

## South Sudan

### 2013 CHF Standard Allocation Project Proposal

*for CHF funding against Consolidated Appeal 2013*

**SECTION I:**

CAP Cluster	PROTECTION
<b>CHF Cluster Priorities for 2013 Second Round Standard Allocation</b>	
<p><b>Cluster Priority Activities for this CHF Round</b></p> <p><b>Emergency response (general):</b></p> <ul style="list-style-type: none"> <li>i) Rapid protection assessments to identify vulnerable persons and risks/gaps for response.</li> <li>ii) Enhance capacity and training of frontline responders (police, health workers, community networks etc.), relevant for both GBV and child protection</li> <li>iii) Coordination with UNMISS and UNISFA on Protection of Civilians initiatives</li> </ul> <p><b>GBV</b></p> <ul style="list-style-type: none"> <li>iv) Direct support and response services to GBV survivors, including immediate medical and psychosocial care (incl. PEP kits)</li> <li>v) GBV emergency response teams (establish, train)</li> <li>vi) Special Protection Units</li> </ul> <p><b>Child Protection</b></p> <ul style="list-style-type: none"> <li>vii) Prevention and response to unaccompanied and separated children Family Tracing and Reunification (FTR); Provision of temporary care arrangement for boys and girls.</li> <li>viii) Protection assistance to Children Associated with Armed Group and Armed Forces</li> <li>ix) Recreational and psycho-social support for children and community affected by emergency</li> </ul> <p><b>HLP</b></p> <ul style="list-style-type: none"> <li>x) Assist populations affected by displacement, incl. returnees and host communities, on access to land</li> <li>xi) Capacity development of formal and traditional authorities on land and property rights.</li> <li>xii) Collaborative dispute resolution mechanisms to solve conflicts among communities and/or individuals over access to land and/or natural resources</li> </ul> <p><b>Cross Cutting</b></p> <ul style="list-style-type: none"> <li>xiii) Mainstreaming HIV in intervention planning/implementation</li> <li>xiv) Targeted support for civil status documentation focused on persons with specific needs from conflict impacted populations and emergency returns</li> <li>xv) Continued support for populations in displacement</li> </ul>	<p><b>Cluster Geographic Priorities for this CHF Round</b></p> <ol style="list-style-type: none"> <li>1. Jonglei (all counties)</li> <li>2. Warrap (all counties)</li> <li>3. NBeG (all counties)</li> <li>4. Unity (all counties)</li> <li>5. Upper Nile (all counties)</li> <li>6. Central Equatoria State (Juba)</li> <li>7. Abyei</li> </ol>

**SECTION II**

<b>Project details</b>			
The sections from this point onwards are to be filled by the organization requesting CHF funding.			
<b>Requesting Organization</b>		<b>Project Location(s)</b>	
NHFD (Nile Hope)		<b>State</b>	<b>%</b>
		<i>County/ies (include payam when possible)</i>	
<b>Project CAP Code</b>	<b>CAP Gender Code</b>		
SSD-13/P-HR-RL/55120/R/8452	2 a	Jonglei	80
<b>CAP Project Title</b> <i>(please write exact name as in the CAP)</i>		Upper Nile	20
Providing Support to GBV survivors and strengthening referral systems to improve Gender Based Violence Prevention in Jonglei and Upper Nile states.			
<b>Total Project Budget requested in the in South Sudan CAP</b>	US\$ 600,500	<b>Funding requested from CHF for this project proposal</b>	
<b>Total funding secured for the CAP project (to date)</b>	US\$ 335,964	US\$ 133,914	
<b>Are some activities in this project proposal co-funded (including in-kind)?</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>(if yes, list the item and indicate the amount under column i of the budget sheet)</i>			

<b>Direct Beneficiaries</b> (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)		
	<b>Number of direct beneficiaries targeted in CHF Project</b>	<b>Number of direct beneficiaries targeted in the CAP</b>
Women:	587	6000 <sup>1</sup>
Girls:	675	2,210 (children) <sup>2</sup>
Men:	500	5,474 (men, boys, and youth) <sup>3</sup>
Boys:	675	
<b>Total:</b>	<b>2,437</b>	<b>13,684</b>

**Implementing Partner/s** (Indicate partner/s who will be sub-contracted if applicable and corresponding sub-grant amounts)  
none

<b>Contact details Organization's Country Office</b>	
Organization's Address	Off Main Munuki Rd, Juba, South Sudan
Project Focal Person	Hiram Kiongo, <a href="mailto:kiongohiram@yahoo.com">kiongohiram@yahoo.com</a> +211956763009, +211921381309
Country Director	Paul Biel <a href="mailto:paulbiel@yahoo.com">paulbiel@yahoo.com</a> Phone: +211955898163
Finance Officer	Name, Email, telephone

<b>Indirect Beneficiaries</b>
4,874
<b>Catchment Population (if applicable)</b>

**CHF Project Duration** (12 months max., earliest starting date will be Allocation approval date)  
Indicate number of months: 6 months (1 Oct 13 – 31 Mach 14)

<b>Contact details Organization's HQ</b>	
Organization's Address	
Desk officer	Name: Lazarus Kiir; Tel.: +211 911658478 Email: <a href="mailto:kiirlui2003@yahoo.com">kiirlui2003@yahoo.com</a>
Finance Officer	Jidayi Zaituni Email: <a href="mailto:jidayiz@rocketmail.com">jidayiz@rocketmail.com</a> Tel.: +211 911898747

**A. Humanitarian Context Analysis**  
Briefly describe (in no more than 300 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 population<sup>4</sup>

The counties are among the underserved areas in Jonglei and Upper Nile states with a population of 1375968<sup>5</sup>. IDPs in Jonglei state are estimated to be 120000<sup>6</sup>, 3067 refugees and 172183 returnees<sup>7</sup>. Uppernile has 118276 refugees, 92284 returnees; cattle rustlers have displaced 28000 people in 2013<sup>8</sup>. The host communities in these States are Dinka, Nuers, Shilluk, Murlei and Anyuak who depend mostly on cattle for livelihood and agriculture. The States are the most volatile and known for series of inter- and intra-communal fighting, presence of militia activities and floods which cause huge displacement of women, girls, boys, men, children and the elderly. Situation in Jonglei state is complex, as security has been for the whole of 2012 up to now been unpredictable due to inter-communal conflict, presence of non-armed actors and lack of general security and rule of law<sup>9</sup>. Sexual and Gender Based violence has been documented in Jonglei at an alarming regularity over the last 18 months<sup>10</sup>. Armed conflict has led to civilian displacements in the 2 states. In Akobo, the IDPs identified their protection concerns as; Inter-communal violence, Mistreatment by armed groups, Abduction (women and children), Forced recruitment (children), Forced displacement, Killing (Akobo East IRNA may 2013). Gender-based violence against women, girls, boys and men increases in conflict situations<sup>11</sup>. GBV concerns include domestic violence, sexual abuse of women and children, physical assault, rape by military forces or armed actors. Harmful traditional practices and propertization which force girls to leave or not access school and marry at 14-15 years of age e.g. early marriage, girl child compensation and forced marriage. Both women (82%) and men (81%) are highly tolerant of domestic violence in South Sudan.<sup>12</sup> Local justice systems often administer justice on marital and sexual crimes in a manner that reinforces the patriarchal power structure in community by imposing unfair cost to women and children<sup>13</sup>. The impact of GBV on women and girls goes largely unreported because of the deeply rooted cultures a fear of stigma.

**B. Grant Request Justification**  
Briefly describe (in no more than 300 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.

Akobo, Pigi, Fangak, and Nasir are acutely underserved areas with Gender Based Services. Nile Hope was the first NGO to offer such services through the CHF 2012 and 2013 round 1 allocation. With the completion of the funding season, there will be a Humanitarian service gap.

<sup>1</sup> Including girls

<sup>2</sup> CAP 2013 project sheet had no provision for aggregation

<sup>3</sup> CAP 2013 had no provision for aggregation

<sup>4</sup> 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.

<sup>5</sup> South Sudan 2008 census

<sup>6</sup> Internal Displacement Monitoring centre, July 2013

<sup>7</sup> IOM weekly statistical report, July 12- July 18 2013

<sup>8</sup> UN OCHA May 2013

<sup>9</sup> Jonglei Annual Humanitarian Report\_2012

<sup>10</sup> Internal Displacement Monitoring centre, July 2013

<sup>11</sup> IASC Gender Handbook in Humanitarian Action 2006.

<sup>12</sup> (Scott, Jennifer, MD, et al. GBV in South Sudan: An assessment of Inequality (2009-11). 2012).

<sup>13</sup> Challenges on accountability. Final report May 2013, PACT Sudan

CHF funds advanced to Nile hope will facilitate continued access to Health, Safety/Legal, Psychosocial services to GBV survivors in counties, which have no, or limited GBV service providers and prone protracted to emergencies characterized with conflicts and floods. The funds will be used in providing access to Multisectoral services, disseminate South Sudan and Human Rights laws to customary judges and police, strengthen the capacity of health care workers as well as the Ministry of Justice and Ministry of Gender Child and Social Welfare. Nile Hope has visible and operational presence on the ground and have gained community trust and support over the years. With headquarters in Akobo, field offices in Pigi, Nasir, Fangak, Bor, and Juba, the value added will be easy access to the areas of implementation. The counties are acutely underserved. Nile Hope will also maximize on the synergies within its programming in implementing the programs e.g education, Health, and WASH programs, which are also providing humanitarian interventions in Pigi, Fangak, Akobo and Nasir.

NHDF has received from CHF R1 allocation is the only secured funds until September 2013 and has not secured any complementary funding for Akobo, Pigi Fangak and Nasir .NHDF therefore anticipates funding gap to support the ongoing activities in these hotpot locations listed above. NHDF has the requisite infrastructure/material capacity, resources mobilization (compounds, personnel, speedboats, offices, computer equipment, internet facilities...), technical expertise and social capital (and local knowledge and networks) and previous track record of delivering, implement the CHF activities, and achieved desire results as prioritized by protection Cluster.

### C. Project Description (For CHF Component only)

#### i) Contribution to Cluster Priorities

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

The project will largely contribute to the clusters priority of Providing support to survivors of gender-based violence (GBV), strengthen referral systems and improve prevention of GBV, updating SOPs, participating in interagency rapid assessments, building the capacity of actors and supporting community support networks.

#### ii) Project Objective

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

The projects main objective is to provide/ Scale up the quality assistance and support accorded to GBV survivors through among other things strengthening the capacity of GBV actors, community support networks and improving referral pathways to improving prevention.

#### 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).

1. Conduct one stakeholders workshop and sensitization and awareness on GBV among GBV with 40 (25 Men, 15 women) community leaders, Administrative authority, Youth Leaders Religious Leaders, Women Leader and NGOs in Akobo and Pigi Counties
2. Conduct/ participate in interagency assessments in Akobo, Nasir, Fangak and Pigi counties.
3. Produce behavior change strategy and dissemination of behavior change messages through IEC materials, media and campaigns to reach 500 people ( 200 women, 100 girls, 100 men and 100 boys)
4. Integrate GBV medical management in the existing health systems in through ongoing mentorship and support of 10 health care workers (male and female) in Akobo on Clinical Management of Sexual Abuse.
5. Provide quality support Response to 20 GBV survivors using Multisectoral approach in Akobo, Nasir, Fangak and Pigi Counties.
6. Promoting access to justice through follow up training, building capacity of male and female police officers on GBV response 24 police officers in Pigi and Akobo Counties on GBV and human rights
7. Promoting access to justice through GBV and Human rights awareness workshops and trainings of 30 (male and female) community/ traditional authorities (chiefs, paramount chiefs, elders) in Akobo on GBV and human rights
8. Enhance effective response to GBV and support accorded to GBV survivors and incident monitoring through mentorship, follow- up trainings of 10 social/ case workers on GBVIMS and Multisectoral response
9. Supporting women groups and sensitization seminars, workshops in Akobo (20 women and girls )
10. Support/ establish/ train 2 community peace and GBV mentor existing systems in the community in Akobo and Pigi Counties.

#### iv). Cross Cutting Issues

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

NHDF's culture is that gender parity is considered in all the projects, equality and equity is observed among the staff and gender mainstreaming is emphasized in the recruitment processes. All the survivors regardless of who she/he is should be attended to without any discrimination. HIV/AIDS is generally mainstreamed in our projects and we always do our utmost not to unduly interfere with nature, especially when it comes to construction and rehabilitation initiatives.

#### v) Expected Result/s

Briefly describe (in no more than 100 words) the results you expect to achieve at the end of the CHF grant period.

- **Result 1** : Improved capacity of front line service providers (police officers, social workers, Traditional authorities ,community leaders and health care providers) to offer survivor centered services

- **Result 2 :** increased confidence in survivors to access GBV services from the frontline service providers
- **Result 3 :** Increased awareness about human/ women's rights, gender based violence and its consequences on the part of the population achieved through knowledge, behaviors and attitude survey, media, campaigns, workshops and trainings
- **Result 4:** Enhanced community support system through establishment and support of four existing community support systems.
- **Result 5:** Improved and reliable referral pathway and improved confidence in the psychologically challenged communities through SOP standardization, police trainings, Social workers capacity strengthening, and CMR trainings.

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.

<b>SOI (X)</b>	<b>#</b>	<b>Output Indicators</b> (Ensure the output indicators are consistent with the output indicators that will be used in the results framework section III of this project proposal).	<b>Target (indicate numbers or percentages)</b> (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.	GBV survivors reporting who receive relevant response services (legal, health, psychosocial, shelter and other available services) in line with standards for quality care	➤ 90% (18 total target )
X	2.	GBV survivors reporting who are referred to relevant response services (legal, health, psychosocial, shelter and other available services) in line with their needs and requests	>80%
X	3.	Frontline service providers trained on GBV response in crisis settings, who demonstrate increased knowledge based on pre- and post-evaluation	➤ 75%
	4.	Increased awareness on Human rights, South Sudan laws and GBV among the Police and traditional leaders/ community	<ul style="list-style-type: none"> <li>• 24 police officers</li> <li>• 30 traditional leaders/ community leaders</li> </ul>

#### 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.

#### 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)<sup>14</sup>.

#### D. Total funding secured for the CAP project

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

<b>Source/donor and date (month, year)</b>	<b>Amount (USD)</b>
CHF 1 <sup>st</sup> allocation ( March- September 2013)	270,964
UNICEF (January – July 2013)	40,722
<b>Pledges for the CAP project</b>	

<sup>14</sup> CHF 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.

## SECTION III:

The logical framework is a tool to present how the implementation of CHF funded activities and their results (outputs and outcomes) will contribute to achieving higher level humanitarian results (project and cluster objectives) and how these results will be measured.

Fill in the logical framework below for this project proposal ensuring the information provided is in accordance with the strategies and activities described in the narrative section of this proposal, in particular section C.

LOGICAL FRAMEWORK				
CHF ref./CAP Code: <u>SSD-13/P-HR-RL/55120</u>		Project title: <u>Providing Support to GBV survivors and strengthening referral systems to improve Gender Based Violence Prevention in Jonglei and Upper Nile states.</u>		Organisation: <u>Nile Hope</u>
Overall Objective	<p><b>Cluster Priority Activities for this CHF Allocation:</b>  <i>What are the Cluster Priority activities for this CHF funding round this project is contributing to:</i></p> <ul style="list-style-type: none"> <li>• Direct Support services to GBV survivors including medical, Psychosocial Care ( including Pep Kits</li> <li>• GBV emergency response team ( establish and train)</li> </ul>	<p><b>Indicators of progress:</b>  <i>What are the key indicators related to the achievement of the CAP project objective?</i></p> <ul style="list-style-type: none"> <li>• # of survivors supported</li> <li>• # of trainings on frontline service providers</li> </ul>	<p><b>How indicators will be measured:</b>  <i>What are the sources of information on these indicators?</i></p> <ul style="list-style-type: none"> <li>• GBVIMS reports</li> <li>• Training reports, attendance lists, photos</li> </ul>	
Purpose	<p><b>CHF Project Objective:</b>  <i>What are the specific objectives to be achieved by the end of this CHF funded project?</i></p> <ul style="list-style-type: none"> <li>• The projects main objective is to provide/ Scale up the quality assistance and support accorded to GBV survivors through among other things strengthening the capacity of GBV actors, community support networks and improving referral pathways to improving prevention.</li> </ul>	<p><b>Indicators of progress:</b></p> <ul style="list-style-type: none"> <li>• <i>What indicators will be used to measure whether the CHF Project Objectives are achieved. Indicators may be quantitative and qualitative</i></li> <li>• GBV survivors reporting GBV incidents and cases</li> <li>• GBV survivors reporting GBV incidents and cases</li> <li>• GBV survivors reporting who are referred to relevant response services (legal, health, psychosocial, shelter and other available services) in line with their needs and requests</li> <li>• Frontline service providers trained on GBV response in crisis settings, who demonstrate increased knowledge based on pre- and post-evaluation</li> </ul>	<p><b>How indicators will be measured:</b>  <i>What sources of information already exist to measure this indicator? How will the project get this information?</i></p> <ul style="list-style-type: none"> <li>• GBVIMS reports</li> <li>• training reports</li> <li>• Photos</li> </ul>	<p><b>Assumptions &amp; risks:</b>  <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></p> <ul style="list-style-type: none"> <li>• Conflict has subsided/ reduced</li> <li>• Resources are available on time for implementation</li> <li>• Logistics/ infrastructure will not be hampered by weather</li> <li>• economic stability i.e cost of fuel will have decreased</li> <li>• survivors will report cases</li> <li>• political stability will prevail</li> </ul>
Results	<p><b>Results - Outcomes (intangible):</b>  <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></p> <ul style="list-style-type: none"> <li>• Improved capacity of front line service providers (police officers, social workers, Traditional authorities ,community leaders and health care providers) to offer survivor centered services</li> <li>• increased confidence in survivors to access GBV services from the frontline service providers</li> </ul>	<p><b>Indicators of progress:</b>  <i>What are the indicators to measure whether and to what extent the project achieves the envisaged outcomes?</i></p> <ul style="list-style-type: none"> <li>• GBV survivors reporting GBV incidents and cases</li> <li>• GBV survivors reporting who are referred to relevant response services (legal, health, psychosocial, shelter and other available services) in line with their needs and requests</li> </ul>	<p><b>How indicators will be measured:</b>  <i>What are the sources of information on these indicators?</i></p> <ul style="list-style-type: none"> <li>• training reports</li> <li>• GBV information management system</li> <li>• periodic field report (weekly, bi-weekly,monthly)</li> <li>• photos</li> <li>• attendance lists</li> </ul>	<p><b>Assumptions &amp; risks:</b>  <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"> <li>• Conflict has subsided/ reduced</li> <li>• Resources are available on time for implementation</li> <li>• Logistics/ infrastructure will not</li> </ul>

<ul style="list-style-type: none"> <li>Increased awareness about human/ women's rights, gender based violence and its consequences on the part of the population achieved through knowledge, behaviors and attitude survey, media, campaigns, workshops and trainings</li> <li>Enhanced community support system through establishment and support of four existing community support systems.</li> <li>Improved and reliable referral pathway and improved confidence in the psychologically challenged communities through SOP standardization, police trainings, Social workers capacity strengthening, and CMR trainings.</li> </ul>	<ul style="list-style-type: none"> <li>Frontline service providers trained on GBV response in crisis settings, who demonstrate increased knowledge based on pre- and post-evaluation</li> </ul>		<p>be hampered by weather</p> <ul style="list-style-type: none"> <li>economic stability i.e cost of fuel will have decreased</li> <li>survivors will report cases</li> <li>political stability will prevail</li> </ul>
<p><b>Immediate-Results - Outputs (tangible):</b>  <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"> <li>Improved capacity of front line service providers (police officers, social workers, Traditional authorities ,community leaders and health care providers) to offer survivor centered services</li> <li>increased confidence in survivors to access GBV services from the frontline service providers</li> <li>Increased awareness about human/ women's rights, gender based violence and its consequences on the part of the population achieved through knowledge, behaviors and attitude survey, media, campaigns, workshops and trainings</li> <li>Enhanced community support system through establishment and support of four existing community support systems.</li> <li>Improved and reliable referral pathway and improved confidence in the psychologically challenged communities through SOP standardization, police trainings, Social workers capacity strengthening, and CMR trainings.</li> </ul>	<p><b>Indicators of progress:</b>  <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"> <li>GBV survivors reporting GBV incidents and cases</li> <li>GBV survivors reporting who are referred to relevant response services (legal, health, psychosocial, shelter and other available services) in line with their needs and requests</li> <li>Frontline service providers trained on GBV response in crisis settings, who demonstrate increased knowledge based on pre- and post-evaluation</li> </ul>	<p><b>How indicators will be measured:</b>  <i>What are the sources of information on these indicators?</i></p> <ul style="list-style-type: none"> <li>training reports</li> <li>GBV information management system</li> <li>periodic field report (weekly, bi-weekly,monthly)</li> <li>photos</li> <li>attendance lists</li> <li></li> </ul>	<p><b>Assumptions &amp; risks:</b>  <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"> <li>Conflict has subsided/ reduced</li> <li>Resources are available on time for implementation</li> <li>Logistics/ infrastructure will not be hampered by weather</li> <li>economic stability i.e cost of fuel will have decreased</li> <li>survivors will report cases</li> <li>political stability will prevail</li> </ul>

<p><b>Activities:</b>  <i>List in a chronological order the key activities to be carried out. Ensure that the key activities will result in the project outputs.</i></p> <ol style="list-style-type: none"> <li>1. Conduct one stakeholders workshop and sensitization and awareness on GBV among GBV with 40 (25 Men, 25 women) community leaders, Administrative authority, Youth Leaders Religious Leaders, Women Leader and NGOs in Akobo and Pigi Counties</li> <li>2. Conduct/ participate in interagency assessments in Akobo, Nasir, Fangak and Pigi counties.</li> <li>3. Produce behavior change strategy and dissemination of behavior change messages through IEC materials, media and campaigns to reach 500 people ( 200 women, 100 girls, 100 men and 100 boys)</li> <li>4. Integrate GBV medical management in the existing health systems in through ongoing mentorship and support of 10 health care workers (male and female) in Akobo on Clinical Management of Sexual Abuse.</li> <li>5. Provide quality support Response to 20 GBV survivors using Multisectoral approach in Akobo, Nasir, Fangak and Pigi Counties.</li> <li>6. Promoting access to justice through follow up training, building capacity of male and female police officers on GBV response 24 police officers in Pigi and Akobo Counties on GBV and human rights -20 per county</li> <li>7. Promoting access to justice through GBV and Human rights awareness workshops and trainings of 30 (male and female) community/ traditional authorities (chiefs, paramount chiefs, elders) in Akobo on GBV and human rights -15 per county</li> <li>8. Enhance effective response to GBV and support accorded to GBV survivors and incident monitoring through mentorship, follow- up trainings of 10 social/ case workers on GBVIMS and Multisectoral response</li> <li>9. Supporting women groups and sensitization seminars, workshops in Akobo and Pigi Counties (20 women and girls each county)</li> <li>1. Support/ establish/ train 2 community peace and GBV mentor existing systems in the community in Akobo and Pigi Counties.</li> </ol>	<p><b>Inputs:</b>  <i>What inputs are required to implement these activities, e.g. staff time, equipment, travel, publications costs etc. ?</i></p> <ul style="list-style-type: none"> <li>• Program Coordinator,</li> <li>• Gender &amp; Protection Coordinator</li> <li>• 2 Assistant Protection Officers,</li> <li>• 2 County Protection Officers</li> <li>• 2 Social / Case managers</li> <li>• Speed boat for transportation/fuel</li> <li>• IEC materials</li> <li>• Training materials</li> <li>• Car</li> <li>• 100% staff time required</li> </ul>		<p><b>Assumptions, risks and pre-conditions:</b>  <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"> <li>• Conflict has subsided/ reduced</li> <li>• Resources are available on time for implementation</li> <li>• Logistics/ infrastructure will not be hampered by weather</li> <li>• economic stability i.e cost of fuel will have decreased</li> <li>• survivors will report cases</li> <li>• political stability will prevail</li> </ul>
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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.

<b>Project start date:</b>	<b>01 October 2013</b>	<b>Project end date:</b>	<b>March 31 2014</b>
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Activities	Q3/2013			Q4/2013			Q1/2014			Q2/2014			Q3/2014		
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Activity 1 : Conduct one stakeholders workshop and sensitization and awareness on GBV among GBV with 40 (25 Men, 25 women) community leaders, Administrative authority, Youth Leaders Religious Leaders, Women Leader and NGOs in Akobo and Pigi Counties				x											
Activity 2 : Conduct/ participate in interagency assessments in Akobo and Pigi counties.				x	x	x	x	x							
Activity 3: Produce behavior change strategy and dissemination of behavior change messages through IEC materials, media and campaigns to reach 500 people ( 200 women,100 girls, 100 men and 100 boys)				x	x	x	x	x							
Activity 4 : Integrate GBV medical management in the existing health systems in through ongoing mentorship and support of 10 health care workers (male and female) in (Akobo and Pigi Counties) on Clinical Management of Sexual Abuse.				x	x	x	x	x							
Activity 5: Provide quality support Response to 20 GBV survivors using Multisectoral approach in Akobo and Pigi Counties.				x	x	x	x	x							
Activity 6: Promoting access to justice through follow up training, building capacity of male and female police officers on GBV response 24 police officers in Pigi and Akobo Counties on GBV and human rights -20 per county				x	x	x	x	x							
Activity 7 : Promoting access to justice through GBV and Human rights awareness workshops and trainings of 30 (male and female) community/ traditional authorities (chiefs, paramount chiefs, elders) Akobo and Pigi counties on GBV and human rights -15 per county				x	x	x	x	x							
Activity 8: Enhance effective response to GBV and support accorded to GBV survivors and incident monitoring through mentorship, follow- up trainings of 10 social/ case workers on GBVIMS and Multisectoral response				x	x	x	x	x							
Activity 9: Supporting women groups and sensitization seminars, workshops in Akobo and Pigi Counties (20 women and girls each county)				x	x	x	x	x							
Activity 10: Support/ establish/ train 2 community peace and GBV mentor existing systems in the community in Akobo and Pigi Counties.				x	x	x	x	x							
Activity 10: monitoring and reporting				x	x	x	x	x							
Finalize outstanding activities and preparation of reports									x						

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