

South Sudan 2014 CHF Standard Allocation Project Proposal

for CHF funding against Consolidated Appeal 2014

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

CHF Cluster Priorities for 2014 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 2014.

Cluster Priority Activities for this CHF Round

Life-saving emergency WASH support in response to current humanitarian crisis in South Sudan

Cluster Geographic Priorities for this CHF Round

Counties affected by current conflict situation which lead to major displacements of people in particular

- CEQ: Juba Town/County
- Jonglei: Bor Town/County
- UPN: Malakal Town/County
- Unity: Benitu Town/County
- Lakes: Awerial County

SECTION II

Project details

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

Requesting Organization

Medair

Project CAP Code

SSD-14/WS/60680

CAP Gender Code

2a

CAP Project Title *(please write exact name as in the CAP)*

Access to safe water and improved sanitation and hygiene practices for emergency affected and chronically vulnerable communities

Total Project Budget requested in the in South Sudan CAP

US\$ 3,000,921

Total funding secured for the CAP project *(to date)*

Project Location(s) - list State and County (payams when possible) where CHF activities will be implemented. If the project is covering more than one State please indicate percentage per State

State	%	County/ies <i>(include payam when possible)</i>
Upper Nile	40%	Malakal, Renk and any other county requiring emergency assistance
Lakes	20%	Awerial and any county requiring emergency assistance
Central Equatoria	20%	Juba and any county requiring emergency assistance
Any other of the 7 states	20%	Any county requiring emergency assistance

Funding requested from CHF for this project proposal

US\$ 600,000

Are some activities in this project proposal co-funded

(including in-kind)? Yes No *(if yes, list the item and indicate the amount under column i of the budget sheet)*

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

	Number of direct beneficiaries targeted in CHF Project	Number of direct beneficiaries targeted in the CAP
Women:	7,200	25,878
Girls:	3,600	21,565
Men:	3,600	17,592
Boys:	3,600	21,565
Total:	18,000	86,600

Indirect Beneficiaries / Catchment Population *(if applicable)*

Targeted population:

IDPs, Returnees, Host communities, Refugees

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

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

N/A

Indicate number of months: 6 (1 Jan – 30 Jun 2014)

Contact details Organization's Country Office

Organization's Address Hai Matara,
Airport View

Contact details Organization's HQ

Organization's Address Chemin du Croset 9
CH-1024 Ecublens

	Juba
Project Focal Person	Shelly Slemp, dcd1-sds@medair.org +211 956 937 092
Country Director	Caroline Boyd, cd-southsudan@medair.org , +211 924 143 746
Finance Manager	Lisa Poulsen, finance-southsudan@medair.org , +211 911 383 615
Monitoring & Reporting focal person	Evelyn Winkler funding-southsudan@medair.org +211 927 058 148

	Switzerland
Desk officer	Anne Reitsema anne.reitsema@medair.org +41 (0) 21 694 35 35
Finance Officer	Ann Lomole Budget-HQ-FIN@medair.org +41 (0) 21 694 35 35

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 population¹

The humanitarian situation in South Sudan has deteriorated significantly, presenting an unprecedented scale of displacement and needs following the outbreak of violence in December 2013. An estimated 189,000 people are currently displaced across the country including 62,000 people seeking refuge in UN bases, with trends indicating continued displacement as armed violence continues. A multi-sector humanitarian response operation is being coordinated from Juba with aid agencies scaling up assistance wherever security allows (OCHA, 04/01/2014). With extremely low baseline indicators to begin with, acute WASH needs triggered by the conflict and displacement and further diminished capacity of the state in South Sudan, the need for international and national humanitarian actors to respond is critical.

The areas most affected by the conflict and consequently sheltering people internally displaced are Central Equatoria, Jonglei, Unity and Upper Nile State where civilians are seeking protection in the UN bases in the capital towns as well as Lakes State where people have settled in Awerial County fleeing the fighting from Jonglei. Life-saving WASH needs include improved sanitation and increased clean water provision in the areas densely populated by IDPs to prevent disease outbreaks.

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.

Medair's emergency response programme responds to acute emergencies throughout South Sudan, targeting the most vulnerable and at-risk populations and has experience in responding to large scale displacement situations in the past, most recently to the influx of refugees in Maban County or returnees in Renk County. Due to the deteriorating security situation Medair's international WASH staff members have been evacuated in mid December. One national WASH staff member was able to support the immediate emergency response in Juba in cooperation with Oxfam and we were able to release critical WASH supplies from our stock via the WASH Cluster. Medair is currently planning to re-deploy international staff members at the earliest possible including additional human resources employed on a short term basis to support emergency WASH needs across the country. Medair is committed to mobilise 2-3 WASH emergency response teams (depending on the size of the intervention) who can be deployed in any location in the country in cooperation with the WASH cluster and other partners.

Other than Juba, Medair has had recent presence in two current sites that have seen large scale displacement: Malakal and Awerial, hence Medair is open to consider a response to emergency WASH needs in both these locations.

Medair has a warehouse with emergency stock and supplies in Juba which can be quickly mobilized to support its emergency WASH response in the country.

CHF funding will help to ensure that Medair is able to quickly mobilize 2-3 emergency response teams in support of the current WASH response plan in South Sudan providing life-saving WASH services to emergency affected populations. An additional funding application has been put forward to ECHO.

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.

CHF funding will be used to contribute to life-saving emergency WASH support in response to the current IDP situation in South Sudan including the set-up of emergency water treatment units and rehabilitation of existing water points, construction of emergency communal latrines, distribution of hygiene kits, distribution of WASH NFIs and the initiation of emergency hygiene promotion training

ii) Project Objective

State the objective/s of this CHF project and how it links to your CAP project (one specific geographical area, one set of activities or kick start/support the overall project). Objective/s should be Specific, Measurable, Achievable, Relevant and Time-bound (SMART)

To reduce morbidity and mortality resulting from waterborne diseases by increasing access to safe water, sanitation and better hygiene practices among vulnerable communities in acute emergency situations.

This objective links directly to Medair's CAP project.

iii) Project Strategy and proposed Activities

Present the project strategy (**what the project intends to do, and how it intends to do it**). There should be a logical flow to the strategy: activities should lead to the outputs, which should contribute towards the outcomes, which should ultimately lead to the project objective.

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.

List the main activities and results 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).

Medair confirms to mobilise 2-3 WASH emergency response teams (including 3 international/regional team leaders) to support life-saving WASH needs in response to the current humanitarian crisis in South Sudan. Key activities will include:

- Estimate, procure and maintain necessary stocks of emergency WASH supplies which are not available through the core pipeline (e.g. material for set-up of SWATs, timber for construction of latrines, etc.) to enable timely emergency responses
- Conduct rapid assessments of WASH needs and priorities in communities affected by disasters
- Construct new/additional water point such as e.g. emergency Surface Water Treatment (SWAT) systems or water yards in emergency affected locations
- Rehabilitate existing water points such as e.g. hand pumps and hand-dug wells in emergency affected locations
- Distribute WASH NFIs such as e.g. water containers and water purifier sachets
- Train men and women of village water committees
- Construct emergency latrines which are segregated and marked by gender
- Train people on hygiene promotion messages to be shared with their community

iv) Expected Result(s)/Outcome(s)

Briefly describe the results you expect to achieve at the end of the CHF grant period.

Outcomes:

1. Increased access to lifesaving WASH services for people in acute emergency situations

Outputs:

1.1 People affected by emergencies are provided with safe drinking water

1.2 People affected by emergencies are provided with sanitation facilities and hygiene messages

v) List below the output indicators you will use to measure the progress and achievement of your project results. Use a reasonable and measurable number of indicators and ensure that to the most possible extent chosen indicators are 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. Ensure these indicators are further used in the logframe.

SOI (X)	#	Standard Output Indicators <small>(Ensure the output indicators are consistent with the output indicators that will be used in the results framework section III of this project proposal).</small>	Target (indicate numbers or percentages) <small>(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)</small>
1	1.	# of people provided with sustained access to safe water supply (15l/p/d within 1km distance)	18,000
		Women	7,200
		Girls	3,600
		Men	3,600
		Boys	3,600
6	2.	# of people provided with sustained access to hygiene latrine facilities	18,000
		Women	7,200
		Girls	3,600
		Men	3,600
		Boys	3,600
9	3.	# of people trained on hygiene promotion messages to be shared with their community (no of trainees)	72 individuals
		Women	36
		Men	36
2	4.	# of new/ additional water points constructed	1
3	5.	# of existing water points rehabilitated	20
8	6.	# of households receiving a hygiene kit	1,000

vi). Cross Cutting Issues

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

Gender: During the assessment of emergency WASH needs in targeted locations, the particular needs of men, women, girls and boys will be identified. Medair mainstreams gender into WASH programming, primarily by ensuring women are integrated into trainings such as hygiene promotion, community water management and pump mechanic trainings. Female community leaders will be sought out and consulted on placement of water supply, sanitation facilities and other WASH activities to ensure equal gender access. Focus group and key informant interviews, as well as less formal consultations will be performed identifying vulnerable populations and gender disparities that can be addressed to prevent unequal access to WASH services. Women and girls are the greatest beneficiaries of accessible safe water points, reducing the burden placed on collecting household water supplies. During preparation for hygiene campaigns, Medair aims to target vulnerable groups through gender specific messaging.

Protection: Medair constructs separate institutional latrines for men and women as a protection measure. Safe access to latrines and safe water points eliminate the need for women and girls to walk significant distances from their homes in potentially unsafe conditions.

Environment: Medair's current programme only allows for new boreholes if there is no other feasible water supply solution, avoiding potential environmental issues associated with drilling. Avoiding drilling also allows Medair to maintain a light carbon-footprint through more high impact rehabilitation, rather than transport of new material for construction. Medair also takes into account issues such as drainage and keeping latrines safe distances away from water points. Sludge water which is a left over product from the

emergency surface water treatment process will be disposed into sludge pits avoiding direct contact with surface water sources.

vii) 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.

Medair directly implements all activities, while working together with the community to build local capacity to ensure a level of sustainability following implementation. Medair coordinates closely with the WASH cluster in Juba, state focal points and government at all levels in targeting of emergency WASH assessments and interventions. Medair supports the national WASH cluster as the Co-Coordinator. Medair’s emergency response teams are supported from the Medair Juba office, but are fully based in the field at emergency sites during assessments and interventions.

viii) 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 are the monitoring institutional arrangements (e.g. monitoring team, monitoring schedule, updates to management etc.) and monitoring tools and technics will be used to collect data on the indicators to monitor the progress towards the results achieved. Please provide an indication of the frequency data will be collected and if there is already a baseline for the indicators or if a baseline will be collected.
3. Describe how you will analyze the data collected and report on the project achievements in comparison with the project strategy.
4. Ensure key monitoring and reporting activities are included in the project work plan (Section III)².

Project Managers are responsible for the implementation of the projects the ERT Projects Coordinator is responsible for overseeing the overall implementation of the projects in consultation with the relevant Project Manager of the designated project(s) and in accordance with the project proposals ensuring objectives are met within the required time frame and budget. In addition, the WASH Advisor will provide technical guidance to the project managers and is responsible for the quality of the implemented WASH projects. Medair releases summary reports for each emergency assessment and intervention conducted (multi-agency reports may be substituted if Medair worked with other partners), this makes it transparent to track the exact activities which have been conducted. Medair will disaggregate beneficiaries by sex and age when possible, though this will be difficult in tracking exact beneficiaries numbers with water supply and sanitation activities. These reports are circulated to the WASH Cluster and relevant partners on the ground and in Juba, thereby allowing greater accountability within the humanitarian community. Activities will be assessed and reported on using qualitative and quantitative methods appropriate to the context and activities completed.

D. 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)
Pledges for the CAP project	

² 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. Follow the guidance and the structure (Goal, objective, outcome, outputs and activities) and the numbering. Add/remove lines according to the project strategy.

LOGICAL FRAMEWORK				
CHF ref./CAP Code: SSD-14/WS/60680		Project title: Access to safe water and improved sanitation and hygiene practices for emergency affected and chronically vulnerable communities	Organisation: Medair	
Goal/Objectives/Outcomes/Outputs		Indicator of progress	Means of Verification	Assumptions and Risks
Goal/Impact (cluster priorities)	Life-saving emergency WASH support in response to current humanitarian crisis in South Sudan			
CHF project Objective	To reduce morbidity and mortality resulting from waterborne diseases by increasing access to safe water, sanitation and better hygiene practices among vulnerable communities in acute emergency situations	- Percentage of children under 5 who suffered from diarrhea during the two weeks before the survey	- National Data Sources - UNOCHA, WHO, Cluster data resources	- Local authorities are willing and able to support emergency interventions - No major changes in logistical or economic conditions in South Sudan including the availability of fuel - No major fluctuations in the exchange rate - Security situation allows for staff members to access emergency locations
Outcome 1	Increased access to life saving WASH services for people in acute emergency situations	- % of water supply interventions in which people consistently have access to at least 15 l of safe water/p/d - % of sanitation interventions in which at least 1 latrine/50 people is available - # of community members trained to carry-out health and hygiene promotion activities in their community	- WASH emergency assessment and intervention reports - Monthly project reports - Population data	- Emergency sites targeted for interventions are secure and accessible
Output 1.1	People affected by emergencies are provided with safe drinking water	- # of people provided with sustained access to safe water supply (15l/p/d within 1km distance)	- WASH emergency assessment and intervention reports - Monthly project reports - Surface Water Treatment (SWAT) system operator records - Training attendance list	- Local communities and authorities willing and able to support the safe drinking water provisions

Goal/Objectives/Outcomes/Outputs	Indicator of progress	Means of Verification	Assumptions and Risks	
Activity 1.1.1	Construct new/additional water points such as e.g. emergency Surface Water Treatment (SWAT) systems or water yards			
Activity 1.1.2	Rehabilitate existing water points such as e.g. hand pumps and hand-dug wells			
Activity 1.1.3	Distribute WASH NFIs such as e.g. water containers and water purifier sachets			
Activity 1.1.4	Train men and women of village water committees			
Output 1.2	People affected by emergencies are provided with sanitation facilities and hygiene messages	<ul style="list-style-type: none"> - # of people provided with sustained access to hygiene latrine facilities - # of people trained on hygiene promotion messages to be shared with their community 	<ul style="list-style-type: none"> - WASH emergency assessment and intervention reports - Monthly project reports - Training attendance list 	Local communities and authorities willing and able to support the provision of sanitation facilities and hygiene messages
Activity 1.2.1	Construct gender segregated emergency latrines			
Activity 1.2.2	Train people on hygiene promotion messages to be shared with their community			

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. Please insert as well the key monitoring activities to be conducted during the project implementation (collection of baseline, monitoring visits, surveys etc.)

Project start date:	1 Jan 2014	Project end date:	30 June 2014
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Activities	Q1/2014			Q2/2014			Q3/2014			Q4/2014		
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Activity 1.1.1 Construct new/additional water points such as e.g. emergency Surface Water Treatment (SWAT) systems or water yards	X	X	X	X	X	X						
Activity 1.1.2 Rehabilitate existing water points such as e.g. hand pumps and hand-dug wells	X	X	X	X	X	X						
Activity 1.1.3 Distribute WASH NFIs such as e.g. water containers and water purifier sachets	X	X	X	X	X	X						
Activity 1.1.4 Train men and women of village water committees	X	X	X	X	X	X						
Activity 1.2.1 Construct gender segregated emergency latrines	X	X	X	X	X	X						
Activity 1.2.2 Train people on hygiene promotion messages to be shared with their community	X	X	X	X	X	X						

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