

## 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](mailto: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:

<b>CRP Cluster</b>	<b>Protection</b>
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#### CHF Cluster Priorities for 2014 Second 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

- Protection monitoring, advocacy and response to mitigate the effects of the rise in violence and increased protection concerns for IDPs, host communities, and migrants.
- Enhance protection of children, adolescents and other vulnerable groups affected by crisis, with an emphasis on identification of separated, unaccompanied or missing children and family tracing, reunification and/or alternative care.
- Provide timely, safe, and high-quality child and gender-sensitive prevention and response services to survivors of GBV.
- Promote psychosocial well-being of children and GBV survivors through a community-based approach.

#### Cluster Geographic Priorities for this CHF Round

Unity, Jonglei, Upper Nile, Lakes and Central Equatoria (Juba).

### SECTION II

#### Project details

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

<b>Requesting Organization</b>		<b>Project Location(s)</b> - 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	
International Organization for Migration		<b>State</b>	<b>County/ies (include payam when possible)</b>
<b>Project CRP Code</b>	<b>CRP Gender Code</b>	Jonglei	100 Bor
SSD-14/P-HR-RL/69578	2a		
<b>CRP Project Title (please write exact name as in the CRP)</b>			
Psychosocial support to conflict-affected populations living in UNMISS Protection of Civilian sites in South Sudan			
<b>Total Project Budget requested in the in South Sudan CRP</b>	US\$ 665,000	<b>Funding requested from CHF for this project proposal</b>	US\$ 250,000
<b>Total funding secured for the CRP project (to date)</b>	US\$ 0	<b>Are some activities in this project proposal co-funded (including in-kind)?</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (if yes, list the item and indicate the amount under column i of the budget sheet)	
<b>Direct Beneficiaries</b> (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)		<b>Indirect Beneficiaries / Catchment Population (if applicable)</b>	
	<b>Number of direct beneficiaries targeted in CHF Project</b>		
	<b>Number of direct beneficiaries targeted in the CRP</b>		
Women:	1,682		
Girls:	429		
Men:	1,616		
Boys:	396		
<b>Total:</b>	4,123		
<b>Targeted population:</b> Abyei conflict affected, IDPs, Returnees, Host communities, Refugees		<b>CHF Project Duration</b> (12 months max., earliest starting date will be Allocation approval date)	
<b>Implementing Partner/s</b> (Indicate partner/s who will be sub-contracted if applicable and corresponding sub-grant amounts)		Indicate number of months: 12	
		<b>1 August 2014 – 31 July 2015</b>	
<b>Contact details Organization's Country Office</b>		<b>Contact details Organization's HQ</b>	

Organization's Address	New Industrial Area, Northern Bari Juba, South Sudan
Project Focal Person	Haley West, <a href="mailto:hwest@iom.int">hwest@iom.int</a> , +211 92 806 7356
Country Director	David Derthick, <a href="mailto:dderthick@iom.int">dderthick@iom.int</a> , 00 211 92 240 6711
Finance Officer	Patrick Stenson, <a href="mailto:pstenson@iom.int">pstenson@iom.int</a> ; 00 92 240 6613
Monitoring & Reporting focal person	Mariko Hattori, <a href="mailto:mhattori@iom.int">mhattori@iom.int</a> , 00 92 240 5716

Organization's Address	17 Route des Morillons CP-19 Geneva 2013 Switzerland
Desk officer	Guglielmo Schininà, <a href="mailto:gschinina@iom.int">gschinina@iom.int</a> , +41 79 129 8923
Finance Officer	Zita Ortega-Greco, <a href="mailto:zortega-greco@iom.int">zortega-greco@iom.int</a>

## 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 population<sup>1</sup>

In December 2013, the political tensions in South Sudan escalated to the level of a humanitarian crisis determined by factors, including proxy influences, economic interests and political dynamics, with an ethnic dimension. Since the crisis began, more than 1.3 million people have been displaced or affected and OCHA estimates state that 93,000 individuals are currently seeking protection inside the United Nations Mission in South Sudan (UNMISS) bases

Yet, the implementation of systematic humanitarian responses in the Protection of Civilians (POC) areas established at UNMISS bases has been more difficult due to the volatility of the security situation, with key locations changing hands between the SPLA forces and SPLA-in opposition forces several times over the last six months. The POC sites were initially established to respond to the immediate need to save lives and were not meant to be longer-term solutions. Thus, the current context is quite unprecedented as POCs throughout the country are still housing Internally Displaced Persons (IDP) six months after the initial outbreak of the conflict. Humanitarian actors now find themselves struggling to apply humanitarian standards to a new context as well as racing against time to ensure preparation are made for the rainy season given the uncertainty about how long the IDP population will remain. The first level in providing psychosocial support is to ensure that all basic services such as access to clean water, health and educational service, shelter and food are made available. However, challenges are abundant within the current context and include overcrowding, limited number of sanitation and WASH facilities, poor shelter materials, limited availability of school for children, and unsatisfactory food choices.

It is within this context of individual and collective uneasiness and dissatisfaction that Camp Coordination and Camp Management (CCCM) and Protection actors are reporting a need for psychosocial supports in almost all displacement sites.

## 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.

In response to the request for psychosocial supports by the CCCM Cluster, IOM conducted a rapid assessment of psychosocial needs and resources in South Sudan in February 2014. The assessment specifically focused on the UNMISS POC in Bor and identified psychosocial needs, existing resources, and subsequent gaps at site level, as well as the existing technical resources and coordination mechanisms at national level.

The picture is bleak. Eighty-three percent of individuals interviewed expressed negative feelings, including fear, frustration, anxiety and uncertainty or confusion about the future. Separation from loved ones was a significant cause of distress and was highlighted as a concern by community leaders, who noted that family reunification was unlikely in the immediate future. At a family level, the lack of schooling and doubt over the possibility to return home was a cause of suffering, along with a lack of edible food. Factors relating to distress at the community level can largely be attributed to the protracted nature of the crisis and possible long-term repercussions for community life. While the emotional and social tensions are a normal consequence of the situation, there is nevertheless need for urgent supportive non-clinical interventions that can manage negative emotional outcomes, preventing an immediate and life threatening escalation of individual and social pathologies.

In addition, the need of women and girls was also highlighted as a major concern due to the absence of males in the household and the overcrowded life in the POC sites. Young men between 15-30 years are also of concern as they are more likely to indulge in negative behaviours, such as alcohol use and physical violence, due to boredom or being separated from their families. Based on this, it is clear that actors must urgently act to address psychosocial needs within these communities as these needs are not only a result of the crisis, but also a possible driver of future conflict.

This project aims to contribute to the protection and support of the well-being of IDPs by immediately strengthening family and community mechanisms and the provision of focused social and psychological counselling services.

Specifically, through this project:

1. IOM will facilitate training in basic psychosocial support and facilitation of discussion groups on issues identified during the assessment, which will be offered by qualified professionals. Community members will conduct counselling activities within the IDP sites, while also being trained on the job. The expertise gained will be kept within the community in the event there is further displacement. Family and community level support which may be provided include support to existing coping mechanisms such as church services, story-telling and informal peer-support; establishing specific activities for women such as women's discussion groups linked to vocational training, and schooling and recreational activities for adolescents and youth. The project also aims to link with and strengthen existing programmes which mainstream psychosocial sensitive family and community support components such as Child Friendly Spaces. Teachers and counselors employed by organisations implementing CFS will be included in the on-site trainings to build the capacity of those programmes to facilitate support for young children and their care-givers on prevention of family separation, assistance with alternative care arrangements, promotion of continuation of breastfeeding, facilitation of play, nurturing care and social support as well as care for care-givers (parent support groups). This will facilitate further harmonization of all actors mainstreaming psychosocial approaches in their programming.
2. IOM will contribute to strengthening the capacity and harmonization of trainings on psychosocial support and interventions in the country. To accomplish this, IOM will ensure that trainings are coordinated and implemented with the involvement of experts and students from the University of Juba, the Juba Teaching Hospital and dedicated humanitarian working groups and cluster agencies.

## C. Project Description (For CHF Component only)

### i) Contribution to Cluster Priorities

Briefly describe how CHF funding will be used to contribute to the achievement of the cluster priority activities identified for this allocation.

CHF Funds for this grant period will be used to contribute the following two Protection Cluster priority activities.

1. Scale up protection monitoring, advocacy and response to mitigate the effects of the rise in violence and increased protection concerns for IDPs, host communities, and migrants.
2. Promote psychosocial well-being of children through community-based support

<sup>1</sup> 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.

The project will specifically address the two priorities above by focusing on the protection and support of the well-being of IDPs through the immediate strengthening of family and community mechanisms and the provision of focused social and psychological counselling services. These actions will be taken in order to address any concerns identified during discussion groups or other project activities.

### 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)

To contribute to strengthening the emergency provision of psychosocial support services to conflict-affected and vulnerable individuals through enhanced community and family support mechanisms and the provision of focused non-specialised counselling for more than 74,000 individuals in the latter half of 2014.

### 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).

Using the threefold approach mentioned above in the Justification section, IOM intends to complete the following activities during the lifespan of this project.

1. Conduct a rapid psychosocial needs assessment to update the assessment conducted in Bor in February, including development of indicators for impact assessment
2. Liaise with MHPSS working groups and the Protection and CCCM clusters
3. Select and train 20 community members, gender-balanced, in each target location on basic counselling and facilitation of discussion groups.
4. Train 20 members, gender-balanced, in gender awareness and facilitation of women discussion groups.
5. Establish a gender-balanced psychosocial mobile team of at least ten members.
6. Train the team on the job and provide four supervisory on the job training sessions of one week each over the course of the project.
7. Teams provide basic emotional and practical (i.e. basic service) support to individuals and families.
8. Teams organize discussion groups especially with women, girls and male youth ages 15-30.
9. Conduct community information sessions/discussion groups targeting particular vulnerable populations as identified by the Protection Cluster lead agency and through monitoring activities.

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

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

At the end of the CHF grant period, IOM expects to have achieved the following results.

1. A rapid updated psychosocial needs assessment, including development of indicators for impact assessment in Bor is conducted.
2. A mechanism for liaison with MHPSS working groups and the Protection and CCCM clusters is established and implemented.
3. 20 community members, gender balanced, in each target location are trained on basic counselling and facilitation of discussion groups.
4. A training for 20 community members, gender balanced, is conducted on gender awareness and facilitation of women discussion groups.
5. Gender-balanced psychosocial mobile teams of at least eight members are established in Bor POC.
6. On the job training is provided to all teams as well as four supervisory on the job training sessions of one week each over the course of the project.
7. Basic emotional and practical (i.e. basic service) support to individuals and families is provided by Psychosocial Support (PSS) teams.
8. Discussion groups especially with women, girls and male youth ages 15-30 are organized.
9. Community information sessions/discussion groups targeting particular vulnerable populations as identified by the Protection Cluster lead agency are implemented.

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.	Number of trained leaders for community-based dispute resolution for (CDR)/Community Based Protection (CBP) mechanisms are established	Target – 20 individuals
X	2.	Number of outreach initiatives providing life-saving information conducted (disaggregated by sex)	Target Number of Discussion Groups – 50 Target Number of Discussion Groups for women and girls – 25
	3.	Number of individuals provided with basic emotional and social support in Bor	Target = 750
	4.	Number of community members trained in basic counselling and discussion group facilitation skills	Target – 20 individuals
	5.	Number of people benefiting from psychosocial activities in Bor POC	Target – 4,123 individuals/total population of Bor PoC

### vi). Cross Cutting Issues

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

IOM requires all programming to implement human rights based approaches and target interventions using a gender based analysis. Most of the time, the gender-disaggregated profiles of the target populations are not available prior to programme development however, once available such information is taken into consideration in the development of further action. Empowering women and girls to make decisions about their own life as well as promoting women's active participation in community-level discussions is a key objective of this proposal. To ensure gender equality and an

increased level of trust among women beneficiaries, the project will make special efforts to recruit as many female staff as male (Target: 50%) and ensure training opportunities are extended equally to woman and men.

Furthermore, discussion groups and community generated activities initiated through this project will provide space for awareness raising of activities that can negatively and positively impact the environment. For example, discussion groups focused on raising awareness about good hygiene and sanitation practices would aim to have a positive effect on the environment.

While there are no HIV/AIDS activities directly planned in this proposal, the community based approach assumes that if HIV/AIDS is a concern for the community, then steps would be taken by the mobile psychosocial support teams to lead discussions on the topic

**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.

IOM intends to directly implement this project. Human resources will be mainly from IOM's network of psychosocial professionals and where appropriate some technical and advisory support from the University of Juba, Department of Rural Development in which lies the faculty for social work and counseling. Other actors may be called upon as needed, but are not anticipated at the moment of proposal writing. IOM has a presence in all identified locations for the implementation of this project.

**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)<sup>2</sup>.

Project operations will be monitored under the overall management of the Psychosocial Support Project Officer based in Juba. The Mission's main office in Juba will also provide overall financial management and oversight of activities will be under the guidance of the Migration Health Coordinator. Regular internal reporting will be provided by all psychosocial support field teams on a regular basis.

IOM will produce regular updates on the progress of field activities that will be shared with the Psychosocial Support and Mental Health Working Group under the Child Protection Sub-cluster. Internal reporting, monitoring and evaluation will take note of all constraints or impediments to activities in order to undertake a regular evaluation of project goals and implementing strategies. As with all past projects supported by the CHF, IOM will adhere to the reporting requirements and submit narrative and financial reports within the agreed upon timeframe.

**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)
<b>Pledges for the CRP project</b>	

<sup>2</sup> 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		
<b>CHF ref./CRP Code:</b> SSD-14/P-HR-RL/69578	<b>Project title:</b> Psychosocial support to conflict-affected populations living in UNMISS Protection of Civilian sites in South Sudan	<b>Organisation:</b> IOM

Goal/Objectives/Outcomes/Outputs	Indicator of progress	Means of Verification	Assumptions and Risks
<b>Goal/Impact (cluster priorities)</b> 1. Scale up protection monitoring, advocacy and response to mitigate the effects of the rise in violence and increased protection concerns for IDPs, host communities, and migrants. 2. Promote psychosocial well-being of children through community-based support	<i>Number of individuals provided with psychosocial support.</i> <ul style="list-style-type: none"> <li>Target: 4,123 individuals</li> </ul>	<i>Feedback from Protection cluster, cluster reports.</i>	
<b>CHF project Objective</b> To contribute to strengthening the emergency provision of psychosocial support services to conflict-affected and vulnerable individuals through enhanced community and family support mechanisms and the provision of semi-focused counselling.	<ul style="list-style-type: none"> <li>Number of individuals provided with basic emotional and social support in Bor.</li> <li>Target = 750 individuals</li> </ul>	<i>Participant List for Outreach Activities including discussion groups and community events.</i>	Assumptions: The security situation will allow for the implementation of this project.  Sustained commitment of all stakeholders to the project, but specifically community leaders, health and protection actors and camp managers.  Risk: Loss of staff due to movement of IDPs from Bor POC back to Bor town, particularly project staff (community counsellors) during the project period.  Mitigation: Number of individuals trained initially will be higher than number of counsellors employed and community counsellor salaries will be competitive.
<b>Outcome 1</b> Identified community participants demonstrate a willingness to assist their community by providing improved access to psychosocial support mechanisms in Bor.	Number of trained leaders for community-based dispute resolution for (CDR)/Community Based Protection (CBP) mechanisms	<i>Training Participant List</i>	Assumption: Sustained commitment of all stakeholders to the project, but specifically community leaders, health and protection actors and camp managers.

Goal/Objectives/Outcomes/Outputs		Indicator of progress	Means of Verification	Assumptions and Risks
		<p>are established.</p> <ul style="list-style-type: none"> <li>Target = 20 (10 males and 10 females)</li> </ul>		<p>Risk: Identified community members will not be representative of the community as a whole.</p> <p>Mitigation: Adequate awareness-raising about the project's implementation as well as engagement of the whole community will be included as part of the initial rapid assessment.</p>
<b>Output 1.1</b>	Identified community members are trained to provide psychosocial support services for community and family members as well as semi-focused counselling.	<p>Number of outreach initiatives providing life-saving information conducted (disaggregated by sex)</p> <ul style="list-style-type: none"> <li>Target Number of Discussion Groups – 50</li> <li>Target Number of Discussion Groups for women and girls – 25</li> </ul>	<i>Training Participant Lists, Discussion Group Participant Lists disaggregated by age and sex</i>	<p>Assumptions: The security situation will allow for travel to and from Bor POC by project staff.</p> <p>Space will be allocated by the CCCM actors for discussion groups and activities.</p> <p>Risks: The community does not support the initiative.</p> <p>Community member do not positively respond to organisation of discussion groups.</p> <p>Mitigation: Project staff will ensure proactive engagement of the community at the beginning of the project, encouraging them to play a role in the design of activities and structure of the discussion groups.</p>
<b>Activity 1.1.1</b>	Conduct a rapid psychosocial needs assessment to update the assessment conducted in Bor in February, including development of indicators for impact assessment			
<b>Activity 1.1.2</b>	Select and train 20 community members (10 male and 10 female) in Bor on basic counselling and facilitation of discussion groups, including gender awareness and facilitation of women discussion groups			
<b>Activity 1.1.3</b>	Establish a psychosocial mobile team of at least 10 members (5 male and 5 female) in Bor POC			
<b>Activity 1.1.4</b>	Provide additional on the job training and four supervisory on the job training sessions of one week			
<b>Output 1.2</b>	Community members receive basic Psychosocial support to reduce distress in the community.	<p>Number of people benefiting from psychosocial activities in Bor POC</p> <ul style="list-style-type: none"> <li>Target – 4,123 individuals/total population of Bor PoC</li> </ul>	<i>Training Participant Lists, Discussion Group Participant Lists disaggregated by age and sex, and IOM reports.</i>	<p>Assumptions: The security situation will allow for travel to and from Bor POC by project staff.</p> <p>Space will be allocated by the CCCM actors for discussion groups and activities.</p> <p>Risks: The community does not support the initiative.</p> <p>Community member do not positively respond to organisation of discussion groups.</p>

Goal/Objectives/Outcomes/Outputs		Indicator of progress	Means of Verification	Assumptions and Risks
				Mitigation: Project staff will ensure proactive engagement of the community at the beginning of the project, encouraging them to play a role in the design of activities and structure of the discussion groups.
<b>Activity 1.2.1</b>	Organize discussion groups especially with women, girls and male youth ages 15-30			
<b>Activity 1.2.2</b>	Conduct community information sessions/discussion groups targeting particular vulnerable populations as identified by the Protection Cluster lead and monitoring activities			

## 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.)

<b>Project start date:</b>	<b>1 August 2014</b>	<b>Project end date:</b>	<b>31 July 2015</b>
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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 Establishment of project (IOM Internal)			X									
Activity 2 Conduct a rapid psychosocial needs assessment to update the assessment conducted in Bor in February, including development of indicators for impact assessment				X								
Activity 3 Select and train 20 community members in Bor on basic counselling and facilitation of discussion groups, including gender awareness and facilitation of women discussion groups				X								
Activity 4 Establish a psychosocial mobile team of at least 10 members in Bor POC					X	X	X	X				
Activity 5 Provide additional on the job training and four supervisory on the job training sessions of one week					X	X	X	X				
Activity 6 Organize discussion groups especially with women, girls and male youth ages 15-30					X	X	X	X				
Activity 7 Conduct community information sessions/discussion groups targeting particular vulnerable populations as identified by the Protection Cluster lead and monitoring activities					X	X	X	X				
Activity 8 On-going Project Monitoring			X	X	X	X	X	X				

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