

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

- Increase timely and equitable access to safe water, sanitation, and hygiene services to emergency-affected populations;
- Strengthen chronically vulnerable communities to withstand emergency WASH crises through direct provision of WASH services; and
- Strengthen resilience among chronically vulnerable communities, and build capacity within WASH line ministries and national NGOs/CBOs.

Cluster Geographic Priorities for this CHF Round

- Jonglei (Pibor, Pochalla, Ayod, Akobo, Fangak, Canal, Twic East)
- Lakes (Awerial, Rumbek North, Cueibet, Yirol East)
- Unity (Abiemnhom, Leer, Mayendit, Rubkona, Mayom, Koch, Panyijar and Pariang)
- Upper Nile (Renk, Ulang, Nasir, and Maban, Longechuk, Baliet and Malakal)

SECTION II

Project details

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

Requesting Organization

International Rescue Committee

Project CAP Code

SSD-14/WS/60754

CAP Gender Code

2A

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

Emergency Water, Sanitation and Hygiene (WASH) Preparedness and Response for Displaced, Disaster-Affected and Vulnerable Communities in South Sudan

Total Project Budget requested in the in South Sudan CAP

US\$ 1,374,351

Total funding secured for the CAP project (to date)

US\$ 1,000,000

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 (include payam when possible)
Lakes State	100%	Awerial County

Funding requested from CHF for this project proposal US\$300,000

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:	12000	24,000
Girls:	2469 (11-18 age)	4938 (11-18 age)
Men:	13000	26,000
Boys:	2600 (11-18 age)	5200 (11-18 age)
Total:	25,000	50,000

Targeted population:

IDPs, Host communities,

IDPs in Lakes State

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

n/a

Indirect Beneficiaries / Catchment Population (if applicable)

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

Indicate number of months: 6 months (1 February – 31 July 2014)

Contact details Organization's Country Office	
Organization's Address	Hai Cinema, Juba, South Sudan
Project Focal Person	Jody Yasinowsky Email: Jody.Yasinowsky@Rescue.org Tel: +211 (0) 0954290147
Country Director	Wendy Taeuber Email: Wendy.Taeuber@Rescue.org Tel: +211 (0) 956438790
Finance Controller	Gabriel Munga Email: Gabriel.Munga@Rescue.org Tel: +211 (0) 959000668
Organization's Address	Hai Cinema, Juba, South Sudan

Contact details Organization's HQ	
Organization's Address	122 East 42nd Street, New York, NY 10168-1289
Program Officer	Doreen Chi Email: Doreen.Chi@rescue.org Tel: +1 212 551 3073
Regional Controller	Getenet Kumssa Email: Getenet.Kumssa@Rescue.org Tel: +1 212 551 3073
Organization's Address	122 East 42nd Street, New York, NY 10168-1289

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 sharply since 15 December 2013. Violence erupted in the capital Juba and quickly spread, affecting six of the country's ten states. In two weeks, up to 180,000 people have been forced to flee their homes, including some 70,000 seeking shelter in UN peacekeeping bases. It is expected that the needs will escalate further in the coming weeks.

Lakes, Unity and Central Equatorial states has experiencing tremendous emergency challenges with huge number of IDPs caused by recent conflict in Juba, Jongle and Unity States of South Sudan which continued to threaten stability and peace of men, women, boys and girls, especially in communities living in Juba, Bentiu and Bor towns and surrounding villages. Since war broke out in mid December, estimated 100,000 people have displaced. Where IDPs have settled in relatively safe places in Juba UN compounds, Awerial county (in Lakes state) and Rubkona county, they remain without basic services such as water and sanitation. Most of IDP's are women, boys, girls and elderly. On 31st of December 2013, an inter-agency rapid need assessment conducted in Minkamman, Awerial County, Lakes State, and identified emergency WASH, shelter, health and nutrition support as the key needs.

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.

Displacement, especially abrupt displacement from conflict for example, needs immediate possible actions to save lives. Experience showed that poor capacity of local governments to prepare and respond to emergencies will extend communities suffering and threaten life. Local Government water and health departments lack resources to immediately respond to emergency affected communities, as a result environmental health conditions are deteriorating in IDPs camps, which may cause outbreak of disease. The current condition of IDPs needs immediate action for safe water, hygiene and sanitation.

The proposed emergency WASH intervention helps to alleviate the continued humanitarian sufferings and address existing needs for clean and safe drinking water, hygiene and sanitation services, and it will cater for existing emergencies. IRC will carry out emergency water, hygiene and sanitation promotions in a way that reduce health risks, increase hygiene practices focusing on women, men, boys and girls and improve safe drinking-water management in households. The activities will save lives. IRC needs this grant to respond to immediate WASH needs of displaced communities.

IRC's proposed actions enables rapid response to support emergency affected communities, facilitating essential WASH and NFI interventions to reach those most in need. IRC has field office in Lakes, Unity and Central Equatorial states which help to closely monitor and supervise responses. Its closeness to the IDPs helps to identify and take immediate comprehensive responses.

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.

IRC's project objectives are in line with WASH cluster objectives; Provide emergency water points with safe drinking water, emergency latrines, and promote good hygiene to displaced populations; and Ensure provision of safe drinking water and improved sanitation, and promote good hygiene within crisis affected communities. IRC will work in collaboration with WASH cluster partners to realization of these objectives. Responses will effective be implemented to address needs of emergency affected communities. IRC will use the CHF funding to carry out emergency water supply, hygiene and sanitation promotion in a way that improves access to safe water, significantly reduces open defecation, increase hygiene practices and water management in households. Construction of emergency latrines and solid waste management, promotion of hygienic practices and distribution of basic supplies, training of volunteer hygiene promoters and equipping them with key messages will be implemented with this funding.

ii) Project Objective

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

Objective 1: Provide emergency water points with safe drinking water, emergency latrines, and promote good hygiene to conflict-affected and displaced populations

iii) Project Strategy and proposed Activities

Present **BRIEFLY** 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:

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.

activities should lead to the outputs, which should contribute towards the outcomes, which should ultimately lead to the project objective. 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).

The intervention will respond to the immediate needs of conflict-affected populations present in target counties. The intervention will reduce the negative impacts of emergencies on public health by providing basic WASH services, including hygiene promotion, and sanitation and water supply interventions. The IRC is planning to focus its WASH response on Awerial, Lakes State, but it is ready to respond to WASH gaps in those areas where there is a need within the target areas.

Objective 1: Provide emergency water points with safe drinking water, emergency latrines, and promote good hygiene to displaced populations

- Distribute water containers and household treatment chemicals
- Construct emergency latrines
- Establish emergency water supply
- Develop life-saving hygiene practice messages and IEC materials
- Train volunteer hygiene promoters from among the beneficiaries
- Conduct mass hygiene promotion activities and campaigns
- Support and monitor volunteer hygiene promoters to transmit hygiene and disease prevention messages

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

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

Provision of safe water and sanitation facilities are critical in restoring health and dignity in emergency-affected populations. By the end of this project, emergency affected communities have access to adequate and safe water and sanitation facilities according to the SPHERE standards. To realize this result IRC will distribute water containers, treatment chemicals, and soaps to beneficiaries with demonstration of how to use to ensure that they consume safe water. Sanitation facility and proper use prevent environmental contamination. To ensure fecal matter is contained and open defecation does not take place in and around the living area; IRC will construct emergency trench latrines and mobilize communities to use them.

In conjunction with sanitation and water activities, IRC promotes hygiene so that affected communities are aware of public health risks and key hygiene practices to prevent deterioration of hygienic conditions. Based on its previous experience, IRC will target key risky hygiene behaviors with focus on hand washing, safe water chain, and latrine usage. IRC will use IEC materials and community outreach activities using volunteers from displaced and host communities. IEC materials primarily graphical, appropriate to the cultural context, and in local languages, will be adapted to target risky behaviors and provide beneficiaries with simple instructions to complement messages transmitted via the community outreach activities. At community level, volunteers will be elected and the volunteer community Health Promoters (CHPs) will be trained on use of community mobilization techniques to promote safe hygiene. Then CHP conducts health awareness-raising activities with monitoring of improvements. CHP will have biweekly review meetings with IRC hygiene promotion staffs. IRC will distribute soap to promote personal hygiene and hand washing.

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>
X	1.	Number of people provided with sustained access to safe water supply (15 litres/ person/day within 1 km distance)	25,000 people (12000 Women and 13000 men)
	2.	POU water treatment chemicals distributed	5000HH
	3.	Increased hygienic practice	Average % increase in knowledge of good hand washing practices = 50%
X	4.	People provided with sustained access to hygiene latrine facilities	300 stances- 1:83 for 25,000 people
	5.	Households receiving water containers and soaps	2000HH
X	6.	People trained on hygiene promotion messages to be shared with their community	100 individuals (50 female, 50 male)
	7.	Solid waste collection and safe disposal campaigns conducted in IDP camps	24 (monthly in four IDP camps)

vi). Cross Cutting Issues

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

The IRC will ensure that all data collected during surveys, assessments, evaluation and regular reporting is disaggregated by age, sex and residency status where applicable to monitor that IRC's services are equally responsive to the needs of different groups and that a gender sensitive approach is taken during the implementation of project activities.

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.

The IRC will directly implement the proposed activities in the target counties in coordination with relevant stakeholders present in the target areas.

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 workplan (Section III)².
- Progress will be tracked through various means of verification, such as monitoring reports and analysis, indicator tracking sheets, distribution lists, and internal progress reports, and lessons learned.
 - The IRC will place emphasis on the active participation of beneficiaries and relevant state cluster mechanisms in all aspects of the implementation and monitoring. The IRC will seek regular feedback from project beneficiaries and record any changes in their needs or priorities, and respond with appropriate actions.
 - The IRC will ensure to provide close supervision of the program activities to ensure that services are in line with international quality standards (SPHERE) and that skills and concepts covered during in-service trainings are being correctly applied. The IRC will use its supervision checklist during monitoring visits.
 - The IRC is an active participant in the WASH Cluster at both state and national levels and will share assessment findings with cluster members, as well as updates on the operating context for WASH interventions in the target area and impact of the proposed project.

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)
<i>USAID/OFDA, August 1st 2013(Unity State)</i>	\$1,000,000
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/60754		Project title: Emergency Water, Sanitation and Hygiene (WASH) Response for Displaced, Disaster-Affected and Vulnerable Communities in South Sudan	Organisation: International Rescue Committee
Goal/Objectives/Outcomes/Outputs	Indicator of progress	Means of Verification	Assumptions and Risks
<p>Goal/Impact (cluster priorities)</p> <p>What are the Cluster Priority activities for this CHF funding round this project is contributing to?</p> <p>Increase the access of crisis-affected populations to safe drinking water, provide additional latrines and improve hygiene practices in order to prevent the outbreak and spread of water-related disease</p>	<p><i>What are the key indicators related to the achievement of Cluster Priority activities?</i></p> <ul style="list-style-type: none"> • 25,000 direct beneficiaries (12,000 females and 13,000 males) have improved access to safe drinking water. • 25,000 direct beneficiaries (12,000 females and 13,000males) have access to improved good practices and uses of sanitation and hygiene facilities 	<p><i>What are the sources of information on these indicators?</i></p> <ul style="list-style-type: none"> • Project monitoring reports • Material donation records 	
<p>CHF project Objective</p> <p><i>What is the result the project will contribute to by the end of this CHF funded project?</i></p> <p>Provide emergency water points with safe drinking water, emergency latrines, and promote good hygiene to displaced populations</p>	<p><i>What indicators will be used to measure whether the CHF Project Objective are achieved?</i></p> <p>Number of individuals having access to safe and sufficient water, to emergency latrine and provided with hygiene supplies</p>	<p><i>What sources of information will be collected/already exist to measure this indicator?</i></p> <ul style="list-style-type: none"> • Water distribution records, • Project monitoring reports 	<p><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"> • The project area remains accessible during the project period (security, roads passable) • Staff levels are maintained
<p>Outcome 1</p> <p><i>What change 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> <p>Conflict-affected populations have access to safe and sufficient water for drinking and cooking and personal hygiene</p>	<p><i>What are the indicator(s) used to measure whether and to what extent the project achieves the envisaged outcomes?</i></p> <p>Number of individuals have access to 15 liters per person per day of safe water is available drinking water</p> <p>Target: 25,000 individuals</p>	<p><i>What are the sources of information collected for these indicators?</i></p> <ul style="list-style-type: none"> • Project monitoring reports • Material donation records 	<p><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"> • The project area remains accessible during the project period (security, roads passable) • Staff levels are maintained

Goal/Objectives/Outcomes/Outputs		Indicator of progress	Means of Verification	Assumptions and Risks
Output 1.1	<p>List the products, goods and services that will result from the implementation of project activities and lead to the achievement of the outcome.</p> <ul style="list-style-type: none"> Number of HH provided with Water container and household water treatment supplies Emergency water supply system established for 25,000 people 	<p>What are the indicator(s) to measure whether and to what extent the project achieves the output? Ensure the indicators identified in Section II (v) of this proposal are adequately inserted in this section.</p> <ul style="list-style-type: none"> -5000 HH received water treatment supplies & safe water container Number of peoples supplied with emergency water 	<p>What are the sources of information on these indicators?</p> <ul style="list-style-type: none"> Project monitoring reports Material distribution records 	<p>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?</p> <ul style="list-style-type: none"> Security situation remains stable with no sudden change in the humanitarian operating space Staff levels are maintained
Activity 1.1.1	Distribute water containers and household water treatment chemicals, reaching 5,000 households (25,000 individuals)			
Activity 1.1.2	Establish emergency water supply system for 25,000 individuals			
Outcome 2	Support conflict-affected and vulnerable populations to practice safe hygiene by constructing emergency sanitation facilities and distribution of hygiene supplies & raising hygiene knowledge focusing on women and children	<p>Number of IDP HHs and vulnerable populations having sufficient:</p> <ul style="list-style-type: none"> WASH items, Access to latrines, water and soaps to practice hygiene and sanitation 	<ul style="list-style-type: none"> Project monitoring reports Material distribution records 	<ul style="list-style-type: none"> The project area remains accessible during the project period (security, roads passable) Staff levels are maintained
Output 2.1	<ul style="list-style-type: none"> 5,000 HH provided with WASH items 100 IDPs trained on safe water management emergency hygiene and sanitation, promotion methods new emergency latrines constructed 	<ul style="list-style-type: none"> Number of HH receiving a WASH items Number of active volunteer hygiene and sanitation promoters 300 Number of emergency latrines constructed and used by IDPs to 	<ul style="list-style-type: none"> Project monitoring reports Material distribution records 	<ul style="list-style-type: none"> Security situation remains stable with no sudden change in the humanitarian operating space Staff levels are maintained
Activity 2.1.1	Distribute WASH kits, reaching 5,000 households			
Activity 2.1.2	Develop life-saving hygiene practice messages and IEC materials and distribute for IDPs			
Activity 2.1.3	Train 100 volunteer hygiene promoters from among the beneficiaries			
Activity 2.1.4	Conduct mass hygiene promotion activities and campaigns (using Megaphones), reaching 25,000 beneficiaries			
Activity 2.1.5	Construct 300 emergency latrines, reaching beneficiaries 25,000 beneficiaries			
Activity 2.1.6	Support and monitor volunteer hygiene promoters to transmit hygiene and disease prevention messages			

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 February 2014	Project end date:	31 July 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: Distribute water containers and household water treatment chemicals		X	X	X	X	X	X					
Activity 2: Construct 300 emergency latrines		X	X	X	X	X	X					
Activity 3: Establish emergency water supply system		X	X	X	X	X	X					
Activity 4: Distribute WASH kits		X	X	X	X	X	X					
Activity 5: Develop life-saving hygiene practice messages and IEC materials and distribute for IDPs		X	X	X	X	X	X					
Activity 6 : Train 100 volunteer hygiene promoters from among the beneficiaries		X	X	X	X	X	X					
Activity 7: Conduct mass hygiene promotion activities and campaigns		X	X	X	X	X	X					
Activity 8: Support and monitor volunteer hygiene promoters to transmit hygiene and disease prevention messages		X	X	X	X	X	X					

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