



PROPOSAL MONTHLY PROGRESS UPDATE
as of 28 February 2015

Recipient UN Organization(s):	UNICEF	SOs Strategic Objective(s)	SO 3: Ensure essential services				
		MCAs Mission Critical Action(s)	MCA06: Access to basic services				
Implementing Partner(s):	Ministry of Gender, children and Social Protection Ministry of Health Save the Children (INGO) Child Fund (INGO) Shalom (CSO) Think (CSO) ANPCCAN (CSO) Search (CS) UNMIL UNMEER						
Project Number:	00093136						
Proposal Title:	Supporting the wellbeing and protection of Ebola Affected Children in Liberia						
Total Approved Proposal Budget:	US\$ 4,007,578 (USD 2,000,000 transferred 16 December 2014)						
Total Approved Project Budget:	MCA06:	Project	Budget Approved				
		00093136	US\$ 2,000,000				
			US\$				
			US\$				
			US\$				
			US\$				
	MCA0n:		US\$				
	Total			US\$ 2,000,000			
Geographical Focus Area	<input type="checkbox"/> Guinea <input checked="" type="checkbox"/> Liberia <input type="checkbox"/> Sierra Leone <input type="checkbox"/> Common Services	Geographical Local Area (Counties-Districts-Prefectures)	<input type="checkbox"/> Urban <input type="checkbox"/> Rural <input type="checkbox"/> Border				
Outbreak Hot Zones	Please select one from the following <input type="checkbox"/> Yes (Y) <input type="checkbox"/> No (N)						
# Direct Beneficiaries (Ensure the information below indicates both the total number of beneficiaries ensure inclusive participation and non-discrimination of the vulnerable and at-risk groups)	Total Beneficiaries	-2781 children who lost one/both parents (1555 of whom have received the one-off cash payment) -55 children –in interim care centre and 40 children who passed through a Transit Center (these figures overlap) -120 social workers/mental health clinicians at county level (70 social workers and 50 mental health clinicians) -300 National Youth Volunteers undertaking EVD awareness and prevention activities					
	Women:	#					
	Girls:	#					
	Men:	#					
	Boys:	#					
Project Duration (months):	6	Starting Date:	December 1 st , 2014	Completion Date:	May 31 st , 2015	Delay (months)	
Proposal Title:							

Funds Committed:	US\$679,518.22	% of Approved:	%36
Funds Disbursed:	US\$1,189,640.66	% of Approved:	%63.6

PROPOSAL – MONTHLY PROGRESS UPDATE RESULT MATRIX

Strategic Objective to which the Proposal is contributing¹					
MCA [6]	MCA06: Access to basic services				
Output Indicators	Geographic Area	Target (as per Proposal Matrix)	Quantitative Results achieved at Month 1	Planned % Delivery Rate	Effective % Delivery Rate at Month 1
Description of the Quantifiable Indicator as per Matrix originally presented					
Strategic Objective 3 MCA6: Increased children’s access to basic services	Montserrado -Margibi -Lofa -Bong -Bomi	3 ICCs	1 ICC 1 Transit Center ²		
		7,500 Foster Care	350 ³		
		7,500 Grants for Foster Care House Holds	1,555 ‘orphans’ have received the one-off cash grant		
			605 ‘orphans’ are currently in process to receive one-off cash grant in Montserrado county (on-going verification for the remaining		

Qualitative achievements against outcomes and results:

Please, describe the achievements including documents, reports, evaluations. Please include pictures if possible

Section1: Results and Outcomes expected

Section2: Impact on Gender Results

Section 3: Environmental Impact Assessment in reference to the proposal

Section 4: Describe the conditions based on which the proposal might have change its destination (even partially)

Section: 1 - Expected Results

MCA [6]

UNICEF, through a project ‘Supporting the Well-being and protection of Ebola Affected Children in Liberia’ will expand outreach to 12,600 EVD affected children⁴, up from the current number of 3,979 in the ministry’s database of ‘affected children’. The agency is aiming to fill gaps with regard to several response interventions for children. Through this project, UNICEF aims to recruit and train 120 social workers and mental health clinicians that will

1 Proposal can only contribute to one Strategic Objective

2 As elaborated in the narrative, fewer number of ICCs have been achieved because there have not been large numbers of EVD-affected children needing to access them. Moreover, a number of INGOs received funds to set up ICCs so in consultation with government and other agencies, there was no need for UNICEF to create additional ones.

3 This is the current estimate from the Ministry of Gender, Children and Social Protection (MoGCSP). At the time of putting the proposal together, the projections were for very high rates of EVD-affected populations that would impact adversely on families leading to children losing their parents/caregivers due to EVD (thereby resulting in high number of foster care households). Fortunately this has not been the case. Most children who have lost parents/primary caregivers due to EVD have been taken in by extended family. The priority from the perspective of addressing their immediate needs is about speeding up the identification and registration of all such children by government county-level social workers so that the government’s core package of services (including the grant) gets to those children in these families.

4 The current number of EVD affected children registered by the Ministry of Gender, Children and Social Protection is 3979. This number continues to be updated as new data comes in from the county-level social workers who are registering children who have lost one or both parents or primary caregivers due to EVD, child survivors of EVD and other EVD-affected children. Of this number, and as mentioned in a previous footnote, 2781 children have been registered to-date as having lost one or both parents /primary caregivers due to EVD (712 having lost one parent and 2069 having lost both). UNICEF expects the numbers to be even higher and is supporting the county-based social work/PSS teams to expedite the identification and registration, which triggers the response package of cash and services.

provide case management, psychosocial care and support, placement in appropriate care and protection services for children who have lost parents or primary caregivers due to EVD and child survivors of EVD. This will also involve regular follow-up with these children and their caregivers for a period of six months. From the perspective of addressing the immediate needs of these children and their caregivers is expediting the identification and registration of all such children by government county-level social workers so that the government's core package of services (including the one-off grant) gets to them. In addition to the children who have been orphaned and the child survivors, there are many more children living in communities heavily impacted by EVD for whom psychological first and other social support will be essential for healing and coping, to encourage acceptance of survivors (both adults and children) and to support children who have lost their parents/caregivers to EVD. UNICEF will support both the government and NGOs with the appropriate expertise to carry out a variety of psychosocial and PFA activities in the most heavily affected EVD communities.

It will also recruit, train and deploy 300⁵ national youth volunteers as contact tracers to identify and refer children affected by EVD, provide psychological first aid, community and social mobilization as well as messaging for EVD prevention. Plans have been finalized with the Ministry of Youth and Sports in this regard, and the 300 volunteers have already been recruited. In addition, 1,200 survivors are in the process of being recruited through partnerships with NGOs to support a number of activities depending on their skills, capacities and suitability including care for EVD affected children, community mobilization activities, support to strengthening of child protection structures at community level.

Based on early projections for large numbers of EVD-affected children, the agency planned to support three additional Interim Care Centers (ICCs) for children on 21 day observation and who were separated from their primary caregivers. However, very few children accessed such facilities as most remained under home-based observation. UNICEF did, however, provide technical support so that the facilities met the established standards for quality and care provided by staff and for provision of food and non-food items. Although there are currently no children in any of the existing ICCs (all children that have stayed for observation have returned to families), UNICEF continues to monitor the quality of standards and are in the event there is a need for children to be placed in them. This experience has led to a need to revisit the ICC support model and put greater focus on family and community based care and support. The project is also considering transforming the transit center for children that survived Ebola, but who have no living relatives to care for them into a day care center for small children whose mothers will be involved in income generating activities as part of the EVD recovery plan. Currently there are no children in the transit center.

Section: 2 – Deviation of the Proposal from the Original Plan

MCA [N]
(Narrative)

MCA [N2] – If more than one Mission Critical Action
(Narrative)

Section: 3 - Gender Impact

MCA [N]
(Narrative)

MCA [N2] – If more than one Mission Critical Action
(Narrative)

⁵ The initial planned number of 350 contact tracers was not required as, from other sectors in UNICEF and other partners, many contact tracers were mobilised and recruited. Further, the number of cases was less than anticipated. Although the number of cases has come down, this important work at community level continues.

Section: 4 - Environmental Impact

MCA [N]
(Narrative)

MCA [N2] – If more than one Mission Critical Action
(Narrative)