

South Sudan
2014 CHF Standard Allocation Project Proposal
for CHF funding against CRP 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 CRP 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:

CRP Cluster	WASH
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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 CRP 2014.

Cluster Priority Activities for this CHF Round	Cluster Geographic Priorities for this CHF Round
<ul style="list-style-type: none"> - Cholera Response - Emergency water treatment units - Rehabilitation of existing water points, where appropriate - Drilling/construction of new water points, if appropriate - Convert hand pumps to motorized boreholes with tap stands - Emergency communal latrines - Distribution of hygiene kits - Distribution of WASH NFIs - Emergency hygiene promotion training 	<p>High Priority Areas:</p> <p>Upper Nile: Malakal, Baliel, Panyikang Jonglei: Ayod, Akobo, Urur, Nyrial, Duk, Pigi Unity: Pariang, Abiemnom, Mayom, Koch, Mayendit, Leer, Panyijar</p> <p>PoC's & Mingkamon</p> <p>Medium Priority Areas:</p> <p>Upper Nile: Manyo, Melut, Fashoda, Longochuck, Mawut, Ulang Jonglei: Fangak, Twic East, Bor South, Pibor, Pochalla Unity: Rubkona, Guit Warrap: Tonj East, Tonj North, Tonj South Lakes: Rumbek North, Rumbek Central, Cuibiet Abyei</p>

SECTION II

Requesting Organization	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			
Alaska Sudan Medical Project				
Project CRP Code	CRP Gender Code	State	%	County/ies (include payam when possible)
SSD-14/WS/60851	2a	Jonglei	100	Fangak
CRP Project Title (please write exact name as in the CRP)				
Fangak County Water & Hygiene Project				
Total Project Budget requested in the in South Sudan CRP	US\$ 150,000	Funding requested from CHF for this project proposal	US\$150,000	
Total funding secured for the CRP project (to date)	US\$ 36,000	Are some activities in this project proposal co-funded (including in-kind)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (if yes, list the item and indicate the amount under column i of the budget sheet)		
Direct Beneficiaries (Ensure the table below indicates both the total number of beneficiaries targeted in the CRP project and number of targeted beneficiaries scaled appropriately to CHF request)		Indirect Beneficiaries / Catchment Population (if applicable)		
	Number of direct beneficiaries	Number of direct beneficiaries targeted		

	targeted in CHF Project	in the CRP
Women:	8,820	8,820
Girls:	6,930	6,930
Men:	8,820	8,820
Boys:	6,930	6,930
Total:	31,500	31,500

50,000

Targeted population:

Abyei conflict affected, IDPs, Returnees, Host communities, Refugees

10,000 IDPs from December 2013 conflict

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)

Indicate number of months: 8 months

1 august 2014 – 31 March 2015

Contact details Organization's Country Office

Organization's Address	Old Fangak, South Sudan
Project Focal Person	Jason Hahn, Jason.asmp@gmail.com , +1-907-229-9139; +254-713-746-075
Country Director	Stephen Ayul, ayuljak@gmail.com +211-956-845-324; +882-164-333-9172
Finance Officer	Josie Hickel, josiehickel@pebblepartnership.com , +1-907-244-3291
Monitoring & Reporting focal person	Jason Hahn, Jason.asmp@gmail.com , +1-907-229-9139; +254-713-746-075

Contact details Organization's HQ

Organization's Address	PO Box 230183, Anchorage, Alaska, 99523, USA
Desk officer	Jason Hahn, Jason.asmp@gmail.com , +1-907-229-9139; +254-713-746-075
Finance Officer	Josie Hickel, josiehickel@pebblepartnership.com , +1-907-244-3291

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

Jonglei State, and Fangak County in particular, is in a water crisis. According to the most recent SS Statistical Yearbook, 42% of the population in Jonglei has to travel more than 30 minutes to secure potable water. An influx of IDPs since December 2013, has put an additional strain on existing WASH resources. These IDP's number approximately 50,000+ in Fangak County and 18,000 in the payams surrounding Old Fangak. According to a 23 IRNA 2014 Report for Old Fangak, 8,600 IDPs were in Old Fangak payam itself.

"The majority of the IDP population consists of women and children who have fled the violence in Malakal, Bentiu, Duleib and Thunja and reside with the host community. Those who do not have access to social support networks are particular vulnerable as they lack access to food, WASH and shelter."- IRNA Report

Due to its isolation, Fangak County has received very little WASH development, and is chronically vulnerable. To the west of the Zaref River, outside of Old Fangak town and towards Fagwir, there is a large population who has no access to clean drinking water. As a result, these people obtain water from the Zaref River and other dirty water sources- greatly exacerbating health problems.

Proper sanitation is an on-going struggle: training, promotion and latrines are needed to ensure open-defecation free communities.

Hygiene is critical. The only PHCC in the region is in Old Fangak, and it lacks hand-washing stations. A high number of patients and IDPs coming from a wide region increase disease risks.

A 2013 "Assessment of Water Practices and Usages in Old Fangak" indicated a lack of jerry cans in bomas outside of Old Fangak. As a result, families are not able to access clean water from the water wells, or they have grossly inadequate and un-hygienic water containers.

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.

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.

Due to its isolation, logistical challenges, and lack of resources, Fangak County has been chronically under-served and is a critical WASH coverage area with few actors present on the ground. However, progress is possible, as ASMP has demonstrated over the last 3 years. ASMP has constructed water wells and latrines in around Old Fangak to meet the needs. The Jan 2014 Old Fangak IRNA Report stated that:

"Situation on the ground stable as far as WASH needs are concerned... Alaska Sudan Medical Project – an NGO operating in the area has been supporting WASH needs in the community and has the technical capacity to carry out operation and maintenance of all water points."

However, most of Fangak County still has inadequate WASH resources, and a huge influx of IDPs since the December 2013 crisis has put an increased pressure on the resources. ASMP can address these needs by expanding our drilling operations further outside of Old Fangak town, particularly across the Zaref River towards Fagwir (Paguir), which is chronically underserved.

EXPANDING COVERAGE

The PRT team has asked ASMP if we have the capacity to absorb additional funds and incorporate sanitation. We do. With the infrastructure/staff year-round, a refined supply chain, trained locals, strong ties with the community and local RRC Coordinator, *ASMP has the organizational capacity needed to scale up WASH operations.* With a lightweight drill rig, equipment, supplies and knowledge of Fangak County, we can expand our WASH operations beyond Old Fangak into chronically under-served communities.

CHF funds **will be vital** in purchasing the necessary supplies and labor needed to accomplish these goals. Additional CHF funds up to \$150,000 will allow ASMP to scale up and expand coverage as requested by PRT. ASMP's WASH projects would not be possible at this scale without the investment and guidance of CHF. Other designated WASH funds are from individual donors, and help offset the administrative and transportation costs of our WASH projects.

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.

- Rehabilitation of existing water points, where appropriate
 - ASMP will assess and rehabilitate all water points as needed in our operating area in Fangak County
- Drilling/construction of new water points, if appropriate
 - Will construct 4 new water points for communities without access to clean water
- Rehabilitation and relocation of latrines, where appropriate
 - Reclaim 10 latrine structures in Old Fangak, rehabilitate, and re-locate to new pits in OF town and 2 nearby payams
- Sanitation promotion and training
 - Employ a Community-Led Total Sanitation (CLTS) approach to identifying community leaders and promote open-defecation free villages
- Distribution of hygiene kits
 - Distribution of hygienic water jerry cans
- Emergency hygiene promotion training
 - Training on hygienic water-gathering and storage
 - Hygienic training in concurrence with construction of 3 hand-washing stations for PHCC/latrines

ii) Project Objective

State the objective/s of this CHF project and how it links to your CRP 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)

This project will provide clean drinking water and improved hygiene for five bomas in payams outside of Old Fangak in Fangak County. Five water wells will be constructed to serve 31,500 people, which includes 10,000 IDPs. Hygiene will be improved through construction of hand-washing stations (serving 5,000 clinic patients and staff), distribution of hygienic water jerry cans (serving 100 families) and completion of trainings in hygiene techniques. Ten pit latrines will be rehabilitated and relocated. A Community Led Total Sanitation trigger campaign will be implemented in Old Fangak.

Resilience of WASH infrastructure will be further enhanced through the training of six local well-drilling apprentices, some of who are in their 4th or 5th year of training. Local WASH Committees in Old Fangak and Chotbora will be strengthened.

Improved hygiene through hand-washing stations and hygiene promotion at the Primary Health Care Centers (and nearby latrines) in Old Fangak will prevent life-threatening diseases and improve the quality of health care.

This Objective is in accordance with the South Sudan Crisis Response Plan Strategic Objective SO1:

"Provide a coordinated life-saving response to immediate humanitarian needs of conflict-affected people (internally displaced people, host communities and refugees in country). This will include (but not be limited to): preventing and responding to life-threatening diseases and malnutrition; distributing food, shelter and household items; providing healthcare, including care for wounded patients and mass vaccinations; and delivering water, sanitation and hygiene services."

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.

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).

- Pre-position staff and supplies in Old Fangak.
 - Utilize existing equipment supplies on the ground, which includes a portable, lightweight Boremaster drill rig, extra fuel, and tools.
 - Deliver new consumable and supplies to the Project Headquarters in Old Fangak (ASMP's Work Compound). Utilize barges/trader boats from Juba IF available; contingency will be to air ship all supplies in using Cessna Caravans contracted through MAF or other carriers.
 - Bring in experienced volunteers utilizing air transport to help carry out all WASH activities
 - Deliver supplies and equipment to work sites
 - Using the ASMP speed boat, set up remote work sites to construct boreholes.
 - Set up the parameters and membership of this season's well-drilling apprenticeship program. Identify new and returning apprentices (6 total); outfit with necessary uniforms and safety gear.
 - Construct five new water points (one more than initial proposal). Three of these sites will be in underserved bomas on the west side of the Zaref River outside of Old Fangak town (towards Fagwir) which have very few water points.
 - Pankir: serving approx. 3,000 people (approx. 840 men, 840 women, 660 age 0-14 boys, 660 age 0-14 girls). Across the river from Old Fangak 3 km
 - Wanglei: serving approx. 3,000 people (approx. 840 men, 840 women, 660 age 0-14 boys, 660 age 0-14 girls). Across the river towards Fagwir approx. 8 km
 - Diengdieng: serving approx. 2,000 people (560 men, 560 women, 440 age 0-14 boys, 440 age 0-14 girls). Across the river from Chotbora approx. 10 km from Old Fangak
 - Chotbora; serving approx. 10,000 people (approx. 2800 men, 2800 women, 2200 age 0-14 boys, 2200 age 0-14 girls). Borehole will be constructed at the north end of the boma, which currently does not have a water point. Chotbora is a larger boma with a high number of IDPs.
 - Paguir (new location): approx. 4,500 people (1260 men, 1260 women, 990 age 0-14 boys, 990 age 0-14 girls)
 - Assess all water wells that have been implemented in the region by ASMP and partners including Peacewinds. Make necessary repairs, test water quality, and strengthen local WASH Committees as needed.
 - Test water quality at all 7 water wells that ASMP has constructed in the past few years, plus the two previously existing water wells in Old Fangak (9 total).
 - Repair any water wells deemed to be non-functional, including water points constructed by partners.
 - Communicate with WASH Committees on current membership, supply stock, and status of the Committee functionality. Deliver any needed supplies to WASH Committees in Old Fangak (6 members) and Chotbora (6 members) as requested and needed.
 - Promote inclusion of women on Old Fangak WASH Committee to contribute to gender equality.
 - Identify a Community Leader and PHCC Community Health Workers (CHWs) to define the best policies and procedures for distributing 100 clean jerry cans to needy families.
 - Distribute in a sensitive, fair and equitable manner. Determine best practices for jerry can distribution.
 - In collaboration with PHCC Community Health Workers (who will also assist in translation), families will be instructed in proper hygienic use of cans and storage of water to prevent cross-contamination.
 - Beneficiaries: 100 women; indirect beneficiaries includes approximately 500 family members including men and age 0-14 boys and girls; from Old Fangak, Nonimec and Galillee.
 - Women leaders contribute to gender equality.
 - Construct three hand-washing stations for the two Old Fangak Primary Health Care Centers (near the latrines).
 - Use rain-water catchment to construct hand-washing stations; one at the old PHCC, two at the new PHCC (on opposite ends)
 - These stations will improve the hygiene of the latrines located near the PHCCs.
 - Will serve approximately 5,000 clinic patients and staff including IDPs (1,400 men, 1,400 women, 1,100 age 0-14 boys, 1,100 age 0-14 girls).
- SANITATION**
- Rehabilitate AND re-locate 10 pit latrines
 - Abandoned/full latrines will be assessed. The structures of non-operational latrines will be dismantled and rehabilitated. These structures will be moved to new locations. New pits with liners will be constructed at each new site by an ASMP Project Manager, ASMP volunteers, local welding apprentices, and day laborers.
 - 8 abandoned latrines from Old Fangak will be relocated to areas in Old Fangak to increase coverage.
 - 2 abandoned latrines from Old Fangak will be relocated to 1) a school in Pankir, 2) a school in Wangchot
 - ASMP's local Sudanese Project manager will initiate a trigger campaign for Community Led Total Sanitation (CLTS)
 - Project Manager will receive training on CLTS including handbook & materials.
 - PM will engage local leaders on best method to trigger a CLTS approach in Old Fangak and nearby payams
 - ASMP will support community with necessary resources to carry out CLTS campaign.

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

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

This project will bring clean water to people in Fangak County who have never had potable water before. This will have the immediate effect of decreasing the disease burden, including preventing diarrheal deaths in children under 5, and will improve the general health of the population.

Training of local South Sudanese well drillers and maintenance technicians will put villagers on a path of sustainability by ensuring new water sources are *sustainable*. Strengthening WASH Committees and building infrastructure develops resilience in these chronically vulnerable communities, and builds capacity.

Hygiene will be improved through construction of hand-washing stations, distribution of clean jerry water cans, and teaching of hygienic techniques. This will prevent the spreading of life-threatening communicable diseases, while also preventing diarrheal deaths in children under 5.

Sanitation will be improved by the rehabilitation and relocation of 10 non-operational pit latrines in Old Fangak. Community leaders will be engaged and given resources to implement a Community Led Total Sanitation trigger campaign, with the final goal of Old Fangak being open-defecation free.

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 (Ensure the output indicators are consistent with the output indicators that will be used in the results framework section III of this project proposal).	Target (indicate numbers or percentages) (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.	People provided with sustained access to safe water supply (SPHERE Standard)	22,500 (6,300 men, 6,300 women, 4950 age 0-14 boys, 4,950 age 0-14 girls).
x	2.	Number of new/ additional water points constructed	5
x	3.	Existing water points rehabilitated	<i>As identified and needed (estimated: 2).</i>
x	4.	Households receiving a hygiene kit.	100 households (100 men, 100 women, 150 boys, 150 girls) receive hygienic jerry can.
x	5.	# of people trained on hygiene promotion messages to be shared with their community	150 (120 women, 30 men)
x	6.	# of community members trained on management of water, sanitation and hygiene services.	22
x	7.	# of people provided with sustained access to hygienic latrine facilities	1,000 people in Old Fangak (280 men, 280 women, 220 age 0-14 girls, 220 age 0-14 boys).
	8.	# of latrines rehabilitated	10
	9.	Number of hand washing stations constructed to serve approximately 20 latrines.	3

vi). Cross Cutting Issues

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

The construction of new water points and servicing of existing wells will decrease the water-bearing burden on women. Closer water sources will allow them more time taking care of their families, and pursue education and livelihoods. Closer water points will decrease their exposure to unsafe exposures including gender-based violence (including physical and sexual assault) and environmental hazards such as snake-bites.

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.

- Logistical constraints will be the most challenging aspect. ASMP is working under the assumption that the Nile/Zaref Rivers will NOT be available for large material transport at the time of implementation. All activities covered in this project will be completed with existing equipment and supplies on the ground (including fuel) with consumables and other supplies being airlifted into the site during the work season.
- New boreholes will be constructed under leadership of an ASMP lead drilling volunteer and a contracted professional borehole driller. A team of 6 local apprentice drillers will receive hands-on training in well drilling. Day laborers will provide support in digging mud pits, transporting and setting up well drilling and installation equipment.
- Existing boreholes and hand pumps will be rehabilitated as needed by the local WASH Water Committee under consultation by ASMP's drilling contractor and the ASMP Project Manager. The WASH Committees will be given the proper tools, supplies and support as needed.
- Three hand-washing stations will be constructed by ASMP volunteers, Project Manager, and local laborers. Instruction of CHWs about proper use of medical incinerator will be collaboration between ASMP's Project Manager and the PHCC Clinic Director.
- A CLTS campaign will be led by ASMP's Sudanese Project Manager Stephen Ayul. The support of the local RRC Coordinator will be solicited. Community leaders will be identified and given training and resources to conduct a CLTS campaign in Old Fangak.
- Latrines will be rehabilitated under leadership of ASMP's Project Manager, who has extensive experience with welding latrine structures. A team of 6 local apprentice welders will provide construction labor. Day laborers will provide support in digging latrine pits, transporting and setting up latrine structures and supplies. ASMP will utilize the existing materials of abandoned/non-operational latrines as much as possible to save on supply costs.
- Hygienic water jerry cans will be distributed in communities receiving new water points by ASMP Project Manager and a lead community member. Since jerry cans are scarce, a sensitive and equitable method of delivering water cans will be determined after consultation from community members. Training will include proper hygienic use of jerry cans to avoid cross-contamination, further instruction as to the health benefits of well water versus river water, and basic hand-washing. Cans will be distributed after the completion of the hygiene.

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.

1. Successful completion of new boreholes and rehabilitated latrines will be assessed and recorded by the ASMP country Project Manager and ASMP Program Director.
 - a. Activities of Fangak County implementing teams will be recorded by the country Project Manager who will report to Program Director, the focal point contact for this project.
 - b. Results, including the number of water wells and flow rates, the number of trainings conducted, number of latrines rehabilitated, implementation of hand-washing stations, and other key outputs will be recorded by the country Project Manager who will report to Program Director.
 - c. Cross-cutting issues will be addressed by the inclusivity of apprenticeship trainings, water hygiene trainings, CLTS trainings and the further assessment of water use practices in Old Fangak, which will be conducted by a volunteer dedicated to this task.
2. Output and quality of new water points and rehabilitated water points will be assessed by measuring sustainable flow rates and quality of water. The country Project Manager will record all information and report to Program Director. Records and logs will be kept of all trainings held for well-drilling apprentices and WASH Committee members. Written documentation and photos will be taken of all project activities.
3. Number and methodology of distribution of jerry cans will be recorded by the local Project Manager and reported to the Program Director. Number of families receiving hygienic training will be recorded.
4. Completion of project objectives will be assessed by the local Project Manager in collaboration with the Program Director. These assessments will be made on-site after consultation with all team members. Reports will be given to the Program Director, who will analyze and further report the activities of ASMP to other partners.
5. The Program Director will ensure timely completion of narrative reports including project achievements based on output indicators as required in a timely manner.

D. Total funding secured for the CRP project

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

Source/donor and date (month, year)	Amount (USD)
Individual donors	36,000
Pledges for the CRP project	
Private donor to Apprentice Training Program	15,000

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:

This section is NOT required at the first submission of a proposal to the cluster coordinator/co-coordinator. However it is required to be filled for proposals recommended for funding by the Advisory Board.

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./CRP Code: SSD-14/WS/60851		Project title: Fangak County Water & Hygiene Project		
		Organisation: <u>Alaska Sudan Medical Project</u>		
Goal/Objectives/Outcomes/Outputs		Indicator of progress	Means of Verification	Assumptions and Risks
Goal/Impact (cluster priorities)	1. Rehabilitation of existing water points, where appropriate 2. Drilling/construction of new water points 3. Emergency communal latrines 4. Distribution of hygiene kits 5. Emergency hygiene promotion training	# of new/additional water points constructed # of Existing water points rehabilitated # of latrines rehabilitated # of people provided with sustained access to hygiene latrine facilities # of households receiving a hygiene kit. # of people trained on hygiene promotion messages to be shared with their community # of Community members trained on management of water, sanitation and hygiene services.	This data is capture for each indicator as described in the outputs below.	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available to transfer supplies & staff to Old Fangak. RISKS: Security deterioration, logistical closures, supply/fuel scarcities.
CHF project Objective	Increase access to safe water and improved sanitation and hygiene practices among emergency-affected and chronically vulnerable communities in South Sudan.	1. Number of people provided with access to safe water (based on standard Sphere figures) 2. Number of people provided with access to and improved sanitation facility (based on standard Sphere figures)	Water well locations & catchment areas will be documented. Improved sanitation infrastructure (hand-washing stations/latrines) will be documented; catchment areas will be calculated.	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available to transfer supplies & staff to Old Fangak. RISKS: Security deterioration, logistical closures, supply/fuel scarcities.
Outcome 1	Improved health due to increased number of families accessing potable water	• A decrease in number of water borne illnesses in the catchment area.	Documented cases of water-borne illnesses are captured by Old Fangak PHCC & will be tracked.	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available to transfer supplies & staff to Old Fangak. RISKS: Security deterioration, logistical closures, supply/fuel scarcities.
Output 1.1	Five new water wells bring potable water to 31,500 families in 5 villages outside of Old Fangak along the Zaref River	• # of new/ additional water points constructed	New water well location, output and quality will be documented and photographed	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available to transfer supplies & staff to Old Fangak. RISKS: Security

LOGICAL FRAMEWORK				
CHF ref./CRP Code: SSD-14/WS/60851		Project title: Fangak County Water & Hygiene Project		Organisation: <u>Alaska Sudan Medical Project</u>
Goal/Objectives/Outcomes/Outputs		Indicator of progress	Means of Verification	Assumptions and Risks
				deterioration, logistical closures, supply/fuel scarcities.
Activity 1.1.1	Drill water wells in the villages outside of Old Fangak including Pankir, Diengdieng, Wanglei, Chotbora and Paguir			
Output 1.2	Existing water points in Fangak County are rehabilitated as needed to serve 5,000+	<ul style="list-style-type: none"> # of Existing water points rehabilitated 	<ul style="list-style-type: none"> New water well location, output and quality will be documented and photographed 	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available to transfer supplies & staff to Old Fangak. RISKS: Security deterioration, logistical closures, supply/fuel scarcities.
Activity 1.2.1	Assess number of water points requiring rehabilitation in Fangak County within a 25 km radius of Old Fangak			
Activity 1.2.2	Engage local WASH Committee (if it exists) to identify the problem, solution and inputs needed			
Activity ...	Work with local WASH Committee (if present) to rehabilitate water point			
Outcome 2	Improved health as a result of increased hygienic practices and improved sanitation.	A decrease in number of diseases transmitted via fecal/oral route, specifically diarrheal diseases in children.	<i>Child diarrhea cases reported at the Old Fangak Primary Health Care Clinic</i>	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available for ASMP operations. RISKS: Security deterioration, logistical closures, supply/fuel scarcities impede operations.
Output 2.1	Families receiving a hygiene kit (clean jerry water cans to transport water).	<ul style="list-style-type: none"> Number of households who receive hygiene kits (Jerry-cans) 	Number of cans distributed & names of households will be recorded.	Situation normal; RISKS: supplies do not arrive due to security/logistic constraints
Activity 2.1.1	Identify a Community Leader and PHCC Community Health Workers (CHWs) to define the best policies and procedures for distributing 100 clean jerry cans to needy families.			
Activity 2.1.2	Distribute in a sensitive, fair and equitable manner. Determine best practices for jerry can distribution.			
Output 2.2	People provided with sustained access to hygienic latrine facilities	<ul style="list-style-type: none"> Number of people provided with access to hygienic latrines Number of hand washing stations constructed to serve approximately 20 latrines. 	Hand washing station locations will be documented; photos taken	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available to transfer supplies & staff to Old Fangak. RISKS: Security deterioration, logistical closures, supply/fuel scarcities.
Activity 2.2.1	Use rain-water catchment to construct hand-washing stations; one at the old PHCC, two at the new PHCC (on opposite ends)			
Output 2.3	People provided with sustained access to hygienic latrine facilities	<ul style="list-style-type: none"> 10 pit latrines rehabilitated (1400 men, 1400 women, 1100 age 0-14) 	New latrine locations will be documented; photos taken	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be

LOGICAL FRAMEWORK				
CHF ref./CRP Code: SSD-14/WS/60851		Project title: Fangak County Water & Hygiene Project		Organisation: <u>Alaska Sudan Medical Project</u>
Goal/Objectives/Outcomes/Outputs		Indicator of progress	Means of Verification	Assumptions and Risks
		girls, 1100 age 0-14 boys in Pankir and Wangchot bomas).		available to transfer supplies & staff to Old Fangak. RISKS: Security deterioration, logistical closures, supply/fuel scarcities.
Activity 2.3.1	Rehabilitate and relocate 8 latrine structures to new locations around Old Fangak to increase coverage; dig new pits w/liners at each location;			
Activity 2.3.2	Rehabilitate and relocate 2 latrine structures to the schools at Pankir and Wangchot; dig a new pit w/liners at each location.			
Output 2.4	People trained on hygiene promotion messages to be shared with their community.	# of people trained on hygiene promotion messages to be shared with their community <ul style="list-style-type: none"> 150 (120 women, 30 men) will be trained on water gathering/storage techniques and hand-washing techniques, and shared with community 	1. Hygiene trainings documented, including name of recipients; upon completion, trainees receive jerry can 2. Names of trainers documented; adoption of the hand-washing behavior will be observed by PHCC Dr. Jill Seaman.	Security situation will be stable; RISKS: Security/logistics prevents staff mobilization needed for training opportunities.
Activity 2.4.1	100 families will be identified for hygiene training, which will include proper hygienic use of jerry cans to avoid cross-contamination, further instruction as to the health benefits of well water versus river water, and basic hand-washing. Upon completion of training, gygienic water jerry cans will be distributed.			
Activity 2.4.2	Three hand-washing stations will be constructed by ASMP volunteers, upon completion 50 CHWs & community leaders will be trained in proper hand-washing and given skills to train clinic patients to adopt the practice.			
Outcome 3	Increase capacity of locals to construct boreholes and manage water services.	# of Community members trained on management of water, sanitation and hygiene services.	Document the # of wells constructed & repaired by locals, and # of people receiving training.	Under-utilization of clean water resources & training by locals due to behavioural barriers. Security/logistics prevents training opportunities.
Output 3.1	Well-drilling apprentices receive training in well drilling and maintenance. WASH committee members receive further training & resources for borehole rehabilitation and water testing.	# of Community members trained on management of water, sanitation and hygiene services: <ul style="list-style-type: none"> 6 well drilling apprentices receive training in management of water resources 12 WASH Committee members receive training in management of water 4 community members trained in CLTS 	<ul style="list-style-type: none"> Names and hours of training received by well drilling trainees will be documented Names and trainings conducted for WASH Committee members will be documented. Repair kits distributed to WASH Committees will be documented. Names of leaders of CLTS receiving CLTS training will be recorded. Number of trigger events initiated by 	Security situation will be stable; river transport on Zaref River will be open; adequate logistical options will be available to transfer supplies & staff to Old Fangak. RISKS: Security deterioration, logistical closures, supply/fuel scarcities.

LOGICAL FRAMEWORK			
CHF ref./CRP Code: SSD-14/WS/60851		Project title: Fangak County Water & Hygiene Project	
		Organisation: <u>Alaska Sudan Medical Project</u>	
Goal/Objectives/Outcomes/Outputs	Indicator of progress	Means of Verification	Assumptions and Risks
		trainers will be recorded.	
Activity 3.1.1	6 apprentices receiving hands-on training during well drilling of 5 boreholes		
Activity 3.1.2	Existing boreholes and hand pumps will be rehabilitated as needed by the local WASH Water Committee under consultation by ASMP's drilling contractor and the ASMP Project Manager		
Activity 3.1.3	12 WASH Committees members will be given the proper tools, supplies, training and support as needed.		
Activity 3.1.4	A CLTS campaign will be led by ASMP's Sudanese Project Manager Stephen Ayul. The support of the local RRC Coordinator will be solicited. 4 community leaders will be identified and given training and resources to conduct a CLTS campaign in Old Fangak.		

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:	01 August 2014	Project end date:	31 March 2015
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Activities	Q2	Q3/2014			Q4/2014			Q1/2015			Q2/2015	
	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Activity 1 Purchase all materials needed for Project Activities			X	X								
Activity 2 Ship necessary items to Fangak County				X	X							
Activity 3 Volunteers and contractor arrive in Old Fangak to begin borehole drilling operations					X	X	X					
Activity 4 Perform borehole drilling and well implementation, including training						X	X					
Activity 5 Distribute hygienic jerry cans, including water hygiene training							X					
Activity 6 Rehabilitate water points as needed, including training							X	X				
Activity 7 Construct hand-washing stations, including training on proper use and maintenance							X	X				
Activity 8 Complete all activities in project, including monitoring and reporting								X	X			
Activity 9 Submit final reports as needed											X	

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