

<b>Requesting Organization :</b>	International Rescue Committee			
<b>Allocation Type :</b>	Reserve allocation 4			
<b>Primary Cluster</b>	<b>Sub Cluster</b>	<b>Percentage</b>		
PROTECTION		100.00		
		<b>100</b>		
<b>Project Title :</b>	Emergency Response and Protection for Conflict Affected Population in Mayendit			
<b>Allocation Type Category :</b>	Frontline services			
<b>OPS Details</b>				
<b>Project Code :</b>		<b>Fund Project Code :</b>	SSD-15/HSS10/RA4/P/INGO/665	
<b>Cluster :</b>		<b>Project Budget in US\$ :</b>	200,000.09	
<b>Planned project duration :</b>	6 months	<b>Priority:</b>		
<b>Planned Start Date :</b>	01/12/2015	<b>Planned End Date :</b>	31/05/2016	
<b>Actual Start Date:</b>	01/12/2015	<b>Actual End Date:</b>	31/05/2016	
<b>Project Summary :</b>	<p>The proposed project is designed to respond to the unfolding humanitarian crisis being occasioned by the ongoing fighting in Central Unity States. In responding to the increase insecurity and vulnerability the IRC proposes to provide lifesaving gender based violence (GBV), protection and child protection interventions to 18,000 vulnerable individuals in Mayendit, Unity State. In recognition of the complex environment as well as the limitations on access to the target community and population, the IRC proposes the following three scenario based interventions, a) the situation remains as it is with sporadic fighting and the related security risks; b) the situation improves making way for increased humanitarian access and service delivery, and; c) the situation worsens with sustained clashes between the warring parties. Each scenario presents its own dynamics which will define the delivery of the GBV, Protection and Child Protection services to the people of Mayendit.</p> <p><b>Emergency General Protection</b>          The IRC will undertake initial rapid protection assessments to provide an overview of the emergency situation to ascertain the immediate needs of the population, identify any human rights violations, and assess the main protection risks in Mayendit. The IRC will deploy its internationally recognized Protection Mainstreaming Tool-kit for use by identified service providers involved in the response to increase their understanding of basic protection principles and to give them the practical tools they need to integrate protection principles into their respective sectoral responses. The program will conduct ongoing protection monitoring to evaluate ongoing protection concerns, which may include barriers that beneficiaries face in accessing services and information. The IRC will assist and support humanitarian partners in the pre-distribution phase in locations identified to have higher protection risks or higher concentration of vulnerable individuals to reduce the risk of individuals or families being excluded and to increase safe and secure access to distributions for beneficiaries.</p> <p><b>Mobile GBV and Protection emergency response</b>          The IRC will respond to the needs of women and girls affected by the recent conflict in Mayendit with the provision of clinical and psychosocial care for survivors of sexual violence. The IRC will utilize internal emergency response capacity to respond to GBV issues in this ongoing crisis and will set up a GBV mobile response team to provide GBV case management and psychosocial support services (PSS) information, protection monitoring and risk mitigation activities. This shall take a phase- in/phase-out approach in providing much needed GBV services to conflict affected populations. Key interventions shall include: increasing women and adolescent girls' access to life saving GBV case management, 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 enhance understanding and analysis among humanitarian actors on the protection context and needs.</p> <p><b>Mobile Child Emergency Protection</b>          The proposed child protection intervention shall implement an emergency response model which shall enable the IRC to reach areas of limited access in and around Mayendit County in Unity State. The IRC will provide a platform to establish community-based child protection mechanisms (CBCPMs) to facilitate the identification of and response to risks and threats as well as child protection concerns and worked with the community to develop community-based mitigation plans, prevention messaging and institute child protection surveillance mechanisms. The IRC will provide psychosocial support for children affected by conflict their recovery, restore a sense of normalcy, and promote their cognitive, physical, social and emotional development and provide parenting support.</p>			
<b>Direct beneficiaries :</b>				
<b>Men</b>	<b>Women</b>	<b>Boys</b>	<b>Girls</b>	<b>Total</b>

4,068	4,032	5,220	4,680	18,000
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**Other Beneficiaries :**

Beneficiary name	Men	Women	Boys	Girls	Total
Internally Displaced People	2,441	2,419	3,132	2,808	10,800
People in Host Communities	1,627	1,613	2,088	1,872	7,200

**Indirect Beneficiaries :**

**Catchment Population:**

**Link with allocation strategy :**

The proposed interventions are in line with and designed to reinforce the 2015 protection cluster priorities and objectives. The IRC will utilize an integrated GBV and Protection approach which will respond to the needs of vulnerable populations including women and girls affected by the recent conflict in Central Unity and will build on existing IRC GBV and protection emergency responses programming in South Sudan. The IRC will utilize internal emergency response capacity to respond to this emerging crisis and will set up a mobile response team to provide protection, children protection and GBV case management and PSS, information, protection monitoring and risk mitigation activities services. This will be a short term response for a period of six months and shall provide much needed services in conflict affected locations. A key focus of this intervention will include strengthening psychosocial services for survivors and establishing local level GBV coordination and referral systems with other local and international actors. The IRC protection program 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. The child protection team will provide mobile response in reaching children affected by the ongoing conflict 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 interventions 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.

**Sub-Grants to Implementing Partners :**

Partner Name	Partner Type	Budget in US\$

**Other funding secured for the same project (to date) :**

Other Funding Source	Other Funding Amount

**Organization focal point :**

Name	Title	Email	Phone
Laura Brambilla	Grants Coordinator	laura.brambilla@rescue.org	0021 1920550007
Ronald-Paul Veilleux	Country Director	Ronald.PaulVeilleux@rescue.org	+211 920 535 000

**BACKGROUND**

**1. Humanitarian context analysis**

The protection of civilian environment in South Sudan has sharply deteriorated. Thousands of civilians are estimated to have been killed, raped, or abducted in southern Unity State, and despite the signing of the Agreement on the Resolution of the Conflict in the Republic of South Sudan in late August, violence has continued unabated in multiple locations around the country. Furthermore, parts of the country that had previously not been a part of the national conflict are becoming increasingly insecure and made vulnerable by the high influx of people displaced by the fighting into these areas. New incidents of fighting in Western Equatoria in particular, and the fear that that fighting may spread into neighboring states which have remained stable, is creating new protection concerns and challenges. Central and Southern Unity continue to be the most unstable and insecure resulting in the displacement of huge sway of the population. There have been a staggering increase in the number and severity of the atrocities committed in the ongoing fighting in South Unity. And communities like Leer, Mayendit and Mayon are noted to be the hardest hit by the conflict that continues to destabilize and rage across communities in Central and Southern Unity State. There are reports of widespread use of sexual violence. Internally displaced persons (IDP) further reported that Government forces shot into swamps at fleeing civilians, burned houses, and abducted women and children. Abductions and sexual slavery is commonplace in the conflict-affected states, and the practice of soldiers taking "wives" is fueling the use of abduction as an accepted tactic of warfare. Commitments by the parties to the conflict to refrain from sexual violence appear to have gone largely unfulfilled, and attempts to gain release of abducted women have yielded little results. The situation for children in the conflict affected states is equally dire. In addition to girls who are abducted to be used as sex slaves, boys are also forced to join armed groups as soldiers and porters. With active fighting still ongoing and with the commitment of warring parties significantly limited, disarmament, demobilization, and reintegration (DDR) services are scarce, meaning that even if children are released or able to escape, their return to civilian life is often fraught with challenges. It is worth noting that August saw the highest number of people to ever seek refuge within protection of civilian (PoC) sites in South Sudan, an indication that even with the peace agreement, the protection fears of the population are not yet diminishing. Some of the PoCs have now surged far beyond their capacities, with Bentiu now holding over 130,000 people.

## **2. Needs assessment**

Reports from Central Unity including communities such as Leer, Mayendit and Mayom indicate an escalation of insecurity and violence in recent months. This recent spate of violence and fighting has occasioned an increase in vulnerability. Key concerns include growing displacements of populations in from this conflict affected locations into more stable communities in Mayendit. These recent conflict-affected displacements in addition to existing vulnerabilities due to flooding and violence which had displaced over 20,000. Sexual violence and other forms of GBV against women and girls are becoming more widespread due to continued armed conflict and population movement. As the conflict in Central Unity unfolds there are growing reports of 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 from the ongoing conflict. Adolescent girls are particularly vulnerable to multiple forms of violence and have limited support systems and access to information. Based on programming experience in Southern Unity, 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 the IRC's GBV intervention in Bentiu notes, at least 30% of beneficiaries targeted through PSS activities will be adolescent girls. 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 safe locations, amplified the risks, including imminent threats to their lives through recruitment into armed forces, abduction, rape and other assault. Schooling for all children have limited access to educational, recreational and psychosocial support in locations in and around Mayendit town where the highest number of children are currently living. Responding to these new crises requires a targeted emergency response outside of the current IRC program sites in Southern Unity, increased staffing and mobile emergency programming that meet the immediate needs of dispersed populations affected by the humanitarian crisis. The IRC will utilize existing internal capacity to respond quickly and effectively to emerging crisis and will provide emergency GBV, Protection and Child Protection responses to 18,000 vulnerable individuals in Mayendit over a five month period.

## **3. Description Of Beneficiaries**

**Child Protection:** In total, 9,900 (5,220 boys and 4,680 girls) under the age of 18 and adults in Mayendit, 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 a total of 200 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 PSS 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.

**GBV:** A total of 4,032 women and 4,680 girls will be reached by the IRC's Women's Protection and Empowerment (WPE) interventions. The 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, the IRC will lead focus group discussions (FGD) 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:** While the entire population in this vulnerable context require protection services, the IRC shall prioritize reaching the most vulnerable of the total target of 18,000 which is estimated to be set at 35% or 6,300. IRC's protection team will undertake rapid protection assessments to provide an overview of the emergency situation in Mayendit 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. 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**

The IRC has a wealth of experience in the delivery of protection related services in vulnerable contexts and has earned a reputation as a global leader, with unique knowledge, expertise and capacity in protection and WPE programming. In South Sudan, the IRC has been one of the largest providers of aid since 1989, currently active in five states with protection being a core component of the services offered. More recent expansion of protection programming has included Nyal in Southern Unity. The IRC's global GBV ER&P model has been adapted to the South Sudan context and has informed the emergency responses that the IRC has led since conflict broke out last year. Currently, the 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 Unity State, the IRC has existing WPE programming in the Bentui PoC camp 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. The IRC initiated child protection programming in Ganyiel in October 2014 and intends to expand to vulnerable communities in Southern Unity based on needs identified. The IRC will use the lessons learnt of the Ganyiel pilot and tools and training modules adapted to South Sudan to establish and mobile response model and 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 in Mayendit. As a lead NGO in protection and protection mainstreaming, the IRC has been supporting protection mainstreaming, including at WFP distributions. In 2014 the IRC piloted a protection mainstreaming project in six countries based upon a field-tested methodology of training, action planning and mentoring. Based upon promising practices, the IRC has produced various tools endorsed across all IRC sectors that provide concrete actions to mainstream protection. The 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**

The IRC also works closely with the community leadership and structure (where available) in Mayendit to build capacity around GBV response and prevention and with local women's and adolescent girls groups to provide leadership trainings and promote empowerment. The WPE programming is largely development focused and geared towards promoting women's safety and empowerment through development of capacity, systems and institutions. In response to the growing humanitarian crisis in Mayendit and central Unity State linked to the increased militarization and displacements, the IRC will set up a six month emergency response to reach as much girls a possible and to make appropriate referrals of more pressing and vulnerable cases for appropriate care. 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. As part of this proposed intervention, IRC will establish child protection emergency response programming in Mayendit. This child protection project will complement existing and ongoing efforts at implementing a child protection project focused on the identification, documentation, follow up and reunification of Unaccompanied and separated children (UASC).

## LOGICAL FRAMEWORK

### Overall project objective

To strengthen protection, GBV and child protection response and prevention services in humanitarian settings in South Sudan

## 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

### Contribution to Cluster/Sector Objectives :

#### Outcome 1

Conflict affected persons have safe access to immediate and life-saving protection services and support in Mayendit

#### Output 1.1

##### Description

Vulnerable populations, including women and girls, face reduced risk and benefit from an improved protective environment

##### Assumptions & Risks

Risk:

- the conflict intensifies, displacing further number of people in Mayendit
- massive movement of IDPs exceed current trends, overwhelming the available services

#### Activities

##### Activity 1.1.1

- Conduct Initial Rapid Protection Assessments and ongoing protection monitoring
- Protection monitoring and response – advocate and coordinate with partners and other humanitarian actors for integrated responses to protection concerns
- Provide training to service providers on protection mainstreaming and on the development of (sectoral) action plans to address identified protection issues in their interventions
- Facilitate access to life- saving assistance and support to distribution
- Community outreach – conduct awareness campaigns on protection principles and human rights
- Strengthen existing Community-Based Protection Mechanisms
- 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
- 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
- Conduct protection mainstreaming workshop with all services providers on the integration of protection principles in their day to day work

#### Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	PROTECTION	*** Old indicator *** [Frontline services] # of affected people reached by messaging initiatives providing life saving information	1,423	1,412	1,827	1,638	6,300
<b>Means of Verification</b> : Protection monitoring reports, sample messages							
<b>Output 1.2</b>							
<b>Description</b>							
life-saving age appropriate GBV case management and psychosocial support services are available to women in Mayendit							
<b>Assumptions &amp; Risks</b>							
Risk: - communities are not supportive of IRC GBV and protection programming Assumptions: - GBV survivors are able to report GBV and access services							
<b>Activities</b>							
<b>Activity 1.2.1</b>							
<ul style="list-style-type: none"> <li>- 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</li> <li>- Provide life saving, age appropriate GBV case management and PSS services to women and girls to 1,500 women and girls</li> <li>- Provide psychosocial and clinical care for sexual assault survivors GBV</li> <li>- Undertake a rapid assessment in determining the number of women of reproductive age requiring the dignity kits</li> <li>- Meeting with women to identify material in the dignity kits</li> <li>- Procure and transportation of dignity Kits</li> <li>- Distribution</li> <li>- Creation of a data base of women receiving dignity kits</li> <li>- Provide training and refresh trainings on family tracing and reunification processes and case management.</li> <li>- Undertaken ongoing identification, documentation, referral, and follow up on UASC</li> <li>- Manage the IRC's Child Protection Information Management System while utilizing the Rapid FTR open source application.</li> <li>- Conduct follow-up visits with identified UASC and manage highly vulnerable cases.</li> </ul>							
<b>Indicators</b>							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	PROTECTION	***Old indicator***[Frontline services] [Gender-based violence] % of GBV survivors receiving psychosocial response receive services in line with standards for quality care	435	3,050	436	4,791	8,712
<b>Means of Verification</b> : Periodic reports, monitoring reports							
Indicator 1.2.2	PROTECTION	***Old Indicator*** [Frontline services] [Gender-based violence] # of dignity kits distributed to beneficiaries		1,000		500	1,500
<b>Means of Verification</b> :							
Indicator 1.2.3	PROTECTION	***Old indicator***[Frontline services] [Child Protection] # of identified and registered separated / unaccompanied children reunited with their families or alternative care arrangements assured			25	15	40
<b>Means of Verification</b> :							
<b>Outcome 2</b>							
Conflict affected children have access to safe space and appropriate psychosocial support and services.							
<b>Output 2.1</b>							
<b>Description</b>							
Conflict affected children of Mayendit provided with psychosocial care and services reunited with their families and guardians							
<b>Assumptions &amp; Risks</b>							
<ul style="list-style-type: none"> <li>- parents are unwilling for children to participate to psychosocial activities</li> <li>- threat of fighting and ongoing battle escalate and humanitarian access is limited</li> </ul>							
<b>Activities</b>							
<b>Activity 2.1.1</b>							
<ul style="list-style-type: none"> <li>- Conduct Initial Rapid Child Protection Assessments and the assessment of risk and threat affecting children</li> <li>- Conduct protection monitoring and response – advocate and coordinate with humanitarian actors for integrated responses to protection concerns</li> <li>- Provide psychosocial support activities for conflict affected children, and youth in Mayendit</li> <li>- Identify and respond to key child protection concerns and integrate risk reduction action</li> <li>- Undertake and support interventions aimed at family training and reunification in Mayendit</li> </ul>							

Indicators													
Code	Cluster	Indicator	End cycle beneficiaries				End cycle						
			Men	Women	Boys	Girls	Target						
Indicator 2.1.1	PROTECTION	***Old indicator***[Frontline services] [Child Protection] # of crisis affected children receiving psychosocial support and services			0	0	0						
<b>Means of Verification</b> : Protection monitoring reports, list of children participating in PSS, period reports													
<b>Additional Targets</b> :													
M & R													
Monitoring & Reporting plan													
<p>The IRC will develop monitoring systems at all levels of the project. IRC has a set of standardized data collection tools such as the GBVIMS to monitor and evaluate results which shall be utilized in the implementation of the project. Reporting is done on a weekly, monthly and quarterly basis and the team prepares activity work plans each week to monitor the progress of activities implemented. IRC Programme Managers will be responsible for monitoring programme implementation and reporting, supported by the IRC Monitoring and Evaluation (M&amp;E) Specialist. Their role will be to ensure that proper M&amp;E systems are in place and in use and staff's M&amp;E capacity is enhanced to strengthen the impact and effectiveness of the programme. At the onset of the programme, a planning meeting bringing together key programme staff will provide orientation on project outcome and the monitoring and reporting tools. Baseline data for the proposed programme is mostly in place, informed by related interventions and other sectoral programmes. Where this is not the case, remaining data will be collected by the second month of the programme. At the community level, project officers will monitor the impact of project activities through a combination of observation and participatory techniques such as facilitating group discussions. IRC Project Managers and Technical Coordinators will regularly review project interventions through field visits, debriefings, and regular reporting on activity and progress towards outcomes. This data will inform any necessary refinement of program strategy, the development of new action plans, and will be analyzed and disseminated to other actors including providing specific recommendations and lessons learnt to stakeholders at the community and state levels.</p>													
Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: - Conduct Initial Rapid Protection Assessments and ongoing protection monitoring - Protection monitoring and response – advocate and coordinate with partners and other humanitarian actors for integrated responses to protection concerns - Provide training to service providers on protection mainstreaming and on the development of (sectoral) action plans to address identified protection issues in their interventions - Facilitate access to life- saving assistance and support to distribution - Community outreach – conduct awareness campaigns on protection principles and human rights - Strengthen existing Community-Based Protection Mechanisms - 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 - 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 - Conduct protection mainstreaming workshop with all services providers on the integration of protection principles in their day to day work	2015												X
	2016	X	X	X	X	X							
Activity 1.2.1: - 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 - Provide life saving, age appropriate GBV case management and PSS services to women and girls to 1,500 women and girls - Provide psychosocial and clinical care for sexual assault survivors GBV - Undertake a rapid assessment in determining the number of women of reproductive age requiring the dignity kits - Meeting with women to identify material in the dignity kits - Procure and transportation of dignity Kits - Distribution - Creation of a data base of women receiving dignity kits - Provide training and refresh trainings on family tracing and reunification processes and case management. - Undertaken ongoing identification, documentation, referral, and follow up on UASC - Manage the IRC's Child Protection Information Management System while utilizing the Rapid FTR open source application. - Conduct follow-up visits with identified UASC and manage highly vulnerable cases.	2015												X
	2016	X	X	X	X	X							



Non Violence Peace Force	recognized actor in protection
MoSD	government institution directly responsible for vulnerable women and children

### **Environment Marker Of The Project**

A: Neutral Impact on environment with No mitigation

### **Gender Marker Of The Project**

2a-The project is designed to contribute significantly to gender equality

### **Justify Chosen Gender Marker Code**

The proposed intervention is designed keeping in view the structural and socio-political inequities that perpetuate vulnerability among women and girls among the refugee population. In this regards, the project proposes addressing the attitudes, traditions, beliefs and practices at the family and communal levels the limits women from enjoying their rights and fulfilling their full potentials as human being. Specifically the project shall ensure community and refugee leaders and groups recognized women as rights bearers and to hold refugee leadership and structures for their attitudes and action towards women. Women too shall be reached through awareness and sensitization to address their mental modes and to ensure that they have the information and capacity to made effective demand for services relevant to enhancing rights, dignity and welfare. The IRC will consult with community members, including women, girls, men and boys to understand their needs, gaps to be addressed, how they are affected differently by SGBV to prioritize response and prevention interventions. In addition, the IRC will encourage and advocate for a strong engagement and participation of women, girls, men and boys in the planning and implementation of project intervention. Female response staff will respond to the needs of female survivors, while trained male staff will respond to the needs of male survivors. Community awareness, campaigns, sensitizations will target both women, girls, men and boys to encourage reporting and access to services by all genders. Women, girls, men and boys will be involved in reviews, monitoring and evaluation of the project to ensure their needs are being met, gaps identified and action taken.

### **Protection Mainstreaming**

The IRC will enhance the capacity of IRC staff and 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 sector 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 disseminated—as part of training—to IRC sectors and other partners working in emergency response in Unity State.

### **Country Specific Information**

#### **Safety and Security**

This project shall be carried out using an emergency response model by which IRC shall make available its Emergency Response Team (ERT) which is comprised of emergency staff of all sectors relevant to emergency response for the implementation of this project. Each member of the ERT member shall be training and guided in paying premium of personal safety and security and ensuring that no unnecessary risk is take which would endanger the lives and well-being of team members. The IRC will ensure seek and rely on the advice of its Safety and Security Unity as well as other security advisory for the UN and other humanitarian agencies in determining where it is safe to travel to the project location for the provision of humanitarian response services at any given time. Furthermore, the IRC shall ensure in all it humanitarian assistance and support to the conflict affected population of Mayendit that a pull factor is not crated which would attract the vulnerable populations for their locations of safety in order to access the services and support provided by the project. In this regards the "do-no-harm" principle shall be strictly followed and shall be key in guiding interactions and the provision of services to the target populations.

#### **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**

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
<b>Staff and Other Personnel Costs</b>							
1.1	Technical unit - VPRO Protection	D	1	343.70	9	100%	3,093.30
1.2	Intl staff salaries - support staff Juba	s	21	5,546.50	6	2%	13,068.66
1.3	Location Differential - Juba Office Support Staff	s	21	834.00	6	2%	1,965.07
1.4	Location Differential -RRT	s	1	833.00	2	100%	1,666.00

1.5	Roving Emergency protection manager	D	1	4,100.00	6	40%	9,840.00
1.6	National Staff Salaries - Support Staff - Juba	s	67	1,046.16	6	2%	7,864.40
1.7	Nairobi regional support staff	s	1	1,500.00	6	2%	168.30
1.8	Casual Labour - Support Staff - Juba, Ganyiel	s	1	200.00	6	2%	22.44
1.9	International Staff Benefits - Direct Program Staff	D	3	593.14	6	100%	10,676.52
1.10	International Staff Benefits - Support Staff - Juba	s	21	2,394.20	6	2%	5,641.21
1.11	Expats benefits @ 29.5% Technical unit - VPRO	D	1	3,093.14	1	30%	912.48
1.12	SMT Juba based staff retention allowance	D	6	2,000.00	5	2%	1,122.00
1.13	National staff benefits - support staff Juba	s	67	20.26	6	29%	2,361.91
1.14	Rent for staff housing - Juba	D	49	128.86	6	46%	17,283.06
1.15	RRT Team Lead	D	1	4,736.91	2	100%	9,473.82
1.16	Roving WPE Emergency Response Manager	D	1	4,100.00	6	40%	9,840.00
1.17	Location differential- Direct Program Staff	D	1	666.40	6	100%	3,998.40
	<b>Section Total</b>						<b>98,997.57</b>
<b>Supplies, Commodities, Materials</b>							
2.1	Protection monitoring activities	D	1	1,000.00	4	100%	4,000.00
2.2	Protection mainstreaming trainings	D	1	1,000.00	4	100%	4,000.00
2.3	Community outreach staff/stipends - protection	D	1	2,000.00	4	100%	8,000.00
2.4	Protection mainstreaming fund	D	1	3,745.00	1	100%	3,745.00

2.5	GBV community level awareness	D	1	900.00	4	100%	3,600.00
2.6	Psychosocial support and service survivors	D	1	900.00	4	100%	3,600.00
2.7	Provision of dignity kits	D	1	4,000.00	1	100%	4,000.00
2.8	Strengthening of community based child protection	D	1	900.00	1	100%	900.00
2.9	Mobile outreaches to isolated islands	D	1	1,000.00	4	100%	4,000.00
2.10	Provision of safe healing and learning spaces	D	1	3,000.00	1	100%	3,000.00
2.11	Conducting family training and reunification	D	1	4,000.00	1	100%	4,000.00
2.12	Thuraya airtime	D	2	733.27	6	100%	8,799.24
2.13	office supplies-stationary	D	1	500.00	1	100%	500.00
2.14	Mobile airtime	D	1	250.00	6	100%	1,500.00
2.15	Community outreach staff/stipends - WPE	D	1	2,000.00	1	100%	2,000.00
<b>Section Total</b>							<b>55,644.24</b>
<b>Travel</b>							
5.1	Airfare/accommodation/per diem- VPRO program	D	18	141.49	6	100%	15,280.92
5.2	Visa/work permit - international Juba main office - support staff	s	2	23.50	5	100%	235.00
5.3	Visa/work permit - intl protection program staff - Juba	D	0.8	6,415.00	5	2%	479.84
5.4	Travel to/from post - intl direct program staff	D	2	1,800.50	1	100%	3,601.00
5.5	Travel to/from post - intl support staff	s	22	1,500.00	1	2%	617.10
<b>Section Total</b>							<b>20,213.86</b>
<b>General Operating and Other Direct Costs</b>							
7.1	Office supplies - support offices	s	2	88.94	6	100%	1,067.28

7.2	Juba main office running costs	s	1	97,97 7.00	6	2%	10,993.02
<b>Section Total</b>							<b>12,060.30</b>
<b>SubTotal</b>			327.80				<b>186,915.97</b>
Direct							141,245.58
Support							45,670.39
<b>PSC Cost</b>							
PSC Cost Percent							7%
PSC Amount							13,084.12
<b>Total Cost</b>							<b>200,000.09</b>
<b>Total Audit Cost</b>							<b>2,000.00</b>
<b>Grand Total CHF Cost</b>							<b>202,000.09</b>
<b>Project Locations</b>							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location	Activity Name				

		Men	Women	Boys	Girls	Total	
Unity -> Mayendit	100	4,068	4,032	5,220	4,680	18,000	<p>Activity 1.1.1 : - Conduct Initial Rapid Protection Assessments and ongoing protection monitoring</p> <ul style="list-style-type: none"> <li>- Protection monitoring and response – advocate and coordinate with partners and other humanitarian actors for integrated responses to protection concerns</li> <li>- Provide training to service providers on protection mainstreaming and on the development of (sectoral) action plans to address identified protection issues in their interventions</li> <li>- Facilitate access to life- saving assistance and support to distribution</li> <li>- Community outreach – conduct awareness campaigns on protection principles and human rights</li> <li>- Strengthen existing Community-Based Protection Mechanisms</li> <li>- 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</li> <li>- 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</li> <li>- Conduct protection mainstreaming workshop with all services providers on the integration of protection principles in their day to day work</li> </ul> <p>Activity 1.2.1 : - 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</p> <ul style="list-style-type: none"> <li>- Provide life saving, age appropriate GBV case management and PSS services to women and girls to 1,500 women and girls</li> <li>- Provide psychosocial and clinical care for sexual assault survivors GBV</li> <li>- Undertake a rapid assessment in determining the number of women of reproductive age requiring the dignity kits</li> <li>- Meeting with women to identify material in the dignity kits</li> <li>- Procure and transportation of dignity Kits</li> <li>- Distribution</li> <li>- Creation of a data base of women receiving dignity kits</li> <li>- Provide training and refresh trainings on family tracing and reunification processes and case management.</li> <li>- Undertaken ongoing identification, documentation, referral, and follow up on UASC</li> <li>- Manage the IRC's Child Protection Information Management System while utilizing the Rapid FTR open source application.</li> <li>- Conduct follow-up visits with identified UASC and manage highly vulnerable cases.</li> </ul> <p>Activity 2.1.1 : - Conduct Initial Rapid Child Protection Assessments and the assessment of risk and threat affecting children</p> <ul style="list-style-type: none"> <li>- Conduct protection monitoring and response – advocate and coordinate with humanitarian actors for integrated responses to protection concerns</li> <li>- Provide psychosocial support activities for conflict affected children, and youth in Mayendit</li> <li>- Identify and respond to key child protection concerns and integrate risk reduction action</li> <li>- Undertake and support interventions aimed at family training and reunification in Mayendit</li> </ul>

**Documents**

**Category Name**

**Document Description**