South Sudan would use approaches that encourage the participation of individuals in a group process irrespective of age, sex, social class, or educational background. Participatory methods, such as the group process, are suitable for the community level and are designed to build people's self-esteem and instill a sense of responsibility and ownership for one's decisions. Furthermore, group participation is useful for encouraging involvement from women, children, the elderly, and people with disabilities, who in some cultures may be reluctant or unable to express their views. Inclusion of the greater community also has the advantage of aiding people to feel changes from within, rather than imposed from outside.

Plan South Sudan would encourage environmental sanitation with range of activities such as cleaning of yards, public places, school compounds along with provision of drainage and solid waste management. Consequently, all the sanitation and hygiene promotion related activities are not expected to affect the environment in any significant way.

v) Expected Result/s

Result 1: 2,214 (1,699 boys, 515 girls) children in seven schools in Pibor county would have access to improved sanitation facilities.

As evident in the enrolment of the pupils in the schools, the number of the girls is less than the boys. One of reasons for adolescent girls drop out is inadequate access to improved sanitation and health facilities at schools. Hence, with construction of latrines in the schools in Pibor, it would improve access to improved sanitation facilities and hence increased enrolment especially for girls.

Result 2: Capacity of members of displaced communities in Pibor is enhanced on water management, sustainable sanitation and hygiene practices.

Capacity building of natural leaders, Community Health Promoters (CHPs), school management committees (PTAs & SMCs) as well as members of school health clubs on water management, sustainable sanitation and hygiene practices would increase communities' understanding of safe water management, sustainable sanitation and improved hygiene practices. Consequently, it would pave way for propagation of Community-Led Total Sanitation (CLTS) as the community members would be aware of their roles in promotion of improved sanitation as well as dangers of poor hygiene practices.

Result 3: Communities of Pibor have increased access to sustained safe clean water.

As the number of boreholes that have broken down due to overarching of the existing boreholes as a result of high influx of

displaced persons from the surrounding communities increase, there is need to repair and maintain the existing dysfunctional boreholes so as to increase the accessibility to safe clean drinking water. In Gumruk payam, where the geo-hydrological profile makes bore hole drilling difficult, affected communities will be provided portable kits to purify surface water.

SOI (X)	#	Output Indicators	Target (indicate numbers or percentages)
	1.	# Emergency school latrines with separate blocks and hand washing facilities for girls and boys constructed.	7 new latrines
	2.	# People provided with sustained access to hygiene latrine facilities.	2,214 pupils (1,699 boys; 515 girls)
	3.	# Emergency WASH supplies storage facility established.	1 storage facility
	4.	# Women, men participating as Community Health Promoters (CHPs) volunteers.	160 (80 women, 80 men)
	5.	# Members of WASH Emergency Response team with enhanced capacity.	10 (4 women, 6 men) members of WASH Emergency Response team
X	6.	# Members of school health clubs trained on improved hygiene practices.	140 pupils (70 boys, 70 girls)
	7.	# People trained on health and hygiene education to be shared with their families and community members.	10,600 individuals (40% women, 35%men, 12% girls, 23% boys)
X	8.	# Existing dysfunctional boreholes rehabilitated	10 old dysfunctional boreholes
	9.	# People provided with sustained access to safe clean water supply.	2,500 individuals (1,000 women, 875 men, 300 girls, 325 boys)
X	10.	# Community members trained on management of water and sustainable sanitation.	80 individuals (40 women, 40 men)
	11.	# Village hand pump mechanics trained on hand pump maintenance.	20 individuals (10 women, 10 men)
	12.	# Water purification kits (PUR sachets, straining cloth, stirring sticks, and buckets) procured and distributed.	4,000 kits

vi) Implementation Mechanism

The project activities will be coordinated with the members of WASH sector which include NGO, UN agencies, local government authorities and other stakeholders. Regular briefing will be done on project progress during the sector cluster meetings and with the local authorities of Jonglei State and the participating County authorities, Payams and Village development committees.

Plan South Sudan has established a presence in Jonglei with sub offices in Bor, Pibor and Akobo over the past one year. The organization has been working in partnership with WFP, FAO and Unicef to carry out school feeding, relief food distribution, food security and livelihoods as well as WASH projects including Community Led- Total Sanitation (CLTS) in the State. Plan South Sudan has worked closely with different state and county government departments to implement these projects. Plan South Sudan is now also in the process of identifying local CBO's partners to strengthen its outreach and scale up capacity. This structure will be used in the implementation of this project. In addition, Plan South Sudan has benefited from technical and financial support from affiliate members of Plan International like: Plan Australia and Plan Canada. The organization will draw on this support through specialist Technical Assistant in Child Protection and Gender as well as in raising matching funds to ensure the success of this project.

Plan South Sudan will allocate separate office space to this project and the recruited team within the premises. The Project will be led by a Project Coordinator reporting to the Plan South Sudan Emergency Coordinator based in Juba, who oversees all Plans' emergency programming in South Sudan, and reports directly to the Plan's Country Director in Juba. The project will be implemented with the coordination and partnership of SALT, the national partner organization who will work closely and coordinate with the community facilitators, member from child protection networks and relevant government departments, alongside Plan.

Community based organizations and community leaders, relevant government departments and different partners are always part of the process of program\project development, implementation and monitoring and evaluation. All programs and projects follow the Do No Harm principle and the entire processes of programming are transparent. The programs implemented respond to direct needs of beneficiaries and do not harm others, lessening the burden on government departments or other actors who are duty-bearers for these services.

All financial transactions, including purchases and bidding for contracts, are conducted in a transparent manner following internationally acceptable standards and according to Plan's procedures. Through these measures, Plan aims to gain the acceptance of all stakeholders and guarantee continuation of activities. Most important that women, men, youth females and youth males will be mobilized and encourage for accountability and ownership during the implementation process where they will be involved from the beginning and participate in the implementation plan.

vii) Monitoring and Reporting Plan

Plan South Sudan will be monitoring the WASH activities on an ongoing and daily basis to track the development of the WASH activities and to identify gaps in the levels of community mobilization, quality of activities, safety of children and logistical support in addition and during the monitoring process the minimum standard will apply. However, evaluation is periodically done by people who are experienced in monitoring, to determine whether the activities are producing meaningful improvements in the lives of the communities or to some extent.

Plan staff will monitor project to ensure that the quality of the activities, adequacy of supplies and logistics supports, protection threats in the area, and the implementation of the code of conduct, then these result will be discussed during the child protection and education cluster meetings, which can improve coordination.

Most important, Plan uses a participatory method of monitoring that engage children, youth, females, males and invite community members' views. In terms of monitoring, Plan South Sudan has its structure already in place to ensure the use of information coming from reports of the different levels will be strengthened in such a way as to inform the progress of each project activity.

The achievements will be monitored through regular site visits where Plan and its partners meet at weekly basis with community leaders, community animators, child protection network and social work assistants to discuss any activity and targets based on standard project indicators to see to what extent each activity is achieved following discussion and meeting with partners to highlight on the progress, achievements, constraints and lessons learned.

Plan South Sudan will submit narrative and financial reports every quarter to UNDP. Also, Plan South Sudan would share disaggregated monthly reports with WASH cluster. Partners will be monitored on a regular on-going basis to ensure proper implementation of activities at the field level, with regular discussions to share concerns and any issues that might arise. At the end of the project an audit will be conducted by external consultants and will be attached with the final narrative and financial reports documenting the project expenditure versus actual.

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)
This contribution would be through the UNICEF core pipeline supplies once in April, 2013.	80,000

SECTION III:

LOGICAL FRAMEWORK				
CHF ref./CAP Code: SSD-13/WS/55951/5524		Project title: Improve Access to Sanitation and Hygiene for Vulnerable IDPs, Returnees and Host Communities in Jonglei State, South Sudan.		Organisation: Plan International, South Sudan
Overall Objective	Cluster Priority Activities for this CHF Allocation: To facilitate behavior change in acutely vulnerable communities in sanitation and hygiene practice through improved access to and use of sanitation facilities and targeted hygiene promotion focusing on women and children	Indicators of progress: <ul style="list-style-type: none"> • # People with access to sustained sanitation health and hygiene skills • #of people practicing good hygiene and health behavior 	How indicators will be measured: <ul style="list-style-type: none"> • Monthly progress reports • End of project report • Random sample survey 	
Purpose	CHF Project Objective: <ul style="list-style-type: none"> • Increased access to improved sanitation facilities for boys and girls in seven schools in Pibor County. • Enhanced capacity for displaced communities in sustainable sanitation and hygiene practices in Pibor County. • Increased access to sustained safe clean drinking water in Pibor County. 	Indicators of progress: <ul style="list-style-type: none"> • # People with access to latrine facilities. • # People demonstrating improved sanitation and hygiene practices. • # People with access to safe clean drinking water. 	How indicators will be measured: <ul style="list-style-type: none"> • School registers • Attendance lists of community mobilization meetings. • Data from local community leaders. • KAP survey • List of community members residing around 1Km of water point. 	Assumptions & risks: <ul style="list-style-type: none"> • The continuous inter-communal attacks will not escalate. • The roads would be accessible. • The cultural aspects of the communities to sanitation practices will not be a barrier.
Results	Results - Outcomes (intangible): <ul style="list-style-type: none"> • People practice knowledge on sustained sanitation and hygiene. • WASH Emergency Response team has enhanced capacity and skills to respond to escalation in emergencies. • School latrines are cleaned and maintained in hygienic conditions. • People practice hand washing after defecation and before eating or preparing food. 	Indicators of progress: <ul style="list-style-type: none"> • % People practicing knowledge on sustained sanitation and hygiene. • Capacity and skills in WASH emergency response. • # Clean and hygienic school latrines. • #People washing their hands after defecation and before eating or preparing food. 	How indicators will be measured: <ul style="list-style-type: none"> • Reports from women, men boys and girls of satisfaction with sanitary facilities and improvements in hygiene practices. • Detailed WASH emergency response contingency plan. • Observation of maintenance, cleaning and covering with lids of latrines. • Random sampling 	Assumptions & risks: <ul style="list-style-type: none"> • The continuous inter-communal attacks will not affect implementation. • The roads will be accessible.

<p>Immediate Results - Outputs (tangible):</p> <ul style="list-style-type: none"> • 7 Emergency school latrines constructed. • 2,214 people with access sustained hygiene latrine. • 1 Emergency WASH supplies storage facility established. • 160 Community Health Promoters (CHPs) volunteers trained. • 10 Members of WASH Emergency Response team have their capacity enhanced. • 140 Members of school health clubs trained on improved sanitation and hygiene practices. • 10, 600 persons have been trained on health and hygiene education to be shared with their families and community members. • 10 Existing dysfunctional boreholes rehabilitated. • 2,500 persons have sustained access safe clean drinking water. • 80 Members of community trained on management of water and sustainable sanitation. • 20 Members of community trained as village pump mechanics. 	<p>Indicators of progress:</p> <ul style="list-style-type: none"> • # Emergency school latrines constructed. • # Emergency WASH supplies storage facility established. • # Members of Community Health Promoters (CHPs) Volunteers trained. • # Members of WASH Emergency Response team with their capacities enhanced. • # Members of school health clubs trained on improved sanitation and hygiene practices. • # Persons trained on health and hygiene education to be shared with their families and communities. • # Existing dysfunctional boreholes rehabilitated. • # Persons with access to sustained safe clean drinking water. • # Community members trained on management of water and sustainable sanitation. • #of PUR sachets distributed • # Members of communities trained as Village hand pump mechanics. 	<p>How indicators will be measured:</p> <ul style="list-style-type: none"> • Project reports • Training attendance logs. • Assessment reports. • Field monitoring visit reports. • Monthly reports 	<p>Assumptions & risks:</p> <ul style="list-style-type: none"> • The security situation in the area remains stable. • Sites for latrine construction will not collapse due to rain. • Roads will be accessible. • Local construction materials will be easily available.
<p>Activities:</p> <ul style="list-style-type: none"> • Construction of 7 emergency school latrines with separate blocks for girls and boys with hand washing facilities. • Establishment of storage facility for emergency WASH supplies. • Training of Community Hygiene Promoters (CHPs) volunteers to propagate improved sanitation and hygiene practices. • Enhancing capacity of WASH Emergency Response team. • Formation and training of School Health Club members on improved sanitation and hygiene practices. • Conduct health and hygiene education sessions for girls, boys, women and men to be shared with their families and community members. • Rehabilitation of existing dysfunctional boreholes. • Training of members of communities on 	<p>Inputs:</p> <ul style="list-style-type: none"> • Project staff • Vehicles • Skilled Contractors • Construction materials and equipment • Resource persons • WASH supplies 		<p>Assumptions, risks and pre-conditions:</p> <ul style="list-style-type: none"> • Project staff are recruited in time. • The roads to the project sites are accessible. • Construction materials and equipment are available in the local market. • The security in the project location remains stable. • There are WASH supplies available in the core pipeline.

	water management and sustainable sanitation. <ul style="list-style-type: none"> • Training of village pump mechanics on hand pumps maintenance. • Distribution of water purification kits 			
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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 work plan must be outlined with reference to the quarters of the calendar year.

Activities	Q1/2013			Q2/2013			Q3/2013			Q4/2013			Q1/2014	
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb
Activity 1 Establish pipeline access process, for supply of WASH products, with Unicef		X	X											
Activity 2 Construction of seven emergency school latrines with separate blocks for girls and boys.		X	X	X	X									
Activity 3 Establishment of storage facility for emergency WASH supplies.		X	X	X										
Activity 4 Training of CHPs volunteers to propagate improved sanitation and hygiene practices.		X	X	X	X	X								
Activity 5 Enhancing capacity of WASH Emergency Response team in Pibor.		X	X	X										
Activity 6 Formation and training of School Health Club members on improved sanitation and hygiene practices.		X	X	X	X	X	X	X	X					
Activity 7 Conduct health and hygiene education sessions for girls, boys, women and men to be shared with their families and community members.		X	X	X	X	X	X	X	X					
Activity 8 Rehabilitation of existing dysfunctional boreholes.		X	X	X										
Activity 9 Training of members of communities on water management and sustainable sanitation.		X	X	X	X									
Activity 10 Training of village pump mechanics on hand pump maintenance.		X	X		X	X								
Activity 11 Community training and distribution of water purification kits		X	X	X	X	X								

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