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Project Proposal

COSV (Comitato di Coordinamento delle Organizzazione per il Servizio Volontario)			
Provision of protection related services to prevent and mitigate rights violations and GBV among women, men, girls and boys in IDPs settings and host communities in Merka urban area, Lower Shabelle			
CHF-DMA-0489-467			
Protection		Secondary Cluster	
Standard Allocation 1 (May 2013)		Project Duration	12 months
300,000.00			
CAP Code	SOM-13/P-HR-RL/56451	CAP Budget	941,458.00
CAP Project Ranking	A - HIGH	CAP Gender Marker	

	Men	Women	Total
Beneficiary Summary	Boys	Girls	Total
	Total		
Total beneficiaries include the following:			
Internally Displaced People/Returnees	27	864	891
People in Host Communities	115	1,216	1,331
Women of Child-Bearing Age	0	478	478
Staff (own or partner staff, authorities)	16	25	41

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FORMATION

Somalia is facing one of the worst humanitarian crises in the world today. 1/3 of Somalis is in need of humanitarian assistance and -as reported by May 2013 UHPCR fact sheet- the country is generating the 3rd highest number of refugees in the world. According to UNHCR data, as at 16th May 2013 there is an estimated number of 1,023,722 Somali refugees in neighboring countries, while over 1 million Somalis are internally displaced within the country, settled mainly in the South-Central region (803,000 IDPs in SCZ).With regard to SCZ, following the latest IDPs mapping issued by UNHCR in May 2013, the solely region of Lower Shabelle has 103,000 IDPs. Armed conflict, poverty and insecurity are among the main factors behind the cases of displacement. Moreover, Somalia's main rainy season (Gu), while bringing relief to dry conditions have led to flooding, crop damage and displacements. The most affected areas included parts of LS region. The Humanitarian Snapshot of April 2013 reported that around 10,000 people were displaced by floods in LS. Furthermore, on 27 August 2012 African Union and Somali troops captured the town of Marka which had been under Al-Shabab since 2008. However, despite the defeat of AS, militias, armed groups and AMISOM troupes are still widely present in Merka, and infra-clan fights heavily restarted after that AS militias were forced back, undermining the volatile security situation in the area and jeopardizing the safety of thousands of women, girls, children

Over 20 years of humanitarian work in Marka Town have provided COSV with a deep understanding of the local socio-cultural context. A rapid Protection assessment was done in May 2013 in the 6 IDP settlements of Buur Bishaaro, Shiirkole, Bufow, Keef, Dajuma, Gob Yarey as well as among host communities in Merka Town in response to the new displacements caused by the April's floods. The assessment revealed that total number of IDPs in the Merka town camps is approximately 4,620, majority being women and girls (1,552 women, 850 men, 665 girls, 628 boys).The survey was conducted mainly through interviews of Elders, camp leaders and Women groups.The main findings of the assessment concerned GBV.Most prevalent forms detected were forced/early marriages, domestic violence, sexual exploitation, rape, FGM. Particularly, the extent of rape and domestic violence was difficult to quantify but it was reported as being widespread due to the presence of armed groups in the area. According to UNFPA statistics, in IDPs settlements, 1/3 women can be victim of GBV. Over a number of 2,217 women and girls in the 6 IDP camps, there are approximately 665 people under high risk. Women & girls in the host communities of Merka face the same GBV risks, especially rapes. Merka hospital receives averagely 7 cases of GBV per month, the surrounding MCHs around 2 cases monthly. However, violations are highly under-reported because of lack of protection services and isolation & stigmatization faced by victims

3. Activities. List and describe the activities that your organization is currently implementing to address these needs
 COSV is currently running an integrated GBV & Health program in Mogadishu with the aim of preventing and mitigating GBV risks among women, men, girls and boys in 5 IDP settings in Zone K. In its Health, Nutrition, WASH, Education & Shelter Programs implemented in Lower Shabelle, Gedo and Benadir regions, COSV has always mainstreamed key protection issues while ensuring equal access to effective, safe and quality services to prevent morbidity & mortality. Beneficiaries are involved in health assessments, paying special attention to women and children and other vulnerable groups. Health workers operating for COSV provide basic education sessions - with a special focus on PLW and WCBA- which address key protection messages on GBV and the protection of women's children. Moreover, COSV health staff operating in health facilities with no psycho-emotional support is made aware of the nearest facility where this support is provided and referral procedures are put in place. The presence of unaccompanied minors is duly documented and registered by

in place, then identify the gaps (previous and new). Explain the specific needs of your target group(s) in detail. State how the needs assessment was conducted (who consulted whom, how and when?). List any baseline data

COSV staff in all the health facilities. In the implementation of WASH activities, COSV always assures that water sources are located in a visible location and not more than 500 meters from the settlement in order to avoid the risk of physical attacks. Sanitation facilities are designed to ensure privacy and safety. In COSV Education programs, the topic of GBV is always included in schools education sessions which involve pupils & teachers.

LOGICAL FRAMEWORK

Objective 1	Expand prevention and response to GBV risks and rights violations and strengthen the protective environment of women, girls, men and boys among IDPs settlements and host communities in Merka urban area through provision of protection-related services.			
Outcome 1	Increased access to gender sensitive emergency treatment through provision of medical services and emotional support and the establishment of an efficient referral system.			
Activity 1.1	Equipping Merka regional hospital, the 5 MCHs of Merka town, Shalambood, Jannale, Golweyn and Km50 and 2 mobile teams (composed by medical staff of the MCHs) for first GBV medical intervention, first emotional support and referral services in order to provide comprehensive assistance for GBV survivors. Set up of an integrated GBV & VCT Gender recovery center within Merka regional hospital to ensure confidentiality, privacy and proper case management for GBV survivors.			
Activity 1.2	Implementation of 2 trainings (an initial training and a refresher one) of 11 medical staff (2 from the Emergency department and 3 from the Maternity ward of Merka regional hospital, 1 VCT counselor and 5 health staff from the 5 MCHs - 90% females and 10% males) on GBV, Clinical Management of Rape, provision of emotional support to GBV survivors. Implementation of 2 TOTs (an initial training and a refresher one) for 10 social workers (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities. 2 trainings (an initial training and a refresher one) carried out by the TOTs for 20 more social workers in Merka urban area (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities.			
Activity 1.3	Implementation of GBVIMS training for a total number of 13 staff, specifically: 1 medical staff from the Emergency department and 1 from the Maternity ward of Merka regional hospital, 5 health staff from the 5 MCHs (90% females and 10% males) and 6 social workers (50% male and 50% female).			
Indicators for outcome 1		Cluster	Indicator description	Target
	Indicator 1.1	Health	Number of health facilities supported	6
	Indicator 1.2	Protection	Number of medical staff successfully trained and able to respond to protection violations. Number of Social Workers trained and able to deliver psychosocial support to the target communities.	41
	Indicator 1.3	Protection	Number of health staff and Social Workers trained on GBVIMS	13
Outcome 2	Dignity restored and livelihood opportunities increased with gender sensitive livelihood support and vocational and life skills for HHs with GBV survivors, GBV survivors and other especially vulnerable displaced groups among 6 IDPs settlements and host communities in Merka urban area.			
Activity 2.1	Distribution of 100 dignity kits to women and girls victims of rights violations and provision of gender sensitive livelihood opportunities and small businesses to 40 GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHs within IDPs settlements and host communities in Merka urban area.			
Activity 2.2	Training in vocational, life and business skills for 40 beneficiaries of livelihood opportunities and small businesses.			
Activity 2.3	Set-up of a distribution monitoring and post-monitoring system to follow up each of the 40 GBV survivors, vulnerable women and vulnerable HHs and ensure their real capacity to make a living and face reduced levels of violence.			
Indicators for outcome 2		Cluster	Indicator description	Target
	Indicator 2.1	Protection	Number and location of people facing specific protection risks (data disaggregated by age and gender) provided with productive livelihood opportunities	40
	Indicator 2.2	Protection	Number of vulnerable people and HHs acquiring vocational, business and life skills.	40
	Indicator 2.3	Protection	80% of the 40 GBV survivors, vulnerable women or vulnerable HHs identified are able to earn a living on their own 5 months after the training and the set up of the livelihood activities.	32
Outcome 3				
Activity 3.1				
Activity 3.2				
Activity 3.3				
Indicators for outcome 3		Cluster	Indicator description	Target
	Indicator 3.1			0
	Indicator 3.2			0
	Indicator 3.3			0

WORK PLAN

Project workplan for activities defined in the Logical framework	Activity Description	Month 1-2	Month 3-4	Month 5-6	Month 7-8	Month 9-10	Month 11-12
	Activity 1.1 Equipping Merka regional hospital, the 5 MCHs of Merka town, Shalambood, Jannale, Golweyn and Km50 and 2 mobile teams (composed by medical staff of the MCHs) for first GBV medical intervention, first emotional support and referral services in order to provide comprehensive assistance for GBV survivors. Set up of an integrated GBV & VCT Gender recovery center within Merka regional hospital to ensure confidentiality, privacy and proper case management for GBV survivors.	X	X	X	X	X	X

Activity 1.2 Implementation of 2 trainings (an initial training and a refresher one) of 11 medical staff (2 from the Emergency department and 3 from the Maternity ward of Merka regional hospital, 1 VCT counselor and 5 health staff from the 5 MCHs - 90% females and 10% males) on GBV, Clinical Management of Rape, provision of emotional support to GBV survivors. Implementation of 2 TOTs (an initial training and a refresher one) for 10 social workers (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities. 2 trainings (an initial training and a refresher one) carried out by the TOTs for 20 more social workers in Merka urban area (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities.	X								X				
Activity 1.3 Implementation of GBVIMS training for a total number of 13 staff, specifically: 1 medical staff from the Emergency department and 1 from the Maternity ward of Merka regional hospital, 5 health staff from the 5 MCHs (90% females and 10% males) and 6 social workers (50% male and 50% female).	X												
Activity 2.1 Distribution of 100 dignity kits to women and girls victims of rights violations and provision of gender sensitive livelihood opportunities and small businesses to 40 GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHS within IDPs settlements and host communities in Merka urban area.			X	X	X	X	X	X	X	X	X	X	X
Activity 2.2 Training in vocational, life and business skills for 40 beneficiaries of livelihood opportunities and small businesses.				X	X	X	X	X	X	X	X	X	X
Activity 2.3 Set-up of a distribution monitoring and post-monitoring system to follow up each of the 40 GBV survivors, vulnerable women and vulnerable HHS and ensure their real capacity to make a living and face reduced levels of violence.													X
Activity 3.1													
Activity 3.2													
Activity 3.3													

M & E DETAILS

Activity Description	M & E Tools to use	Means of verification	Month (s) when planned M & E will be done												
			1	2	3	4	5	6	7	8	9	10	11	12	
Activity 1.1 Equipping Merka regional hospital, the 5 MCHs of Merka town, Shalambod, Jannale, Golweyn and Km50 and 2 mobile teams (composed by medical staff of the MCHs) for first GBV medical intervention, first emotional support and referral services in order to provide comprehensive assistance for GBV survivors. Set up of an integrated GBV & VCT Gender recovery center within Merka regional hospital to ensure confidentiality, privacy and proper case management for GBV survivors.	<ul style="list-style-type: none"> - Contact details - Data collection - Field visits - GPS data - Other - Photo with or without GPS data - Remote Call Monitoring - Verification 	-Key Hospital & MCHs staff contact details - Documentation related to the delivery of Pep kits (waybills, delivery notes, etc.) -Hospital, MCHs and mobile teams data, registers, drug consumption reports -Monitoring missions of Cosv manager (international staff, Nairobi based) and monitoring&supervision reports of field coordinator (national staff) -GPS coordinates of Merka Hospitals and the 5 MCHs - Remote management from Cosv regional office (e-mails, calls, reports, etc).	X	X	X	X	X	X	X	X	X	X	X	X	X
Activity 1.2 Implementation of 2 trainings (an initial training and a refresher one) of 11 medical staff (2 from the Emergency department and 3 from the Maternity ward of Merka regional hospital, 1 VCT counselor and 5 health staff from the 5 MCHs - 90% females and 10% males) on GBV, Clinical Management of Rape, provision of emotional support to GBV survivors. Implementation of 2 TOTs (an initial training and a refresher one) for 10 social workers (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities. 2 trainings (an initial training and a refresher one) carried out by the TOTs for 20 more social workers in Merka urban area (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities.	<ul style="list-style-type: none"> - Contact details - Photo with or without GPS data - Remote Call Monitoring - Verification 	-TORs facilitators - Trainings reports (with pictures, pre-post test and training's follow-up and action plan set up by the trainings' facilitator) -Attendance lists with trainees' signatures and contact details -Trainings' certificates - Report on effectiveness of the first training after the refresher one with recommendations - Follow up on trainings' organization and implementation from Cosv regional office (e-mails, calls, etc.)	X	X					X	X					
Activity 1.3 Implementation of GBVIMS training for a total number of 13 staff, specifically: 1 medical staff from the Emergency department and 1 from the Maternity ward of Merka regional hospital, 5 health staff from the 5 MCHs (90% females and 10% males) and 6 social workers (50% male and 50% female).	<ul style="list-style-type: none"> - Contact details - Data collection - Photo with or without GPS data - Remote Call Monitoring - Verification 	-TORs facilitator - Trainings reports (with pictures and pre-post test if needed) - Attendance lists with trainees' signatures and contact details - Trainings' certificates - Monitoring and follow	X	X			X			X				X	

		up on effectiveness of the training: monitoring the use of the GBVIMS by the field supervisor and reports of additional on the job trainings when needed - Follow up on trainings' organization and implementation from Cosv regional office (phone calls, e-mails, skype, etc.)																	
Activity 2.1 Distribution of 100 dignity kits to women and girls victims of rights violations and provision of gender sensitive livelihood opportunities and small businesses to 40 GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHs within IDPs settlements and host communities in Merka urban area.	- 3rd party monitoring - Biometry with fingerprint - Contact details - Distribution monitoring - Field visits - Individual interview - Photo with or without GPS data - Post Distribution Monitoring - Remote Call Monitoring - Verification	-Reports of health staff and social workers on the selection of the beneficiaries -List of beneficiaries of the dignity kits with signatures and/or fingerprints and contact details -Procurement documents for the kits and the livelihood assets -3rd part monitoring: Distribution and post distribution monitoring reports with pictures -Monitoring missions of Cosv manager (Nairobi based, international staff) and monitoring of field coordinator (national staff) - Interviews with a sample of beneficiaries of the livelihood opportunities. -Follow up on activity implementation from Cosv regional office (phone calls, e-mails, reports from the field, etc.).		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Activity 2.2 Training in vocational, life and business skills for 40 beneficiaries of livelihood opportunities and small businesses.	- 3rd party monitoring - Contact details - Photo with or without GPS data - Post Distribution Monitoring - Remote Call Monitoring - Verification	-TORs facilitators - Trainings reports (with pictures, pre-post test and training's follow-up and action plan set up by the trainings' facilitator) -Attendance lists with trainees' signatures and contact details -Trainings' certificates - Follow up on trainings' organization and implementation from Cosv regional office (phone calls, e-mails, reports from the field, etc.). - 3rd part monitoring: the Post-monitoring distribution report will also evaluate the effectiveness of the trainings implemented for the beneficiaries of the livelihood opportunities. - Follow up on trainings' organization and implementation from Cosv regional office (e-mails, calls, etc.)				X	X	X	X	X	X	X	X	X	X	X	X	X	
Activity 2.3 Set-up of a distribution monitoring and post-monitoring system to follow up each of the 40 GBV survivors, vulnerable women and vulnerable HHs and ensure their real capacity to make a living and face reduced levels of violence.	- 3rd party monitoring - Post Distribution Monitoring	-Post monitoring report and comprehensive analysis (with pictures) of the findings																X	X
Activity 3.1																			
Activity 3.2																			
Activity 3.3																			

OTHER INFORMATION

Coordination with other Organizations in project area	Organization	Activity
	1. IIDA	During the project implementation, a strong coordination will be created between Cosv GBV program and the Child Protection program that will be carried out by IIDA. Specifically, all children in need identified by IIDA will be referred towards COSV supported health facilities (including Merka Hospital), where COSV health staff and COSV Social Workers will ensure proper medical and PSS care, in-line with services provided under this project.
Gender theme support	Yes	
Outline how the project supports the gender theme	<p>The project ensures a holistic, gender and age diversity sensitive protection response to the risks faced by women, men, girls and boys in the 6 IDP settings of Keef, Baylow, Jujuma, Shiirkolo, Buur Bishaarow and Gob Yerrey and Merka urban. Gender-based violence is one of the main issues addressed by the present intervention. Merka regional hospital and 5 MCHs located within Merka will be fully equipped in order to mitigate the exposure to GBV for women and girls and provide a first rapid response to all the victims (included men and boys) of any harmful act perpetrated against them. No disability discrimination will be allowed and all the beneficiaries will have equal right to be involved in the services provided by the project. Throughout the project implementation, women and men will be given the same rights and opportunities: gender sensitive livelihood opportunities and small businesses will be provided to 40 GBV survivors, vulnerable women or vulnerable HHs (including HHs with separated or unaccompanied children or orphans, female or widow headed HHs and HHs with six or more members or with four children of school age), together with a training in vocational, business and life skills. In terms of staff, gender balance will be always taken into consideration: medical staff will be 90% females and 10% males, while social workers will be 50% males and 50% females, in order to address in the best way women and children related issues. All the staff, regardless its gender, will share equal levels of remuneration. The inter-sector strategy and the integration of the present proposal with a health, HIV and education program will take into account issues identified in other sectors that may affect the condition and the safety of the women, men, girls and boys under risk. An integrated GBV & VCT Gender recovery center will be established within Merka regional hospital (a room has been already identified for this purpose) in order to integrate GBV & HIV programs and ensure confidentiality, privacy and proper case management. Maternal and child health services already available in Merka hospitals and the 5 MCHs will guarantee a proper and comprehensive level of care for women and children.</p>	
Select (tick) activities that supports the gender theme	<p>Activity 1.1: Equipping Merka regional hospital, the 5 MCHs of Merka town, Shalambood, Jannale, Golweyn and Km50 and 2 mobile teams (composed by medical staff of the MCHs) for first GBV medical intervention, first emotional support and referral services in order to provide comprehensive assistance for GBV survivors. Set up of an integrated GBV & VCT Gender recovery center within Merka regional hospital to ensure confidentiality, privacy and proper case management for GBV survivors.</p> <p>Activity 1.2: Implementation of 2 trainings (an initial training and a refresher one) of 11 medical staff (2 from the Emergency department and 3 from the Maternity ward of Merka regional hospital, 1 VCT counselor and 5 health staff from the 5 MCHs - 90% females and 10% males) on GBV, Clinical Management of Rape, provision of emotional support to GBV survivors. Implementation of 2 TOTs (an initial training and a refresher one) for 10 social workers (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities. 2 trainings (an initial training and a refresher one) carried out by the TOTs for 20 more social workers in Merka urban area (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities.</p> <p>Activity 1.3: Implementation of GBVIMS training for a total number of 13 staff, specifically: 1 medical staff from the Emergency department and 1 from the Maternity ward of Merka regional hospital, 5 health staff from the 5 MCHs (90% females and 10% males) and 6 social workers (50% male and 50% female).</p> <p>Activity 2.1: Distribution of 100 dignity kits to women and girls victims of rights violations and provision of gender sensitive livelihood opportunities and small businesses to 40 GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHs within IDPs settlements and host communities in Merka urban area.</p> <p>Activity 2.2: Training in vocational, life and business skills for 40 beneficiaries of livelihood opportunities and small businesses.</p> <p>Activity 2.3: Set-up of a distribution monitoring and post-monitoring system to follow up each of the 40 GBV survivors, vulnerable women and vulnerable HHs and ensure their real capacity to make a living and face reduced levels of violence.</p> <p>Activity 3.1:</p> <p>Activity 3.2:</p> <p>Activity 3.3:</p>	

BUDGET

1.1 Supplies, commodities, equipment and transport	1.1.1 Supplies (materials and goods)								
	Code	Budget Line Description	Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF	% of CHF Total
		Set-up of an integrated GBV & VCT Gender recovery center within Merka regional hospital (provision of furniture and supplies)	2042	1	1	2,042.00	0.00	2,042.00	
		Dignity kits	64.8	100	1	6,480.00	0.00	6,480.00	
		Livelihood assets (breakdown attached)	500	40	1	20,000.00	0.00	20,000.00	
		Subtotal Supplies				28,522.00	0.00	28,522.00	10.2
	1.1.2 Transport and Storage								
	Code	Budget Line Description	Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF	% of CHF Total
		Freight (Cost for Transport of drugs procured by UNICEF to project sites in Somalia)	3000	1	1	3,000.00	0.00	3,000.00	
		Vehicle rental for project management and monitoring	1500	1	12	18,000.00	12,000.00	6,000.00	
	Fuel for car	200	1	12	2,400.00	0.00	2,400.00		
	Car Maintenance	200	1	12	2,400.00	400.00	2,000.00		
	International Flights (Return AirTicket NRB-MOGA for 2 passengers, 4 times over the project period)	550	2	4	4,400.00	0.00	4,400.00		
	Subtotal Transport and Storage				30,200.00	12,400.00	17,800.00	6.3	

1.2 Personnel (staff, consultants, travel and training)	1.2.1 International Staff								
	Code	Budget Line Description	Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF	% of CHF Total
		Programme Coordinator (50%)	7500	0.5	12	45,000.00	32,900.00	12,100.00	
		Programme Administrator (25%)	7300	0.25	12	21,900.00	13,000.00	8,900.00	
	Subtotal International Staff					66,900.00	45,900.00	21,000.00	7.5
1.2.2 Local Staff	1.2.2 Local Staff								
	Code	Budget Line Description	Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF	% of CHF Total
		Admin finance officer (25%)	2500	0.5	12	15,000.00	8,000.00	7,000.00	
	Subtotal Local Staff					15,000.00	8,000.00	7,000.00	2.5
	1.3 Training of Counterparts	Code	Budget Line Description	Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF
		2 trainings (an initial training and a refresher one) of 11 medical staff (2 from the Emergency department and 3 from the Maternity ward of Merka regional hospital, 1 VCT counselor and 5 health staff from the 5 MCHs - 90% females and 10% males) on GBV, Clinical Management of Rape, provision of emotional support to GBV victims.	26812	1	1	26,812.00	0.00	26,812.00	
		2 TOTs (an initial training and a refresher one) for 10 Social Workers (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities. 2 trainings (an initial training and a refresher one) carried out by the TOTs for 20 more social workers in Merka urban area (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities.	29590	1	1	29,590.00	0.00	29,590.00	
		GBVIMS training for a total number of 13 staff, specifically: 1 medical staff from the Emergency department and 1 from the Maternity ward of Merka regional hospital, 5 health staff from the 5 MCHs (90% females and 10% males) and 6 social workers (50% male and 50% female).	8993	1	1	8,993.00	0.00	8,993.00	
		Training in vocational, life and business skills for 40 beneficiaries of livelihood opportunities and small businesses.	9610	1	1	9,610.00	0.00	9,610.00	
Subtotal Training of Counterparts					75,005.00	0.00	75,005.00	26.8	
1.4 Contracts (with implementing partners)	Code	Budget Line Description	Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF	% of CHF Total
		Nurses GBV focal point in Merka hospital and 5 MCHs	260	11	12	34,320.00	18,720.00	15,600.00	
		Social Workers	200	30	12	72,000.00	0.00	72,000.00	
		Monitoring: Livelihood assets Distribution Monitoring and post monitoring system	4000	1	2	8,000.00	0.00	8,000.00	
		Supervisor GBV team and M&E officer	1500	1	12	18,000.00	5,300.00	12,700.00	
		DSA for Programme Manager and M&E officer during monitoring missions to project sites (for an estimated total of 20 days over the project period)	200	2	20	8,000.00	5,000.00	3,000.00	
		Security during M&E missions (cost for an Escort a day for an estimated total of 20 days)	500	1	20	10,000.00	5,000.00	5,000.00	
	Subtotal Contracts					150,320.00	34,020.00	116,300.00	41.5
1.5 Other Direct Costs	Code	Budget Line Description	Unit Cost	Units	Timeframe	Amount(USD)	Organization	CHF	% of CHF Total
		Stationary and office materials	600	1	12	7,200.00	3,000.00	4,200.00	
		Rent	1600	1	12	19,200.00	14,800.00	4,400.00	
		Communications	600	1	12	7,200.00	5,800.00	1,400.00	
		Utilities	300	2	12	7,200.00	4,800.00	2,400.00	
		Bank Transfer Costs (2% of the project direct costs)	5920	1	1	5,920.00	3,573.00	2,347.00	
	Subtotal Other Direct Costs					46,720.00	31,973.00	14,747.00	5.3
TOTAL						412,667.00	132,293.00	280,374.00	
2.0 Indirect Costs					Amount(USD)	Organization	CHF	% of CHF Total	

	Indirect Costs				29,625.00	9,999.00	19,626.00	6.9999
GRAND TOTAL					442,292.00	142,292.00	300,000.00	100.0

Other sources of funds

Description	Amount	%
Organization	142,292.00	47.43
Community	0.00	0.00
CHF	300,000.00	100.00
Other Donors	a)	0.00
	b)	0.00
TOTAL	300,000.00	

LOCATIONS

Region	District	Location	Activity	Beneficiary Description	Number	Latitude	Longitude	P.Code
Lower Shabelle	Marka	Marka	Equipping Merka regional hospital, the 5 MCHs of Merka town, Shalambood, Jannale, Golweyn and Km50 and 2 mobile teams (composed by medical staff of the MCHs) for first GBV medical intervention, first emotional support and referral services in order to provide comprehensive assistance for GBV survivors. Set up of an integrated GBV & VCT Gender recovery center within Merka regional hospital to ensure confidentiality, privacy and proper case management for GBV survivors.	IDPs from 6 IDPs settlements of Buur Bishaaro, Shiirkole, Bufow, Keef, Dajuma, Gob Yarey and host communities in Merka urban.	2129	1.71305	44.76388	NA-3810-G28-001
Lower Shabelle	Marka	Marka	Implementation of 2 trainings (an initial training and a refresher one) of 11 medical staff (2 from the Emergency department and 3 from the Maternity ward of Merka regional hospital, 1 VCT counselor and 5 health staff from the 5 MCHs - 90% females and 10% males) on GBV, Clinical Management of Rape, provision of emotional support to GBV survivors. Implementation of 2 TOTs (an initial training and a refresher one) for 10 social workers (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities. 2 trainings (an initial training and a refresher one) carried out by the TOTs for 20 more social workers in Merka urban area (50% male and 50% female) on GBV information, prevention and awareness and delivery of psychosocial support to the target communities.	Staff from the Emergency department and Maternity ward of Merka regional hospital, 1 VCT counselor from Merka regional hospital, health staff from 5 MCHs, Social Workers.	41	1.71305	44.76388	NA-3810-G28-001
Lower Shabelle	Marka	Marka	Implementation of GBVIMS training for a total number of 13 staff, specifically: 1 medical staff from the Emergency department and 1 from the Maternity ward of Merka regional hospital, 5 health staff from the 5 MCHs (90% females and 10% males) and 6 social workers (50% male and 50% female).	Staff from the Emergency department and Maternity ward of Merka regional hospital, 1 VCT counselor from Merka regional hospital, health staff from 5 MCHs, Social Workers.	13	1.71305	44.76388	NA-3810-G28-001
Lower Shabelle	Marka	Marka	Distribution of 100 dignity kits to women and girls victims of rights violations and provision of gender sensitive livelihood opportunities and small businesses to 40 GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHs within IDPs settlements and host communities in Merka urban area.	GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHs.	140	1.71305	44.76388	NA-3810-G28-001
Lower Shabelle	Marka	Marka	Training in vocational, life and business skills for 40 beneficiaries of livelihood opportunities and small businesses.	GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHs.	40	1.71305	44.76388	NA-3810-G28-001
Lower Shabelle	Marka	Marka	Set-up of a distribution monitoring and post-monitoring system to follow up each of the 40 GBV survivors, vulnerable women and vulnerable HHs and ensure their real capacity to make a living and face reduced levels of violence.	GBV survivors, vulnerable women (non GBV survivors) and/or vulnerable HHs	40	1.71305	44.76388	NA-3810-G28-001
TOTAL					2,403			

DOCUMENTS

Document Description

1. Content Post Rape treatment kits procured through UNFPA
2. Details of cost and content Dignity kits
3. Quotation GPS camera
4. Breakdown of costs set up Gender recovery center_budget 1.1.1.1
5. Breakdown of costs for budget lines 1.1.2.1 - 1.1.2.3 - 1.1.2.4 - 1.1.2.5

6. Breakdown of costs for project training sessions - Budget lines 1.3.1 - 1.3.2 - 1.3.3 - 1.3.4

7. Breakdown of costs for budget lines 1.5.1 - 1.5.3 - 1.5.4

8. Breakdown of costs for Livelihood Assets_budget 1.1.1.3

9. Breakdown of costs for dignity kits_budget line 1.1.1.2

10. Breakdown of costs for Third part Monitoring - Budget line 1.4.3