

## Project Proposal

Organization	IRC (International Rescue Committee)																																
Project Title	Strengthening protection, GBV and child protection response and prevention services in humanitarian settings in South Sudan																																
Fund Code	SSD-15/SA1/P/INGO/316																																
Primary Cluster	PROTECTION	Secondary Cluster	None																														
Project Allocation	1st Round Standard Allocation	Allocation Category Type	Frontline services																														
Project budget in US\$	532,000.27	Planned project duration	6 months																														
Planned Start Date	01/01/2015	Planned End Date	30/06/2015																														
OPS Details	OPS Code	SSD-15/P-HR-RL/72816	OPS Budget	0.00																													
	OPS Project Ranking		OPS Gender Marker																														
Project Summary	<p>In response to the growing humanitarian crisis in Lakes and Unity States, IRC is proposing the following interventions to expand lifesaving GBV, protection and child protection services to vulnerable populations in South Sudan. The complexity of the operating environment requires multifaceted approaches that are tailored to each location including: 1. Mobile GBV and Protection emergency response services in Lakes State IRC will expand protection and GBV emergency response through teams based out of Rumbek Center County providing services in two new locations in Lakes State selected based on needs assessments. The proposed six month emergency intervention is designed to: • Increase women and adolescent girls access to life saving GBV case management psychosocial support (PSS) services and protections to reduce risks of GBV. • Integrate protection monitoring and mainstreaming into the GBV intervention to improve the overall context analysis and integration of protection principles in the intervention that will be scaled up to respond to the identified needs. • Enhance understanding and analysis among humanitarian actors on the protection context and needs. IRC will utilise existing internal emergency response capacity to staff these teams to provide timely, effective and efficient GBV and protection responses during the project period with a six month deployment to Lakes State. This will offer an opportunity to provide much needed humanitarian services in Lakes State to areas without GBV and Protection services. 2. Child Protection interventions in Koch County The child protection intervention has been specifically designed to be integrated within IRC's existing protection program in Koch County, which are aimed at strengthening community-based protection mechanisms (CBPM) and facilitating access to information and appropriate services. • Through existing Community Protection Committees (CPC), provide a platform to establish community-based child protection mechanisms (CBCPMs) to facilitate the identification of and response to child protection concerns, the development of community-based mitigation plans, prevention messaging (e.g. on forced recruitment) and child protection surveillance mechanisms. In addition, the CBCPMs will identify and refer vulnerable children in need of individual support. • Operate three safe healing and learning spaces for children that facilitate their recovery, restore a sense of normalcy, and promote their cognitive, physical, social and emotional development and provide parenting support. • Youth engagement to provide peer support, recreational activities and referral to the FSL programming as an entry point to develop future intervention with Children Associated with Armed Forces/Groups.</p>																																
Direct beneficiaries	<table border="1"> <thead> <tr> <th></th> <th>Men</th> <th>Women</th> <th>Boys</th> <th>Girls</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Beneficiary Summary</td> <td>1034</td> <td>2101</td> <td>1870</td> <td>1580</td> <td>6,585</td> </tr> <tr> <td colspan="6"><b>Total beneficiaries include the following:</b></td> </tr> <tr> <td>People in Host Communities</td> <td>134</td> <td>591</td> <td>510</td> <td>245</td> <td>1480</td> </tr> <tr> <td>Internally Displaced People</td> <td>900</td> <td>1510</td> <td>1625</td> <td>1070</td> <td>5105</td> </tr> </tbody> </table>				Men	Women	Boys	Girls	Total	Beneficiary Summary	1034	2101	1870	1580	6,585	<b>Total beneficiaries include the following:</b>						People in Host Communities	134	591	510	245	1480	Internally Displaced People	900	1510	1625	1070	5105
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Indirect Beneficiaries	Catchment Population																																
Link with the Allocation Strategy	<p>Responses to address the recent conflict, displacement and violence in Lakes and Unity State are current priorities within the Protection Cluster in South Sudan. The proposed interventions are centrally located within all of the 2015 protection cluster objectives. GBV and Protection, Lakes State will respond to the needs of vulnerable populations including women and girls affected by the recent conflict in Lakes State and will build on existing IRC GBV responses that are already in place in Rumbek Center, Rumbek East and Wulu. These locations are very dispersed and there are few organizations providing GBV or Protection services and health facilities are not equipped to offer clinical care for sexual assault survivors at present. IRC will utilize internal emergency response capacity to respond to this emerging crisis and will set up a mobile response team to provide GBV case management and PSS, information, protection monitoring and risk mitigation activities services in two locations in Lakes State. This will be a short term response for a period of six months and provide much needed services in affected locations. A key focus of this intervention will include strengthening health services for survivors and establishing local level GBV coordination and referral systems with other local and international actors. IRC protection will conduct weekly protection monitoring in consultation with affected populations focusing on human rights violations and targeted violence, discrimination, coping mechanisms, and problems related to access to services, analyze the findings and share protection monitoring reports with clusters and other humanitarian actors to inform advocacy and recommend programming adjustments. In addition, the protection team will provide mainstreaming training to services providers in these areas. Child Protection, Unity State: The child protection team will operate three safe healing and learning spaces for children and will provide psychosocial and recreational support through structured and age-appropriate group and individual activities, including recreational, skill building, and basic learning activities. These spaces will also provide children with a protective and conducive environment to play, socialize, learn, express themselves and receive tailored support as they and their caregivers rebuild their lives. The child protection team will also provide psychosocial support services and activities that will reach children, youth and caregivers thereby strengthening the continuum of care for vulnerable children both inside and outside of the home. The parenting skills training will be based on an existing standardized 10-module IRC parenting curriculum. Three modules have already been adapted to the South Sudan context. The remaining modules (package of 10) will need to be contextualized and piloted in the South Sudan context. In addition to activities that target children, there will be a youth component, where youth will be engaged to assist in the design and delivery of age appropriate activities for younger children and will also participate in a mentorship model with the adult facilitators who will provide the youth with life skills building. Youth will also be engaged in recreational activities and group discussions to address their psychosocial needs and they will be supported to access livelihood opportunities implemented by other service providers. An assessment on the scope of child recruitment will be undertaken and shared at national level to explore potential strategies to address this issue.</p>																																
Sub-Grants to Implementing Partners	Other funding Secured For the Same Project (to date)																																
Organization focal point contact details	<table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Phone</th> <th>Email</th> </tr> </thead> <tbody> <tr> <td>Caroline Lai</td> <td>Grants Coordinator</td> <td>+211 (0)954 790 125</td> <td>caroline.lai@rescue.org</td> </tr> </tbody> </table>			Name	Title	Phone	Email	Caroline Lai	Grants Coordinator	+211 (0)954 790 125	caroline.lai@rescue.org																						
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<b>BACKGROUND INFORMATION</b>																																	
<b>1. Humanitarian context analysis.</b> Humanitarian context: Describe the current humanitarian situation in the specific locations where this project will be implemented	<p>Violence against women and girls has been one of the most neglected casualties of the current crisis. Findings from IRC's five rapid GBV assessments in Lakes, Unity and Central Equatoria, coupled with programming experience, indicate that women and girls have seen an increased risk of violence due to the increased presence of military actors, mass displacement and limited humanitarian response. Rape, sexual exploitation, abduction and intimate partner violence are widespread and GBV services are very limited. The escalating food insecurity increases risks of GBV as women and girls have to walk longer distances in search of food or are forced into exploitative situations to survive. The availability of trained medical personnel to provide CCSAS and basic PSS continue to be insufficient. Few have access to lifesaving GBV services and in some locations where health agencies are working, health facilities are unable to provide post rape care due to a lack of trained staff, limited supplies and treatments. Unity State has been affected by prolonged conflict and is plagued by annual flooding. Given the proximity of the frontline and the potential for conflict to intensify in the coming dry season, it is likely that forced recruitment will continue for the foreseeable future. Many IDPs have suffered from repeated displacement due to shifting conflict lines and the search for basic commodities. Services in Unity are almost non-existent and many walk 3-5 hours to access available services. Without assistance to safely access services, individuals are at risk of relying on negative coping mechanisms. Children are often at highest risk for being directly affected by negative coping mechanisms with few protective strategies available to them; and increased exposure to violence can have a lasting and detrimental effect on their development. During IRC's August 2014 multi-sector need assessment in Koch County, most participants reported that while they previously had community support groups, these have since broken down as everyone is now focused on the conflict or finding ways to provide basic needs for their family. While the humanitarian response has primarily focused on conflict affected areas, the impact of instability and violence continues to resonate in lesser affected states. Lakes State in particular, has witnessed an increase in violence and general insecurity, resulting in displacement into remote or flood prone areas. In October, the Protection Cluster highlighted the severe humanitarian situation and need for an immediate scale up to respond to the critical needs of affected populations in Lakes. Growing tensions between SPLA and cattle camp youth and the introduction of a "civilian disarmament" campaign in October has led to a spate of violent clashes. Protection partners are concerned that this will exacerbate tensions, proliferate weapons and entrench conflict in states outside of current conflict affected states. A November IRNA carried out in Rumbek North identified high levels of destruction of land and property due to flooding with increasing levels of violence across the county. Risks of violence are high due to increasing food insecurity, displacement and growing levels of insecurity. Protection and GBV services are minimal and there is no clinical care available for GBV survivors in many locations.</p>																																
<b>2. Needs assessment.</b> Explain the	The November 2014 IRNA and recent Lakes States Humanitarian and Protection Situation Updates continue to highlight the escalation of insecurity and violence																																

specific needs of the target group(s), explaining existing capacity and gaps. State how the needs assessment was conducted, list any baseline data and explain how the number of beneficiaries has been developed. Indicate references to assessments such as Multi-cluster/sector Initial Rapid Assessments (MIRA)

throughout Lakes. Key concerns include growing displacements of populations in Yirol West, Rumbek North, Rumbek Center, Cuelbet and more recently Awerial. This recent conflict-affected displacements worsens existing displacements due to flooding and violence which had displaced over 20,000 people by October 2014. Sexual violence and other forms of GBV against women and girls are becoming more widespread in Lakes due to continued conflict and population movement. Since mid-2014 through IRC's existing programming, and in line with Protection Cluster findings, IRC has noted increasing and targeted attacks against women and girls with growing levels of sexual violence perpetrated. These are linked to the escalating insecurity, militarization of political leadership, mobilization of armed groups and instability caused by violent cattle raiding. Adolescent girls are particularly vulnerable to multiple forms of violence and have limited support systems and access to information. The recent and ongoing insecurity disproportionately affects adolescent girls. Based on programming experience in Awerial and Rumbek, the majority of adolescent girls are out of school, experience growing levels of sexual violence, abductions, sexual harassment, early and forced marriage, sexual exploitation and abuse and have restrictions placed on their movement by their families. In IRC's GBV intervention in Lakes, at least 30% of beneficiaries targeted through PSS activities will be adolescent girls. According to the Lakes November update, conflict affected communities continue to have cattle confiscated or looted by state security actors. This depletion of assets is significant for counties falling under category 4 of the IPC. The cattle camp youth in Cuelbet, Rumbek East, Rumbek Center, Wulu and Rumbek North staged inter and intra-clan conflicts that have resulted into approximately 2,000 deaths and thousands wounded. The conflicts were then followed by revenge killings, arrests and detentions and robbery along the main roads of Rumbek Center, Rumbek North and Yirol. The situation is compounded by recent fighting and clashes. Responding to these new crises requires a targeted emergency response outside of the current IRC program sites in Rumbek Center, increased staffing and mobile emergency programming that meet the immediate needs of dispersed populations affected by the humanitarian crisis. IRC will utilize existing internal capacity to respond quickly and effectively to emerging crisis and will provide emergency GBV and Protection responses to two new locations in Lakes State over a six month period. Children are often at highest risk for being directly affected by negative coping mechanisms with few protective strategies available to them and yet the more exposure to violence a child experiences, it can have a lasting and detrimental effect on their development. There are also reported cases of child-headed households, where children are taking care of other children and/or their siblings and many of them suffer from lack of food, parental advice, and are exploited through child labor – including prostitution. Reportedly, unaccompanied children lack access to basic services such as food, water, education, and health care. Unaccompanied children also lack proper clothing, time for play, and freedom of expression. The proximity to conflict lines and the use of children to obtain food from Mayom, amplified the risks, including imminent threats to their lives through recruitment into armed forces, abduction, rape and other assault. While, all schools have re-opened in Koch Town, not all children under 5 have access to recreational and psychosocial support in Koch town where the highest number of children is currently living.

**3. Description Of Beneficiaries**

Child Protection: In total, 1,000 boys and girls under the age of 18 and adults in Koch Town, regardless if they are from the IDP or host community will benefit from the IRC's child protection programming. IDP and host community children and their caregivers will participate in age-appropriate psychosocial and parenting activities and children will be actively involved in the design and implementation of the activities. Children will help shape and design the psychosocial support activities and determine the times and days that are most convenient. Primary caregivers will be consulted for the roll out of parenting sessions. Primary caregivers will also be consulted when mapping threats to the protection of their children within the community. Adults, in particular parents and community leaders, will also be directly involved in the design of the program, particularly during the establishment of the CBCPMs. Community members who are active in the CBCPMs will be trained on child protection. In Lakes State, IRC GBV and Protection will undertake joint needs assessments to identify two new locations in Rumbek North, Rumbek East, Cuelbet, Yirol West or Yirol East County selected based on needs that will be conducted at the beginning of the project. GBV: IRC's Women's Protection and Empowerment (WPE) staff will conduct a rapid GBV assessment to identify protection concerns among women and girls, assess patterns and risks factors for GBV. Beneficiaries will be identified through rapid GBV assessments during initial deployment and start up. While all women and girls are at risk of GBV, IRC will lead FGDs and key informant interviews to understand who are the most vulnerable and adapt services to prioritize their specific needs. Existing assessments show heightened vulnerabilities for • female-headed households; • unmarried adolescent girls; • elderly women; • disabled women and girls; and • those with mental illnesses Protection: IRC's protection team will undertake rapid protection assessments to provide an overview of the emergency situation in Lakes State that ascertains the immediate needs of the population, identifies any human rights violations, and assesses the main protection risks in the targeted area. The results of the assessment will be shared with the national Protection Cluster, which will help to define priorities for humanitarian action and inform follow-up response. The identified urgent protection cases will be referred to appropriate service providers, including the GBV case management. Protection and GBV staff will also conduct regular safety audits during deployment to assess emerging risks. Targeted beneficiaries may include: • Unaccompanied minors; • Elderly without family support; • Women and children; • Persons with disabilities; and • Minorities and other vulnerable groups

**4. Grant Request Justification.**

Currently, IRC is the largest protection service provider in South Sudan with a presence in three out of the five conflict affected states and is well positioned to lead emergency responses. Following the fighting in December 2013, IRC was one of the first organizations to launch emergency GBV and Protection responses in Juba, then emergency responses in Awerial, and Bentiu and through the establishment of two GBV rapid response teams who deploy to hard-to-reach, insecure areas. More recent expansion of protection programming has included Koch and Nyal. GBV: IRC's global GBV ER&P model has been adapted to South Sudan and has informed IRC's emergency response. The model has been adapted to the South Sudan context and has informed the emergency responses that IRC has led since conflict broke out last year. Currently, IRC is the largest GBV service provider in South Sudan with a presence in three out of the five conflict affected states and therefore has a strong base from which to lead preparedness efforts. In Lakes, IRC has existing WPE programming in three counties and continues to provide direct services to women and girls by providing PSS/GBV case management and clinical care for GBV survivors in an IRC supported clinic in the Rumbek State Hospital. Child Protection: IRC initiated child protection programming in Ganyliel in October 2014 and intends to expand to Koch based on needs identified. In Koch, IRC has an established protection program and works closely with Nonviolent Peaceforce (NP) to ensure a coordinated and complementarily approach to cover the child protection needs. For instance, NP is focusing its work with UASC and will receive referrals from IRC. IRC has considerable global experience and expertise in emergency responses for conflict-affected children. IRC will use the lessons learnt of the Ganyliel pilot and tools and training modules adapted to South Sudan to establish, strengthen and support child protection mechanisms and families to better protect their children through the identification of the most vulnerable children and through psychosocial support activities. Protection: IRC brings considerable experience in South Sudan and global expertise in emergency protection responses for conflict-affected populations. As a lead NGO in protection and protection mainstreaming, IRC has been supporting protection mainstreaming-related support, including at WFP distributions. In 2014 Since 2013, IRC piloted a protection mainstreaming project in six nine countries based upon a field-tested methodology of training, action-planning and mentoring. with the aim of documenting promising practices. Based upon promising practices, IRC has produced various tools -endorsed across all IRC sectors- that provide concrete actions to mainstream protection. IRC has also developed guidance notes informing practitioners about simple and straightforward actions to promote the respect of protection principles into specific sectors or situations including emergencies that will be disseminated to IRC sectors and other partners working in emergency response .

**5. Complementarity.** Explain how the project will complement previous or ongoing projects/activities implemented by your organization.

In Lakes State, from a base in Rumbek Center, the IRC has existing WPE programming in Rumbek East, Rumbek Central and Wulu Counties and continues to provide direct services to women and girls who experience sexual violence through psychosocial support/GBV case management and clinical care for GBV survivors in an IRC supported clinic located at Rumbek State Hospital. IRC also works closely with the Ministry of Social Development and local organizations to build capacity around GBV response and prevention and with local women's and adolescent girls groups to provide leadership trainings and promote empowerment. Additionally, there is a hotline for survivors to access information and report cases 24 hours a day. The WPE programming around Rumbek is largely development focused and geared towards promoting women's safety and empowerment through development of capacity, systems and institutions. The clinic at Rumbek State Hospital alone is not suited to respond to the increasingly present needs across the state. During recent conflicts, there have been increased levels of targeted abuses against women and girls with growing levels of sexual violence in reprisal attacks perpetrated. In response to the growing humanitarian crisis in Lakes linked to the increased militarisation, inter-clan conflict, and displacements, IRC will set up a six month emergency response s to serve two new locations from Rumbek Central based on needs identified in Rumbek North, East or Yirol. Complementary protection programming will ensure to gather information and analysis on key protection concerns faced by the target population, including human rights violations and targeted violence, discrimination and problems related to access to services. Based on the findings of the protection monitoring, the IRC Protection Monitoring teams will produce reports that will identify protection trends and concerns without compromising confidentiality so information can be shared internally for program adaptation and support, and with the humanitarian community through the Protection Cluster to inform advocacy initiatives. Complementary of the protection programming with other sectors will be ensured through the analysis of barriers to accessing services. The IRC will advocate for addressing those barriers to the relevant service provider or Cluster. The IRC will actively pursue various stakeholders to raise awareness and advocate for changes in practices, policies and procedures to assist in solving the protection concerns identified via protection monitoring. Additionally in Lakes, IRC has existing GBV and Protection programming in Mingkaman and Ahou in Lakes State serving an IDP population of approximately 100,000. Programming was set up in February 2014 in response to the influx of IDPs following the outbreak of conflict in December 2013. From both GBV and protection perspectives, this will complement analysis for Lakes as a whole and provide nuanced information, patterns and trends on GBV and protection issues across much of the State. In August 2014, IRC set up Protection, Health and WASH programming in Koch County. As part of this proposed intervention, IRC will establish child protection emergency response programming in Koch County. This child protection project will complement the efforts of Nonviolent Peaceforce who is currently implementing a child protection project focused on the identification, documentation, follow up and reunification of UASC. Moreover, this project will be complemented by a DFID funded GBV emergency response due to begin in February 2015 and IRC will establish GBV emergency response programming in Koch with static services in Koch town and mobile teams serving two payams anticipated to be Buaw and Mirmir.

**LOGICAL FRAMEWORK**

**Overall project objective** To strengthen protection, GBV and child protection response and prevention services in humanitarian settings in South Sudan

**Logical Framework details for PROTECTION**

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
2015 SSO 1: IDPs and conflict-affected people facing protection risks and threats are provided with timely protection response and prevention services	SO 1: Save lives and alleviate suffering by providing multi-sector assistance to people in need	60
2015 SSO 2: Protection needs of the most vulnerable IDPs and conflict-affected people are identified through effective protection monitoring, reporting and response, including promoting safe movement and durable solutions	SO 2: Protect the rights of the most vulnerable people, including their freedom of movement	20
2015 SSO 3: Ensure vulnerable people affected by violence have the skills, opportunities and positive coping strategies required to return and reintegrate into their communities in safety and dignity	SO 1: Save lives and alleviate suffering by providing multi-sector assistance to people in need	20

**Outcome 1** Vulnerable populations have increased access to life saving protection, health, case management and PSS services and risks of GBV are reduced through improved multi-sectoral

and community-based protections in Lakes State.

Code	Description	Assumptions & Risks
Output 1.1	Lifesaving, age appropriate GBV case management and PSS services are available to women and girls in Lakes State through emergency response teams	Risks: •Community are not supportive of IRC GBV and Protection programming  Assumptions: •GBV survivors are willing to report GBV and access services

**Indicators**

Code	Cluster	Indicator	End Cycle Beneficiaries				End-Cycle Target
			Men	Women	Boys	Girls	
Indicator 1.1.1	PROTECTION	[Frontline services] [Gender-based violence] % of GBV survivors receiving psychosocial response receive services in line with standards for quality care	0	100	0	0	100
		<b>Means of Verification:</b>	GBV Information Management System (IMS) reports; case management notes and records; activity data reports; monitoring reports/case studies				
Indicator 1.1.2	PROTECTION	[Frontline services] [Gender-based violence] % of community based health workers trained in CMR and PSS support for GBV survivors	50	50			100
		<b>Means of Verification:</b>	Training reports; training pre-post tests to assess knowledge				
Indicator 1.1.3	PROTECTION	# women and girls reached through PSS activities at IRC Safe Spaces					1500
		<b>Means of Verification:</b>	Activity data reports; monitoring reports; evaluations of services				

**Activities**

Activity 1.1.1	Conduct a GBV rapid assessment to select areas most in need of emergency GBV responses and identify two locations to be serviced by mobile teams based out of Rumbek Center (Rumbek North, East or Yiro)
Activity 1.1.2	Establish safe spaces to provide life saving, age appropriate GBV case management and PSS services to women and girls to 1,500 women and girls
Activity 1.1.3	Provision of trainings to ensure clinical care for sexual assault survivors is available and accessible in health facilities in new locations
Activity 1.1.4	Strengthen local level coordination on GBV and improve the functioning of GBV referral pathways to ensure women and girls have timely and confidential access to life saving services

Code	Description	Assumptions & Risks
Output 1.2	Vulnerable populations, including women and girls face reduced risks and benefit from an improved protective environment through community engagement, advocacy and risk mitigation activities	Risks: •Roads are insecure preventing safe transportation of goods and staff. •Mass movements of IDPs exceed current trends  Assumptions: •Humanitarian service providers participate and implement actions to improve women and girls safety •Community structures and humanitarian partners are supportive of addressing GBV and protection risks identified

**Indicators**

Code	Cluster	Indicator	End Cycle Beneficiaries				End-Cycle Target
			Men	Women	Boys	Girls	
Indicator 1.2.1	PROTECTION	[Frontline services] # of protection reports and advocacy initiatives undertaken					1
		<b>Means of Verification:</b>	Minutes of protection cluster; monitoring reports				
Indicator 1.2.2	PROTECTION	# of community members reached with information dissemination on available services and with behaviour change messages on protection and GBV in emergency settings (target: 1,000 women, 1,000 men, 1,000 girls and 1,000 boys)					4000
		<b>Means of Verification:</b>	Activity data reports; weekly and monthly reports; monitoring reports/case studies				
Indicator 1.2.3	PROTECTION	# of services providers trained on protection mainstreaming (target: 20 staff /5 locations)					100
		<b>Means of Verification:</b>	Training report				

**Activities**

Activity 1.2.1	Conduct community outreach targeting 4,000 community members to raise awareness on services and facilitate confidential referrals to GBV response services
Activity 1.2.2	Conduct safety audits and community discussions to identify risks faced by the community, in particular by vulnerable/marginalized groups within the society, and develop strategies to address these in collaboration with local communities and humanitarian actors
Activity 1.2.3	Conduct weekly protection monitoring in consultation with affected population to monitor violations, discrimination, exclusion, coping mechanisms, and access to services, analyze the findings, refer urgent protection cases and share protection monitoring reports with clusters and other humanitarian actors to inform advocacy and recommend adjustments to programming
Activity 1.2.4	Conduct protection mainstreaming workshop with all services providers on the integration of protection principles in their day to day work

Code	Description	Assumptions & Risks
Outcome 2	Conflict-affected children have access to safe spaces and appropriate existing services and support in Koch County	
Output 2.1	Three safe healing and learning spaces are set up and provide psychosocial activities for children and youth	Assumptions: • Parents are willing to send to their children the SHLS • Communities support on a voluntary basis the functioning of the SHLS  Risks: • Threats of fighting and ongoing battles escalate and humanitarian access is limited

**Indicators**

Code	Cluster	Indicator	End Cycle Beneficiaries	End-Cycle
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			Men	Women	Boys	Girls	Target
Indicator 2.1.1	PROTECTION	[Frontline services] [Child Protection] # of crisis affected children receiving psychosocial support and services			360	540	900
		<b>Means of Verification:</b> Monthly reports; visit records; psychosocial support action plans; attendance lists; monitoring reports/case studies					
Indicator 2.1.2	PROTECTION	Number of caregivers attending psychosocial parenting sessions (25 caregivers per safe spaces)					75
		<b>Means of Verification:</b> Monthly reports; attendance lists; monitoring reports/case studies					
Indicator 2.1.3	PROTECTION	# of youth participating in activities					100
		<b>Means of Verification:</b> Monthly reports; visit records; psychosocial support action plans; attendance lists; referral tracking to FSL programming; monitoring reports/case studies					
Indicator 2.1.4	PROTECTION	# of safe and healing spaces established					3
		<b>Means of Verification:</b> Monitoring visits; operational spaces in existence					

**Activities**

Activity 2.1.1	Establish three safe healing and learning spaces in Koch County
Activity 2.1.2	Train and support Psychosocial Animators to interact with and support emergency affected children within their communities
Activity 2.1.3	Support Psychosocial Animators in the set up and running three safe spaces for children
Activity 2.1.4	Provide psychosocial support activities for children, and youth

<b>Output 2.2</b>	Community-Based Child Protection Mechanisms are strengthened in Koch County	<p>Assumptions:</p> <ul style="list-style-type: none"> <li>• Parents are willing to send to their children the SHLS</li> <li>• Communities support on a voluntary basis the functioning of the SHLS</li> </ul> <p>Risks:</p> <ul style="list-style-type: none"> <li>• Threats of fighting and ongoing battles escalate and humanitarian access is limited</li> </ul>
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**Indicators**

Code	Cluster	Indicator	End Cycle Beneficiaries				End-Cycle Target
			Men	Women	Boys	Girls	
Indicator 2.2.1	PROTECTION	# of Community-Based Child Protection Mechanisms with strengthened capacities to implement functioning risk reduction action and monitoring plan (1-2 CP focal point per new or established CPCs)					10
		<b>Means of Verification:</b> Monthly reports; meeting minutes; action plans; monitoring reports/case studies					
Indicator 2.2.2	PROTECTION	[Frontline services] [Child Protection] % of targeted communities with a functioning referral system for children at community level					80
		<b>Means of Verification:</b> Monthly reports; meeting minutes; action plans; referral tracking system; monitoring reports/case studies					

**Activities**

Activity 2.2.1	Train dedicated child protection focal points from the established Community Protection Committee to strengthen Community-Based Child Protection Mechanisms
Activity 2.2.2	Identify and respond to key child protection concerns in conjunction with CPCs and integrate risk reduction action and monitoring plans to address and monitor the specific child protection concerns

**WORK PLAN**

Project workplan for activities defined in the Logical framework	Activity Description (Month)	Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
	Activity 1.1.1 Conduct a GBV rapid assessment to select areas most in need of emergency GBV responses and identify two locations to be serviced by mobile teams based out of Rumbek Center (Rumbek North, East or Yiröl)	2015	X	X											
	Activity 1.1.2 Establish safe spaces to provide life saving, age appropriate GBV case management and PSS services to women and girls to 1,500 women and girls	2015		X	X	X	X	X							
	Activity 1.1.3 Provision of trainings to ensure clinical care for sexual assault survivors is available and accessible in health facilities in new locations	2015			X		X								
	Activity 1.1.4 Strengthen local level coordination on GBV and improve the functioning of GBV referral pathways to ensure women and girls have timely and confidential access to life saving services	2015			X	X	X	X							
	Activity 1.2.1 Conduct community outreach targeting 4,000 community members to raise awareness on services and facilitate confidential referrals to GBV response services	2015		X	X	X	X	X							
	Activity 1.2.2 Conduct safety audits and community discussions to identify risks faced by the community, in particular by vulnerable/marginalized groups within the society, and develop strategies to address these in collaboration with local communities and humanitarian actors	2015		X	X	X	X	X							
	Activity 1.2.3 Conduct weekly protection monitoring in consultation with affected population to monitor violations, discrimination, exclusion, coping mechanisms, and access to services, analyze the findings, refer urgent protection cases and share protection monitoring reports with clusters and other humanitarian actors to inform advocacy and recommend adjustments to programming	2015	X	X	X	X	X	X							

Activity 1.2.4 Conduct protection mainstreaming workshop with all services providers on the integration of protection principles in their day to day work	2015			X		X														
Activity 2.2.1 Train dedicated child protection focal points from the established Community Protection Committee to strengthen Community-Based Child Protection Mechanisms	2015	X	X																	
Activity 2.2.2 Identify and respond to key child protection concerns in conjunction with CPCs and integrate risk reduction action and monitoring plans to address and monitor the specific child protection concerns	2015		X	X	X	X	X													
Activity 2.1.1 Establish three safe healing and learning spaces in Koch County	2015	X	X																	
Activity 2.1.2 Train and support Psychosocial Animators to interact with and support emergency affected children within their communities	2015		X	X																
Activity 2.1.3 Support Psychosocial Animators in the set up and running three safe spaces for children	2015			X	X	X	X													
Activity 2.1.4 Provide psychosocial support activities for children, and youth	2015		X	X	X	X	X													

**M & R DETAILS**

**Monitoring & Reporting Plan:**

Describe how you will monitor the implementation of each activity. Describe the tools you plan to use (checklist, photo, questionnaires, interviews, suggestion box etc.) in order to collect data and how you will store data. Explain the frequency type and protocol of reporting (how often do you report about what to whom?). State if, when and how you plan to evaluate your project .

To support the development of evidence-based programming, IRC will strengthen M&E systems for all objectives, indicators and activities. Specific indicators are described in the attached logical framework. Monitoring of activities will be aligned with agreed work plans, the log frame, and performance indicators. Monthly progress reports on implementation will be submitted to the field and technical coordinators for review, including implementation and financial status, problems encountered and reparative measures, and any lessons learned. Program progress will be measured against indicators listed above and quality assurance of services will be assessed through site visits, review of records, and beneficiary feedback. Juba-based technical staff will review reports and conduct periodic visits to support and monitor the progress of the program. Within Protection and Child Protection programming, IRC has hired a M&E Specialist who is responsible for strengthening M&E systems of for all objectives, indicators and activities. The proposed monitoring framework was created with clear, attainable targets that will guide M&E efforts. The protection and child protection teams will compile regular activity reports, which will feed into an indicator tracking system to monitor the progress of implementation on a weekly, monthly, quarterly, and semi-annually basis. The Protection and Rule of Law Coordinator will also be responsible, in coordination with the IRC's South Sudan Grants Unit, for ensuring the timely submission of quality program progress reports. These reports will not only provide information on the qualitative and quantitative successes and challenges of the program, but also any lessons learned and plans for improving or better tailoring the project to the local context. To monitor programming, IRC protection team uses a variety of methods, including focus group discussions; regular safety; activity reports; PSN databases; surveys and assessments; protection monitoring reports; and staff monitoring visits. The IRC will develop and adapt tools (e.g., client satisfaction tool) to gather information, track progress of activities and identify gaps in program implementation. For the proposed GBV response programming, M&E by the WPE Manager with close supervision and support from the WPE Emergency Specialist, and WPE Coordinator to ensure that activities respond to needs and meet agreed targets. The IRC also uses participatory monitoring and evaluation through FGDs, individual interviews, and feedback mechanisms with women and girls across all activities. Case supervision tools to assess quality of care provided by IRC caseworkers will be used to identify areas for more training and mentoring to improve direct service delivery to survivors. Trainings outlined in this program will include pre- and post-tests to assess knowledge and learning among participants. Information obtained during ongoing monitoring activities is used to systematically evaluate, review, and update working methods to ensure that objectives are met. Incident data will be captured in the GBV Information Management System and reviewed regularly to understand trends in reporting. Monitoring and reporting of GBV response services is based on internationally recognized and endorsed standards for data collection, using the tools and protocols of GBV IMS. Identifiable information about specific GBV cases will not be shared with any partner outside of the context of consent-based referrals. Aggregate data is collected monthly and shared internally and with partners, according to information sharing protocols, to allow the analysis of service gaps and trends in reporting. Monthly meetings with referral partners allow for monitoring of good practice for referrals and mentoring of other service providers in GBV guiding principles. These measures ensure that no client data is shared without the express wishes of the survivor.

**OTHER INFORMATION**

**Accountability to Affected Populations**

Participatory assessments will be conducted at project inception to identify locations for interventions, and to assess protection concerns faced by the community, in particular by vulnerable/marginalized groups within the society, patterns and risks factors for violence and abuse. IRC will carry out service mappings of existing health, GBV, Child protection and protection, security and other actors including WASH, Shelter and Food to assess capacity and identify areas for technical support and training. As part of the start up in all locations, IRC will identify community volunteers to support programming and activities and train them on basic PSS so support can be available after the emergency response team leaves after six months. Much of the intervention is designed to provide immediate lifesaving support to in-need women, children and other persons with specific needs in conflict affected areas. In all locations, IRC will identify local and community based women's groups and organizations to support programming and activities and train them on basic PSS to enhance longer term sustainability. Staff and volunteers will be recruited from local communities and will most likely remain in these locations after IRC leaves. As part of strengthening health service provision for GBV survivors, IRC will work with and train health staff in government supported health facilities to be able to provide CCSAS that should make substantial contributions to expanding the availability of skilled health personnel in the long term. To strengthen the development of GBV referral pathway's IRC will also provide trainings on GBV basic concepts, survivor centred approaches, confidentiality and skills for dealing with survivors. IRC's protection teams will provide a range of trainings and support to enhance protection mainstreaming across sectors and strengthen protection monitoring. Within IRC women centres/safe spaces, regular consultations will be held with women and girls quarterly to ensure all programming responses are informed by their voices, experiences and recommendations. IRC has developed some tools and mechanisms to capture feedback on key aspects of programming to enhance the quality of services provided and these will be adapted for this project. This will also enhance learning's on client satisfaction with IRC services in emergencies and develop evidence based learning about how psychosocial support activities help women and girls and this will be used to inform future programming. IRC will continue to work closely with relevant partners to strengthen the effectiveness of responses, harmonise coordination, and ensure protection and GBV mitigation is integrated across responses. This will enable key stakeholder to inform programming and contribute to protection responses. Regular meetings will be held with community leaders, government officials, local and international partners. All IRC protection, child protection and GBV programming is designed to adhere to and uphold the humanitarian principles of Do No Harm. Prior to initiating any intervention, rapid assessments are conducted to assess needs in identified locations, current services and participatory methodologies including focus group discussions are held with communities and key informants that also provide a situational analysis of any unintended threats of responding in a particular location. For example, providing services in a highly militarized zone where access is not guaranteed or affected population could be placed at risk for accessing services.

**Implementation Plan: Describe for each activity how you plan to implement it and who is carrying out what.**

All project components will be carried out by the IRC. The IRC has recently reinforced its staffing structure to be able to support the expansion the IRC South Sudan witnessed responding to the crisis. The Senior Management Team (Country Director (CD), deputy Director of Programs (DDP), Deputy Director of Operations (DDO), Senior HR & Administration Coordinator and Finance Controller and two Deputy Directors of Field Management to provide adequate support to the increased number of field sites and field operations. Programming is led by the DDP along with specific program coordinators per sector. The DDP is responsible for ensuring and maintaining overall program quality through supervising technical staff, conducting monitoring visits, liaising with partners and donors, and supporting compliant, timely, efficient and effective project implementation. The DDFM is responsible for the support to and oversight of field sites and field operations. The Grants Coordinator and team provides grants management oversight and looks at donor compliance, supported by the Global Grants and Finance Units in New York. The Global Grants Unit provides technical recommendations for issues such as asset disposition, donor approvals and government regulations. The Finance Unit supports the Financial Controller and the in-country finance team through ensuring adherence to the international finance manual and donor financial regulations and provides technical assistance for financial reporting systems. The proposed project will be directly managed by field-based sector-specific program managers who will be responsible for the overall management and technical aspects of the project. The field-based program managers will report directly to their respective Field Coordinator to ensure that all operational and logistical support needed for the success of the project is provided. The program managers will receive remote technical support from Juba-based sector coordinators to ensure that the Action is implemented in accordance with the Sphere minimum standards and are technically sound. The sector coordinators will conduct periodic field visits to ensure that the project follows the implementation plan and meets the expectations of both the IRC and the program participants. As an additional layer, to support quality program implementation, program coordinators are supported by IRC's Women's Protection and Empowerment, Protection and Child Protection technical units at Regional/HQ level who provide dedicated technical support on programming parameters, tool design and support in M&E systems to ensure adherence to best industry-practices and standards. The IRC will continue to work closely with relevant partners to strengthen the effectiveness of GBV and protection responses, harmonize coordination, and ensure women's and girls' protection are integrated across responses. In all locations, the IRC will identify community staff and volunteers to be trained and support programming. Where possible, the IRC will work closely with local and community based women's organisations to build their capacity on GBV prevention and response.

**Coordination with other Organizations in project area**

Name of the organization	Areas/activities of collaboration and rationale
1. UNHCR	GBV coordination, referral pathway development and referrals for protection concerns
2. Ministry of Health at facilities in Lakes	Trainings on CCSAS, basic counseling, inclusion in GBV referral pathways
3. Nonviolent Peaceforce	Protection monitoring, analysis and referrals

	4. Ministry of Social Development	Trainings, referrals, GBV and Protection Coordination
	5. Save the Children	Education and Child Protection
	6. UNMISS	Patrols, Human rights, force protection
	7. OCHA	Humanitarian Coordination
	8. OXFAM	WASH, GBV and protection risk mitigation
	9. Local women's groups	Capacity building, awareness raising, PSS and advocacy
	10. UNICEF	Child protection, education and GBV
Environmental Marker Code	A: Neutral Impact on environment with No mitigation	
Gender Marker Code	2b-The principal purpose of the project is to advance gender equality	
Justify Chosen Gender Marker Code	Gender considerations are a key component within IRC's GBV, Protection and Child Protection interventions. Focus group discussions are broken out by age/gender to ensure that participants are comfortable voicing concerns and to facilitate a gender and age sensitive analysis of community needs (including children and the elderly). All indicators and activity tracking tools are designed to foster and track gender sensitive programming. Assistance is adapted to specific needs of different gender and age groups. Regular assessments ensure participation of beneficiaries in design, implementation and evaluation. Activities are designed to enhance capacity of local community (men and women) to protect women and children by working with them to develop supportive structures and systems. IRC will work to improve participation and representation of women within existing community structures. Without their participation, humanitarian response is not able to prioritize women's and girls' needs, causing GBV risks to remain unidentified and unaddressed. Across all interventions, IRC will work to promote women's and children's protection through the creation and development of networks, provision of psychosocial support, skill building and trainings at safe spaces as well as working with other humanitarian partners and community structures to reduce risks of violence and strengthen multi-sectoral and community-based protections.	
Protection Mainstreaming	The IRC will enhance the capacity staff of other service providers on the integration of protection principles in their day-to-day work. The IRC has developed a standard training kit, including sectoral guidance notes, informing practitioners about simple and straightforward actions to promote the respect of protection principles into specific sectors or situations including emergencies. These guidance notes will be adapted to the South Sudan context with the collaboration of the IRC's Technical Unit and disseminated, as part of trainings, to IRC sectors and other partners working in emergency response in Unity State. During the workshops with service providers, 'remedial actions' may be identified to enhance safety, dignity and access to the services provided. If required, and after discussing proposed changes with the service provider, the IRC will use funds to remedy actions that are found harmful where the direct service providers are unable to do so. This may include installing locks in latrines, ensuring confidential spaces for reports, and building ramps to ensure people with disabilities can access the service in question. Further, the IRC will brief various stakeholders (local authorities, local authorities, non-state actors, and UN agencies) on protection principles and protection mainstreaming to raise awareness and influence changes in practices, policies, and procedures to assist in solving the protection concerns through service delivery. IRC approaches and programming within this proposed intervention are designed in line with humanitarian principles and good practice and adhere to the 'do no harm' principles. • IRC works closely with UN OCHA to ensure access to affected populations is agreed and negotiated within the parameters set out by the humanitarian community and underpin neutrality of assistance. In all locations, IRC participates in inter-agency discussions with the controlling parties to maintain this relationship and avoid any politicisation of humanitarian aid. • Prior to the start-up of services, IRC carries out rapid assessments that include services mappings and key informant interviews with stakeholders. These form the basis for any intervention and inception meetings are held with humanitarian partners, and community leadership structures to inform them of proposed programming, elicit their feedback and support for services and reduce any potential for conflict within the community, against staff or beneficiary. • Non-discrimination is a guiding principle of IRC's responses and services are available to all regardless of race, ethnicity, sex, religion or marital status. This ensures that all targeted segments of the population are included in programming and that all interventions are informed by beneficiaries. Additional efforts are in place to work with marginalised segments of the population (adolescent girls, female headed households, widows and elderly women, child headed households) • Given the nature and sensitivity of GBV, Protection and Child Protections service delivery, IRC works closely with all key gatekeepers from the outset to ensure that they are supportive of programming and are included in decision making processes. Regular meetings will be held in all locations to maintain positive working relationships with government and humanitarian partners as well as community leadership structures to address any issues and resolve conflicts in a timely manner as soon as it arises. • Within the community, community staff led by the lead community engagement activities and will work closely with community members to raise awareness of services, address protection risks and develop strategies to mitigate these. This regular engagement will also offer an opportunity for IRC to integrate well within the community and create communication and conflict resolution channels as needed.	
Safety and Security	The volatile security situation and limited humanitarian access to some locations is a serious risk. IRC will develop preparedness and contingency plans to deal with fluctuating security and replicate successful approaches other locations in Lakes and Koch. IRC will develop contingency plans to ensure minimum services remain in place, including recruiting and training staff from the locality that can maintain services in the event of limited access or evacuation of international staff with support provided remotely. As part of IRC's contingency plans, key triggers will be identified for a variety of likely scenarios in all locations. Security Management Plans are in place in all locations and are regularly reviewed and updated based on emerging threats and changing security. Unity State remains highly unpredictable, IRC is well positioned to provide services in Koch as offices were recently set up and the area is relatively safe. Proposed programming locations in Rumbek North, East or Yirol counties is difficult to predict due to access issues. Currently the IRC has sporadic access to Rumbek East, although due to ongoing inter-clan violence around Rumbek Town access cannot be guaranteed at all times. Currently Rumbek North and Yirol are inaccessible. Between bad road conditions following the rainy season, and ongoing insecurity these two counties present the greatest challenges around Rumbek for IRC access and all three areas are presented solely as possibilities pending the required access. However IRC anticipates access becoming a possibility in areas surrounding Rumbek and sees the mobile team response model as the appropriate solution to the volatile context. New locations will be selected based on UNDSS security clearance and local staff will be recruited in new sites to allow for programming continuity if access fluctuates due to security.	
Access	The IRC has a pre-existing presence in both Rumbek Center and in Koch County, and this provides a strong base to launch responses. In both locations, IRC has strong working relationships with the controlling parties and participates in inter-agency discussions to maintain this relationship and sustained access to affected populations. IRC also works closely with other humanitarian actors, local organizations and groups to ensure programming is complementary, does not duplication and responds to the needs of affected populations. As part of programming start up in all locations, IRC holds discussions and consultations with key stakeholders in the community to galvanize support for programming, and ensure community participation and ownership of interventions. Trainings are provided for community leaders on protection, GBV and child protection and focal points are identified to support community based referrals to IRC services. In terms of physical access, many parts of Lakes and Unity are inaccessible during rainy season.	

**BUDGET**

**1 Staff and Other Personnel Costs** (please itemize costs of staff, consultants and other personnel to be recruited directly by the implementing partner for project implementation)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
1.1	WPE Coordinator (expat)	D	1	5150	6	10.00%	3,090.00	1,545.00	1,545.00	3,090.00
	The Women's Protection & Empowerment (WPE) Coordinator (international) is based in Juba and is responsible for overseeing country-wide implementation of GBV programming. \$5,150 for 6 months, charged to CHF at 10%. This is a direct program cost.									
1.2	WPE Emergency Specialist (expat)	D	1	4500	6	10.00%	2,700.00	1,350.00	1,350.00	2,700.00
	1 Women's Protection & Empowerment (WPE) Emergency Specialist (international) at \$4,500 for 6 months, charged 10% to CHF. Provides continuous (remote) support to teams working in the emergency sites to ensure that all interventions are implemented according to international best practices, and in line with IRC's GBV Emergency Response Model. This is a direct program cost.									
1.3	Protection & Rule of Law Coordinator (expat)	D	1	4500	6	10.00%	2,700.00	1,350.00	1,350.00	2,700.00
	The international Protection and Rule of Law Coordinator is based in Juba and is responsible for overseeing country-wide implementation of Protection programming. \$4,500 for 6 months, charged to CHF at 10%. This is a direct program cost.									
1.4	Monitoring and Evaluation Specialist (expat)	D	1	3500	6	10.00%	2,100.00	1,050.00	1,050.00	2,100.00
	The Monitoring and Evaluation Specialist at \$3,500 charged 10% to CHF is based in Juba with regular travel to program sites throughout the country. This is a direct program cost.									
1.5	Child Protection Manager (expat) - Koch	D	1	3500	5	100.00%	17,500.00	7,000.00	10,500.00	17,500.00
	1 Child Protection Manager based in Koch at \$3,500 for 5 months, charged to CHF at 100%. This is a direct program cost.									

1.6	Senior Emergency Child Protection Manager (expat) - Juba	D	1	4000	5	50.00%	10,000.00	4,000.00	6,000.00	10,000.00
	1 Senior Emergency Child Protection Manager based in Juba, at \$4,000 for 5 months charged to CHF at 50%. This is a direct program cost.									
1.7	Protection Emergency Manager (expat) - Rumbek	D	1	3750	6	100.00%	22,500.00	11,250.00	11,250.00	22,500.00
	1 Protection Emergency Manager at \$3,750 is based in/around Rumbek leading mobile outreach work for a mobile response. Charged to CHF at 100%. This is a direct program cost.									
1.8	WPE Emergency Manager (expat) - Rumbek	D	1	3750	6	100.00%	22,500.00	11,250.00	11,250.00	22,500.00
	1 WPE Emergency Manager at \$3,750 is based in/around Rumbek leading mobile outreach work for a mobile response. Charged to CHF at 100%. This is a direct program cost.									
1.9	International Staff Salaries - Juba Support Staff	S	24	4714.4	6	1.36%	9,232.68	4,616.34	4,616.34	9,232.68
	24 international Juba based staff at an average of \$4,714.40 per month for 6 months, charged 1.36% to CHF.									
1.10	International Staff Salaries - Koch Field Coordinator	S	1	4635	4	4.85%	899.19	224.80	674.39	899.19
	1 Field Coordinator at Koch will support operations for Child Protection programming at \$4,635 for 4 months, 4.85% charged to CHF.									
1.11	International Staff Salaries - Rumbek Field Support Staff	S	2	3789.2	5	5.00%	1,894.60	757.84	1,136.76	1,894.60
	2 international staff in Rumbek at an average of \$3,789.20 for 5 months, charged to CHF at 5%. 1 Field Coordinator at \$4,233 and 1 Supply Chain Manager at \$3,500.									
1.12	Technical Unit - WPE, Protection and Child Protection	S	23.17	351.56	1	100.00%	8,145.65	4,072.83	4,072.82	8,145.65
	The New York-based WPE (GBV), Protection, and Child Protection Technical Advisors provides ongoing remote support to program implementation as well as visit the program a minimum of once per year, at \$352 for 23.17 days of support which is based on a cost share methodology.									
1.13	Location Differential - International Direct Program Staff	S	8	833	6	45.63%	18,244.70	9,122.35	9,122.35	18,244.70
	Cost of Living Allowance of \$833 is provided to all 8 program international staff for 6 months (Child Protection staff will receive COLA for 5 months only), 48.75% charged. This is a direct program cost.									
1.14	Location Differential - Juba Office Support Staff	S	24	833	6	1.36%	1,631.35	815.67	815.68	1,631.35
	Cost of Living Allowance of \$833 is provided to all 24 international support staff based in Juba for 6 months, 1.36% charged.									
1.15	Location Differential - Koch Field Office Support Staff	S	1	833	4	4.85%	161.60	40.40	121.20	161.60
	Cost of Living Allowance of \$833 is provided to the international Field Coordinator based in Koch for 4 months, 4.85% charged.									
1.16	Location Differential - Rumbek Field Office Support Staff	S	2	833	5	5.00%	416.50	166.60	249.90	416.50
	Cost of Living Allowance of \$833 is provided to both (2) international support staff based in Rumbek for 5 months, 5% charged.									
1.17	Child Protection Officer (national) - Koch	D	3	1082.62	6	100.00%	19,487.16	9,743.58	9,743.58	19,487.16
	3 Child Protection Officers based in Koch at \$1,082.62/month charged at 100% to CHF. This is a direct program cost.									
1.18	Protection Monitoring Officer (national) - Rumbek	D	2	1350	6	100.00%	16,200.00	8,100.00	8,100.00	16,200.00
	2 Protection Monitoring Officers based in Rumbek at \$1,350/month for 6 months, charged to CHF at 100%. This is a direct program cost.									
1.19	WPE Response Officer (national) - Rumbek	D	1	1350	6	100.00%	8,100.00	4,050.00	4,050.00	8,100.00
	1 WPE (GBV) Response Officer based in Rumbek at \$1,350/month for 6 months, charged 100% to CHF. This is a direct program cost.									
1.20	Case Worker (national) - Rumbek	D	1	685	6	100.00%	4,110.00	2,055.00	2,055.00	4,110.00
	1 Case Worker based in Rumbek at \$685/month for 6 months, charged 100% to CHF. This is a direct program cost.									
1.21	National Staff Salaries - Support Staff - Juba	S	67	1081.65	6	1.36%	5,913.60	2,956.80	2,956.80	5,913.60
	67 national support staff based in Juba, at an average of \$1,081.65/month, charged 1.36% to CHF.									
1.22	National Staff Salaries - Support Staff - Koch	S	16	420.7	6	4.85%	1,958.78	979.39	979.39	1,958.78
	16 national support staff based in Koch at an average of \$420.70/month, charged 4.85% to CHF.									
1.23	National Staff Salaries - Support Staff - Rumbek	S	14	717.32	6	5.00%	3,012.74	1,506.37	1,506.37	3,012.74
	14 national support staff based in Rumbek, at an average of \$717.32/month, charged 5% to CHF.									
1.24	Casual Labour - Support	S	3	200	6	3.74%	134.64	67.32	67.32	134.64
	3 casual laborers at \$200 for 6 months, charged to CHF at 3.74%									
1.25	Nairobi Regional Support Staff	S	1	1500	6	1.36%	122.40	61.20	61.20	122.40
	Nairobi Regional Support staff at \$1,500 for 6 months, 1.36% charged to CHF.									
1.26	International Staff Benefits - Direct Program Staff	D	8	1784.28	6	45.63%	39,080.01	19,540.00	19,540.01	39,080.01
	8 international WPE, Protection and Child Protection Program staff receive \$1,784.25/month for 6 months (Child Protection staff receive benefits for 5 months only), charged at 45.63% to CHF. Benefits include 29.5% fringe (inclusive of medical, retirement plan, life insurance, workers compensation), \$765 quarterly R&A, annual home leave, a settling in allowance of \$500, and a shipping allowance of \$2,000. This is a direct program costs.									
1.27	International Staff Benefits - Juba Support Staff	S	24	1916.8	6	1.36%	3,753.86	1,876.93	1,876.93	3,753.86
	24 international support staff based in Juba receive \$1,916.80/month for 6 months, charged at 1.36% to CHF. Benefits include 29.5% fringe (inclusive of medical, retirement plan, life insurance, workers compensation), \$765 quarterly R&A, annual home leave, a settling in allowance of \$500, and a shipping allowance of \$2,000									
1.28	International Staff Benefits - Koch Support Staff	S	1	1933.58	4	4.85%	375.11	93.78	281.33	375.11
	1 international support staff based in Koch receives \$1,933.58/month for 4 months, charged at 4.85% to CHF. Benefits include 29.5% fringe (inclusive of medical, retirement plan, life insurance, workers compensation), \$765 quarterly R&A, annual home leave, a settling in allowance of \$500, and a shipping allowance of \$2,000									
1.29	International Staff Benefits - Rumbek Support Staff	S	2	1773.81	5	5.00%	886.91	354.76	532.15	886.91
	2 international support staff based in Rumbek receives \$1773.81/month for 5 months, charged at 5% to CHF. Benefits include 29.5% fringe (inclusive of medical, retirement									

	plan, life insurance, workers compensation), \$765 quarterly R&A;R, annual home leave, a settling in allowance of \$500, and a shipping allowance of \$2,000									
1.30	Expat Benefits @ 29.5% Technical Unit - WPE, Child Protection, and Protection	S	1	8146.27	1	29.50%	2,403.15	1,201.58	1,201.57	2,403.15
	29.5% fringe for the Technical Unit cost of \$8,146.27. 29.5% is inclusive of medical, retirement plan, life insurance, and workers compensation.									
1.31	National Staff Benefits - Child Protection Staff - Koch	D	3	378.96	6	100.00%	6,821.28	3,410.64	3,410.64	6,821.28
	3 national staff for the Child Protection Program in Koch receive benefits valued at an average of \$378.96/month for 6 months, charged 100% to CHF. This is a direct program cost.									
1.32	National Staff Benefits - WPE (GBV) Staff - Rumbek	D	2	642.08	6	100.00%	7,704.96	3,852.48	3,852.48	7,704.96
	2 national staff for the WPE (GBV) Program in Rumbek receive benefits valued at an average of \$642.08/month for 6 months, charged 100% to CHF. This is a direct program cost.									
1.33	National Staff Benefits - Protection Staff - Rumbek	D	2	738.5	6	100.00%	8,862.00	4,431.00	4,431.00	8,862.00
	2 national staff for the Protection Program in Rumbek receive benefits valued at an average of \$738.50/month for 6 months, charged 100% to CHF. This is a direct program cost.									
1.34	National Staff Benefits - Support Staff - Juba	S	67	324.5	6	1.36%	1,774.11	887.05	887.06	1,774.11
	67 national support staff based in Juba receive benefits valued at an average of \$324.50/month for 6 months, charged 1.36% to CHF.									
1.35	National Staff Benefits - Support Staff - Koch	S	16	204.7	6	4.85%	953.08	476.54	476.54	953.08
	16 national support staff based in Koch receive benefits valued at an average of \$204.70/month for 6 months, charged 4.85% to CHF.									
1.36	National Staff Benefits - Support Staff - Rumbek	S	14	307.26	6	5.00%	1,290.49	645.25	645.24	1,290.49
	14 national support staff based in Rumbek receive benefits valued at an average of \$307.26/month for 6 months, charged 5% to CHF.									
1.37	Rent for Staff Housing - Juba	S	5	10809	6	1.36%	4,410.07	2,205.03	2,205.04	4,410.07
	5 staff houses for international staff cost \$10,809 for 6 months, charged to CHF at 1.36%.									
	<b>Section Total</b>						261,070.62	127,106.53	133,964.09	261,070.62

**2 Supplies, Commodities, Materials** (please itemize direct and indirect costs of consumables to be purchased under the project, including associated transportation, freight, storage and distribution costs)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
2.1	Protection mainstreaming training	D	1	4500	1	100.00%	4,500.00	2,250.00	2,250.00	4,500.00
	\$4,500 for 1 workshop training done in/around, charged to CHF at 100%. Training is for service providers to support them to integrate protection principles in their day to day work. Cost includes stationary (paper, pens) and refreshments for participants.									
2.2	Protection monitoring supplies and equipment	D	1	4500	1	100.00%	4,500.00	2,250.00	2,250.00	4,500.00
	\$4,000 for the Rumbek outreach program, charged at 100%. Supplies include stationaries, filling cabinet, boots, T shirts, GPS.									
2.3	IEC materials	D	2	4000	1	100.00%	8,000.00	4,000.00	4,000.00	8,000.00
	2 IEC Material development and printing, including translation of text, at \$4,000 charged at 100%. 1 IEC material development in Koch CYPD and 1 for Rumbek outreach activities.									
2.4	Casual labor/interpreters/volunteers	D	2	200	6	100.00%	2,400.00	1,200.00	1,200.00	2,400.00
	\$200 for 2 temporary workers (including interpreters, volunteer stipends) for 6 months for the mobile sites outside of Rumbek, charged to CHF at 100%.									
2.5	Hibernation kits, frst aid kits, trauma kits	D	2	1000	1	100.00%	2,000.00	2,000.00	0.00	2,000.00
	2 kits at \$1,000/kit charged to CHF at 100%. Items are for Rumbek staff and include non perishable food items for emergency hibernation and first aid/trauma supplies, candles, batteries, and other items for use in the event of emergencies.									
2.6	GBV trainings and capacity building	D	2	2000	1	100.00%	4,000.00	2,000.00	2,000.00	4,000.00
	2 trainings at \$2,000/training for GBV/WPE program, charged at 100%. Cost includes refreshments and paper supplies for participants and room rental.									
2.7	Women and girls Centre Activities/Safe Spaces - Mobile	D	2	1200	6	100.00%	14,400.00	7,200.00	7,200.00	14,400.00
	2 safe spaces for women and girls center activities will take place each month for 6 months at the mobile centers outside of Rumbek at \$1,200 each per month, charged to CHF at 100%.									
2.8	Outreach Activities - Mobile	D	2	575	6	100.00%	6,900.00	3,450.00	3,450.00	6,900.00
	2 outreach and awareness campaigns at mobile sites, \$575 each for 6 months funded at 100%. Required costs of these regular awareness campaigns included megaphones, refreshments for participants, and visibility materials.									
2.9	Risk Reduction activities - Mobile	D	2	1000	6	100.00%	12,000.00	6,000.00	6,000.00	12,000.00
	\$1,000 for 6 months for risk reduction activities in 2 mobile/outreach sites outside of Rumbek. Activities that respond to needs identified by women and girls in the community include material support to reduce risks of violence for particularly vulnerable groups (e.g. flash lights, soap, hygiene materials)									
2.10	International Days/Awareness campaigns	D	1	3000	1	100.00%	3,000.00	1,500.00	1,500.00	3,000.00
	\$3,000 charged to CHF at 100%. These awareness raising events include drama songs and dancing to engage communities on issues affecting women and girls. Specific expenses include T-shirts, banners, and refreshments.									
2.11	Airtime	D	6	30	6	100.00%	1,080.00	540.00	540.00	1,080.00
	Airtime for 6 mobile phones for staff at \$30 each for 6 months, charged to CHF at 100%.									
2.12	Thuraya credit	D	1	200	6	100.00%	1,200.00	600.00	600.00	1,200.00
	\$200/month for 6 months for Thuraya credit, charged to CHF at 100%.									
2.13	CCSAS Training of Trainers	D	1	6000	1	100.00%	6,000.00	0.00	6,000.00	6,000.00
	A lump sum of \$6,000 for training of trainer in CCSAS for Rumbek, cost includes printing of manuals, pens and paper, access to web-based resources, space rental and refreshments.									
2.14	Women space set up - Rumbek Mobile	D	2	5000	1	100.00%	10,000.00	5,000.00	5,000.00	10,000.00
	2 new safe spaces at the mobile sites outside of Rumbek at \$5,000, charged to CHF at 100%. Cost includes materials and labor (fencing, etc.).									



2.15	Rainy season supplies and equipment	D	6	270	1	100.00%	1,620.00	1,620.00	0.00	1,620.00
6 WPE staff receive \$270 worth of rainy season items, charged to CHF at 100%. Supplies and equipment include gum boots, torches, rain ponchos, umbrellas.										
2.16	CPCBM incentive materials	D	1	400	6	100.00%	2,400.00	1,200.00	1,200.00	2,400.00
\$400/month for incentives for 6 months to the child protection focal point from the Child Protection Community Based Mechanism, charged 100% to CHF.										
2.17	CPCBM awereness raising/discussion sessions	D	1	5000	1	100.00%	5,000.00	5,000.00	0.00	5,000.00
A lump sum of \$5,000 for Child Protection Community Based Mechanism sessions in Koch, 100% charged to CHF. Cost includes promotional material, space rental, refreshments.										
2.18	PSS incentives materials	D	3	3250	1	100.00%	9,750.00	4,875.00	4,875.00	9,750.00
\$3,250/safe space for incentives for the animators at 3 safe spaces in Koch who conduct psychosocial support, charged at 100%.										
2.19	Materials for PSS activities	D	3	5500	1	100.00%	16,500.00	8,250.00	8,250.00	16,500.00
Materials for activities at three safe spaces in Koch at \$5,500/safe space for psychosocial support (PSS) for Child Protection, charged at 100%. Costs include games, books, recreational supplies.										
2.20	Material for construction safe spaces for Child Protection	D	3	4000	1	100.00%	12,000.00	6,000.00	6,000.00	12,000.00
3 safe spaces constructed in Koch at \$4,000 per safe space, 100% charged to CHF.										
2.21	Child Protection Training	D	1	3000	2	100.00%	6,000.00	3,000.00	3,000.00	6,000.00
A lump sum of \$3,000/training for 2 trainings for the animators, child protection focal points, and staff for the Koch Child Protection Program, charged to CHF at 100%. Cost includes supplies and refreshments and trainings are to be done on an ongoing basis.										
2.22	Vehicle Rental	D	1	1000	6	100.00%	6,000.00	3,000.00	3,000.00	6,000.00
1 vehicles rented for Rumbek GBV/WPE program and outreach at \$1000 for 6 months, charged to CHF at 100%										
2.23	Air Charter for Transportation	D	1	7500	2	100.00%	15,000.00	7,500.00	7,500.00	15,000.00
2 trips costing \$7,500 to get materials and supplies to Rumbek and Koch.										
2.24	Protection mainstreaming Fund for Rumbek Protection	D	2	10000	1	100.00%	20,000.00	10,000.00	10,000.00	20,000.00
2 protection mainstreaming funds at \$10,000 each for Rumbek to remedy actions that are found harmful where the direct service providers are unable to do so, charged 100% to CHF.										
<b>Section Total</b>							174,250.00	88,435.00	85,815.00	174,250.00

### 3 Equipment (please itemize costs of non-consumables to be purchased under the project)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
3.1	Laptops	D	2	840	1	100.00%	1,680.00	1,680.00	0.00	1,680.00
2 laptops at \$840 each, charged to CHF at 100% for the Koch Child Protection program. These laptops are essential for the staff to conduct routine activities and complete monitoring reports. As the Koch programming is new and not supported by any other donors, these laptops must be procured through the CHF.										
3.2	Communication equipment - Thuraya etc, Codans	D	1	2500	1	100.00%	2,500.00	2,500.00	0.00	2,500.00
A lump sum of \$5,000 for Koch and for Rumbek outreach programming for security equipment's to facilitate communication during missions, charged to CHF at 100%.										
3.3	Women space furniture and equipment	D	2	2500	1	100.00%	5,000.00	5,000.00	0.00	5,000.00
2 safe space set up at \$2,500 charged to CHF at 100%. Cost includes procurement of furniture and equipment such as mats, chairs, cooking facilities, pots, cups, tables and white boards among other things. The 2 safe spaces will be set up for mobile outreach outside of Rumbek.										
3.4	Hard drive	D	2	80	1	100.00%	160.00	160.00	0.00	160.00
2 hard drives at \$80 for Child Protection staff in Koch, charged 100% to CHF.										
3.5	Staff accomodation (tents and furniture)	D	5	3500	1	100.00%	17,500.00	17,500.00	0.00	17,500.00
5 sets of \$3,500 for tents, tables, chairs, sleeping mats, and other staff accomodation items charged to CHF at 100%. 3 sets for mobile/outreach staff outside of Rumbek and 2 for mobile staff in Koch.										
<b>Section Total</b>							26,840.00	26,840.00	0.00	26,840.00

### 4 Contractual Services (please list works and services to be contracted under the project)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
<b>Section Total</b>							0.00	0	0	0.00

### 5 Travel (please itemize travel costs of staff, consultants and other personnel for project implementation)

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total
								Q1	Q2	
5.1	Airfare/Accommodation/Per Diem - Protection & WPE Program Staff	D	10	536	5	35.82%	9,599.76	4,799.87	4,799.89	9,599.76
5 trips for 10 Program staff at \$536 per trip, including airfare (\$400 roundtrip), accommodation (\$100) and per diem (\$16), 35.82% charged to CHF.										
5.2	Airfare/Accommodation/Per Diem - Support Staff	S	10	536	6	3.23%	1,038.77	519.39	519.38	1,038.77
10 support staff travel monthly at \$536 charged at 3.23% for 6 months. Costing breakdown is \$400 roundtrip flight, \$120 accommodation, \$16 per diem.										
5.3	Visa / Work permit - International Direct Program Staff	D	8	100	4	36.25%	1,160.00	580.00	580.00	1,160.00
8 international Protection and WPE staff require \$100 for 4 months for visa and work permit fees, charged at 36.25% to CHF.										
5.4	Visa / Work permit - International Support Staff	S	16	100	4	2.03%	129.92	64.96	64.96	129.92

	16 international support staff require \$100 for 4 months for visa and work permit fees, charged at 2.03% to CHF.												
5.5	Travel to/from post - Direct Program Staff	D	8	1500	1	23.75%	2,850.00	1,425.00	1,425.00	2,850.00			
	8 international Protection and WPE staff require \$1,500 for travel to and from post, charged 23.75% to CHF.												
5.6	Travel to/from post - International Support Staff	S	16	1500	1	0.99%	237.60	118.80	118.80	237.60			
	16 international support staff require \$1,500 for travel to and from post, charged 0.99% to CHF.												
<b>Section Total</b>								15,016.05	7,508.02	7,508.03	15,016.05		

**6 Transfers and Grants to Counterparts (please list transfers and sub-grants to project implementing partners)**

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total	
								Q1	Q2		
<b>Section Total</b>								0.00	0	0	0.00

**7 General Operating and Other Direct Costs (please include general operating expenses and other direct costs for project implementation)**

Code	Budget Line Description	D / S	Unit Quantity	Unit Cost	Duration	Percent Charged to CHF / ERF	Total Cost	2015		Quarterly Total	
								Q1	Q2		
7.1	Office Supplies - Juba Main Office	S	1	9660	6	1.36%	788.26	394.13	394.13	788.26	
	Juba office supplies at \$9,660 for 6 months, charged 1.36% to CHF.										
7.2	Office Supplies - Field Office	S	1	800	6	8.94%	429.12	214.56	214.56	429.12	
	Field office supplies at \$800 for 6 months, charged 8.34% to CHF for Koch and Rumbek.										
7.3	Juba Main Office Running Costs	S	1	94195	6	1.36%	7,686.31	3,843.15	3,843.16	7,686.31	
	Monthly Juba office running costs are \$94,195/month including rent, office maintenance, generator fuel and maintenance, vehicle fuel and maintenance, recruitment costs for programs, global insurance fees, bank fees, legal fees, warehousing of program supplies, IT costs, communication costs, and internet fees. This is charged at 1.36% to CHF.										
7.4	Koch Field Office Running Costs	S	1	9630	6	4.85%	2,802.33	1,401.16	1,401.17	2,802.33	
	Monthly Koch office running costs are \$9,625 including rent, office maintenance, generator fuel and maintenance, vehicle fuel and maintenance, recruitment costs for programs, IT costs, communication costs, and internet fees. This is charged at 4.85% to CHF.										
7.5	Rumbek Field Office Running Costs	S	1	11303.67	6	5.00%	3,391.10	1,695.55	1,695.55	3,391.10	
	Monthly Rumbek office running costs are \$11,303.67 including rent, office maintenance, generator fuel and maintenance, vehicle fuel and maintenance, recruitment costs for programs, IT costs, communication costs, and internet fees. This is charged at 5% to CHF.										
<b>Section Total</b>								15,097.12	7,548.55	7,548.57	15,097.12

**Sub Total Direct Cost**

492,273.78

**Indirect Programme Support Cost PSC rate (insert percentage, not to exceed 7 per cent)**

7%

**Audit Cost (For NGO, in percent)**

1%

**PSC Amount**

34,459.16

**Quarterly Budget Details for PSC Amount**

2015		Total
Q1	Q2	
18,020.66	16,438.50	34,459.16

**Total Fund Project Cost**

526,732.94

**Project Locations**

Location	Estimated percentage of budget for each location	Beneficiary Men	Women	Boy	Girl	Total	Activity
Lakes	60	1000	2050	1000	1450	5500	
Unity -> Koch	40	34	51	580	420	1085	

**Project Locations** (first admin location where activities will be implemented. If the project is covering more than one State please indicate percentage per State)

**DOCUMENTS**

