

<b>Requesting Organization :</b>	Impact Health Organization				
<b>Allocation Type :</b>	2nd Round Standard Allocation				
<b>Primary Cluster</b>	<b>Sub Cluster</b>	<b>Percentage</b>			
WATER, SANITATION AND HYGIENE		100.00			
		<b>100</b>			
<b>Project Title :</b>	Emmergency prevention and control of WASH related disease outbreak among vulnerable amongst IDP, Returnees and Host population in Magwi County, Imatong state				
<b>Allocation Type Category :</b>	Frontline services				
<b>OPS Details</b>					
<b>Project Code :</b>	SSD-16/WS/88808	<b>Fund Project Code :</b>	SSD-16/HSS10/SA2/WASH/NGO/3583		
<b>Cluster :</b>	Water, Sanitation and Hygiene (WASH)	<b>Project Budget in US\$ :</b>	100,000.07		
<b>Planned project duration :</b>	6 months	<b>Priority:</b>	4		
<b>Planned Start Date :</b>	01/10/2016	<b>Planned End Date :</b>	31/03/2017		
<b>Actual Start Date:</b>	01/10/2016	<b>Actual End Date:</b>	31/03/2017		
<b>Project Summary :</b>	<p>The “Emmergency prevention and control of WASH related disease outbreak among vulnerable amongst IDP, Returnees and Host population” aims at increasing access to safe water supply, sanitation and hygiene practice to locations which have been affected by conflict and at risk of waterborne diseases out breaks such as cholera. The 6 months, \$100,000 CHF funded project will be implemented in Magwi County Imatong State formally Eastern Equatoria between September 2016 and March 2017. The project shall undertake the following activities. 1. Rehabilitation of 20 hand pumps, 2. Distribution of WASH NFIs, 3. Train 40 community hygiene promoters, 4. Train 100 water management committee members and, 5. Conduct hygiene awareness campaigns. The project intends to benefit 15000 people majority of whom are women and children including malnourished children, pregnant and lactating mothers. This project comes at a time when Magwi county has not only experienced high displacements due to the conflict and the confirmation of the cholera outbreak. The situation is impact greatly on the already limited basic services in the locations. Therefore this project will address the needs of the most vulnerable women, men, boys and girls affected by the conflict, outbreaks and malnutrition.</p>				
<b>Direct beneficiaries :</b>					
	<b>Men</b>	<b>Women</b>	<b>Boys</b>	<b>Girls</b>	<b>Total</b>
	5,000	7,000	1,800	1,200	15,000
<b>Other Beneficiaries :</b>					
<b>Beneficiary name</b>	<b>Men</b>	<b>Women</b>	<b>Boys</b>	<b>Girls</b>	<b>Total</b>
Children under 5	0	0	200	100	300
Internally Displaced People	4,000	5,000	1,000	800	10,800
People in Host Communities	1,000	2,000	600	300	3,900
Pregnant and Lactating Women	0	0	0	0	0
<b>Indirect Beneficiaries :</b>					
The indirect beneficiaries 3000 men , 5000 women 1500 boys and 1000 girls					
<b>Catchment Population:</b>					
35000 people					
<b>Link with allocation strategy :</b>					

The HRP Strategy 2016 focuses on ensuring maximum synergies on the affected populations, ability for the partner to stay and deliver, engagement with affected communities as secure safe access. The WASH Strategy for this allocation highlights the need to ensure the capacity to address the complexity of the conflict and displacement trends with mobile capacity to match the demands of the current context especially the importance in having WASH EPnR teams who can respond and provide timely emergency response in gap areas including outbreaks like cholera. This project fits in the allocation strategy as it aim to address the life-threatening needs of the most vulnerable such as IDPs and host communities in conflict affected locations, where integrated food security phase classification (IPC) levels are crisis and emergency; and of those in cholera outbreak locations where life-threatening needs are greatest. IHO will ensure rapid respond by ensuring access to immediate life-saving aid in areas of minimal partner presence in Eastern Equatoria Specifically Magwi County. The project aims to rapidly cover basic WASH gaps prioritizing the provision of safe water through distributions of portable water treatment solutions such as purification sachets (PuR) and filter cloth (or Aquatabs, depending on source turbidity), and water containers for safe transportation and storage at household level. The project plans to reestablish available sources of safe water through the rehabilitation of broken boreholes. Gender balanced and community-led Water Management Committees will be established and members trained to ensure equity access and aid in mitigating any conflict over water usage. The missions will encourage, promote and provide training on good hygiene and sanitation practices tailored to the specific context and conditions of the affected community. In Cholera prevention and response interventions, hygiene promotion will focus on hot spot areas. Standard and validated hygiene promotion messages will be utilized to ensure alignment of overall cholera prevention communication.

IHO will also participate in needs assessments missions as prioritized by the WASH Cluster, providing sound assessment reports for the constitution of future IRNAs report. The monitoring and evaluation of missions will be shared lead into planning and prioritizing for all Agencies involved in emergency and mobile operations. IHO will implement critical WASH activities to reduce incidence of acute malnutrition and diarrhea amongst children under 5. In working closely with Education cluster IHO will ensure that learning spaces access WASH services through awareness, maintenance of WASH facilities. In partnership with the protection cluster, IHO will address protection related WASH concerns especially gender-based violence by ensuring access to WASH facilities have minimum safety and privacy requirements. The activities will be implemented in consultation with community representatives (leaders) as well as community participation in implementation of activities. Community will be involved in assessments, will work as volunteers and be part of planning and management committees. They will also provide feedback of the implementation of project activities.

**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
Mwanje Jolem	Emergency WASH Coordinator	jolem.mwanje@gmail.com	0928082382
Towongo Godfrey	WASH Officer	towongo.g@gmail.com	0955297078

**BACKGROUND**

**1. Humanitarian context analysis**

Since the re-emergence of conflict in December 2013, the republic of south sudan faces considerable humanitarian problems, The recent fighting in Central and Eastern Equatorial states have further aggravated the humanitarian situation, producing secondary or third displacement, with populations under stress lacking access to basic services. Humanitarian access has been constrained by the conflict. The Needs for this project have been assessed previous by IHO, Magwi County Focal Point information channels (RRC) situation reports. According to RRC, by 15 August 2016 a total of 34,018 people have been affected by the current conflict in the County Among the Payams affected most include magwi Payam, iwire Payam Obbo Payam Lobone Payam and Pajok Payam, Pageri and Nimule. The IDP settlements in the above locations has put unexpected pressure on services and communities residing in those areas. This situation have been aggravate by the recent declaration of cholera outbreak in Nimule and Pageri reported by Ministry of health and World Health Organization. The cholera outbreak coupled with the conflict has created a need for emergency water, sanitation and hygiene services among the populations of magwi county and its is critical if to avert the potential risk. It is against this background that access to safe water and sanitation improvements and awareness is critical to save thousands of lives of children and women. Lack of access to safe water coupled with lack of proper good hygiene practices leaves a large portion of the population at high risk of preventable water related diseases. Not only safe but sufficient quantities of water are critical for enabling good hygiene practices key to prevention of cholera and other water borne diseases, such as the hand-washing at critical moments. IHO will ensure that 15,000 women, men, girls and boys are consulted in the decision making affected have equal access to safe water supply, sanitation and hygiene services to prevent potential public health risk as a result of using unprotected water sources poor sanitation and hygiene practices.

The project will focus greatly on ensuring that existing non functional boreholes are repaired, household water treatment through distribution of water purification and treatment using various methods, reinforce with emergency targeted hygiene promotion and as well distribute emergency WASH/NFI i.e soap, buckets etc. To promote community participation and program governance. The project will train hygiene promoters segregated by gender, train water user committees and train school teachers and students leaders on School WASH activities.

**2. Needs assessment**

The recent assessment by Relief Rehabilitation Commission Magwi County, and IHO revealed that many people have been displaced to different locations around magwi County. These communities have limited access to services aggravated the already weakened structures before the crisis. As the conflict prolongs coupled by the cholera outbreak, the location demands require immediate WASH interventions of IHO. Inadequate WASH services in the county contribute not only to disease outbreak, but also to increased malnutrition. There is lack of improved sanitation and limited knowledge of hygiene practices specifically for those communities displaced by current conflicts and the host communities and to mitigate against negative WASH impact in Magwi County, WASH response team will focus on areas in the county that are underserved and hardly reached by WASH services. The lack of safe drinking water and poor hygiene practices leave a large portion of the population at persistent risk of preventable water-related diseases. The already confirmed cholera outbreak creates the need for quick intervention in the area through capacity building and WASH infrastructure development.

### **3. Description Of Beneficiaries**

The project intends to primarily reach a total of 15,000 women, men, girls and boys of all demographic groups, from all ethnicities and of all ages who have settled in areas in Magwi County without clean water and proper sanitation as well as hygiene practice. The project also focus to benefit greatly. The project will also benefit both IDPs and host communities as well population in cholera affected locations. IHO estimates that 7000 women, 3000 men, 1500 boys and 3500 girls will benefit from the project interventions. Specific consideration will on children under five years, pregnant and lactating mothers who at risk of malnutrition during crisis and elderly and people with disabilities have different physical abilities and their needs shall be considered greatly during the project planning and implementation. Consultations with beneficiaries shall be considered greatly as this will lead to community ownership and sustainability.

### **4. Grant Request Justification**

IHO has operated in South Sudan since 2014 and the response in Magwi County falls back in the same year. The ability to respond to emergency WASH needs roots on the 2015 Cholera Outbreak in Juba where IHO responded with hygiene promotion and distribution of WASH NFIs. In the Current July 2016 cholera Outbreak in Juba IHO responds through health and hygiene promotion, distribution of WASH NFIs and rehabilitation of water sources. This has proved IHO abilities to rapidly scale up and directly implement interventions as soon as resources become available. The lessons learned from the above projects serve as an important asset for implementation of this project. The presence of IHO field office in Magwi County offers an additional logistical advantage to preposition key materials and as a launch base for implementing this project. IHO is an active member of the WASH, Nutrition, health, education and Child protection cluster hence this project streamlines the priority needs of these clusters and there this funding will enable IHO WASH team meet the emergency needs of IDPs and host communities in Magwi County through gender mainstreaming and community involvement in all stages of WASH activities. Its reported that Magwi county has less WASH partners compared to other location in South Sudan and the recent cholera outbreak in the areas stress the need for emergency water through safe water sources and household water treatment and as well as hygiene promotion. Poor access to safe water poses a risk to women and girls whom in south sudan are known for daily household activities as they have to travel for long distances and late hours to access water. Therefore this project comes as a savior to women, girls and boys at risk of waterborne diseases and gender based violence.

### **5. Complementarity**

Given the limited WASH response in Magwi County the project will compliment, government and other partner efforts in responding to WASH needs including the cholera outbreak through rehabilitation of non-functional boreholes, hygiene promotion and support of households by distributing WASH NFIs. The project will also streamline the local structures through training community water committees, hygiene promoters and support the County WASH department in strengthening emergency response.

## **LOGICAL FRAMEWORK**

### **Overall project objective**

This project aims to increase access to water supply, improved sanitation and hygiene practices among emergency affected populations in Magwi County over the next 6 months period

## **WATER, SANITATION AND HYGIENE**

<b>Cluster objectives</b>	<b>Strategic Response Plan (SRP) objectives</b>	<b>Percentage of activities</b>
CO1: Affected populations have timely access to safe and sufficient quantity of water for drinking, domestic use and hygiene (SPHERE)	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	50
CO2: Affected populations are enabled to practice safe excreta disposal with dignity in a secure environment	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	10
CO3: Affected populations have knowledge and appropriate behaviors to prevent and mitigate WASH related diseases and practice good hygiene	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	40

**Contribution to Cluster/Sector Objectives :** The project has been developed based on the cluster objectives.

### **Outcome 1**

Emergency affected people have access to improved hygienic practices through hygiene promotion activities

#### **Output 1.1**

##### **Description**

2000 households provided with WASH emergency basic hygiene kits, 40 hygiene promoters trained in WASH Emergency activities and 20 hygiene awareness campaigns conducted

##### **Assumptions & Risks**

**Risks:**

The biggest risk factor is insecurity. Project implementation requires security and stability to access the project areas.

**Assumptions**

Access to locations, IDP sites is always dependent on security, community site leaders, IDP participation, government restrictions, military interventions, and security. Project activity completion is dependent on total access to locations by program staff.

It is assumed that seasonality will not impede project activities given that the location is accessible easily by road and the activities implemented are dependent on not being inhibited by rain and flooding.

WASH NFI materials will be access through Juba Level Core WASH pipeline for other project procurement will be done through Juba Office.

In case the materials are to be procured from neighboring countries there likelihood the supplies may delay to reach the location.

Community members are willing and participated in the awareness sessions

**Activities****Activity 1.1.1**

Conduct training of 40 hygiene promoters(Nimule Payam 20 people, 20 Magwi Payam) with 60% female and 40% male.

**Activity 1.1.2**

Conduct atleast one hygiene awareness campaigns in each location with emergency hygiene and sanitation needs

**Activity 1.1.3**

Mobilize, register and distribute basic hygiene items (i.e. soap and jerry cans) to 2000 beneficiaries in Magwi County.

**Indicators**

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	Frontline # of community based hygiene promoters trained	20	20			40
<b>Means of Verification</b> : Training reports attendance list Training photos							
Indicator 1.1.2	WATER, SANITATION AND HYGIENE	# of hygiene awareness campaigns/meetings conducted					20
<b>Means of Verification</b> : Attendance list Photos activity reports							
Indicator 1.1.3	WATER, SANITATION AND HYGIENE	# of households receiving a basic hygiene items					2,000
<b>Means of Verification</b> : Distribution list Photos Monitoring reports							
Indicator 1.1.4	WATER, SANITATION AND HYGIENE	Frontline # of emergency affected people equipped to practice good hygiene behaviors through participatory hygiene promotion	1,000	1,500	600	1,000	4,100

**Means of Verification** : Social mobilization and awareness session report

Photos showing the participated community during awareness session

**Outcome 2**

Emergency affected people have timely access to safe ,and sufficient quantities of water for drinking, cooking, and personal and domestic hygiene (15 L/p/day).

**Output 2.1****Description**

20 Boreholes rehabilitated in Magwi County

**Assumptions & Risks****Risks:**

The biggest risk factor is insecurity. Project implementation requires security and stability to access the project areas.

**Assumptions**

Access to locations, IDP sites is always dependent on security, community site leaders, IDP participation, government restrictions, military interventions, and security. Project activity completion is dependent on total access to locations by program staff.

It is assumed that seasonality will not impede project activities given that the location is accessible easily by road and the activities implemented are dependent on not being inhibited by rain and flooding.

WASH NFI materials will be access through Juba Level Core WASH pipeline for other project procurement will be done through Juba Office.

In case the materials are to be procured from neighboring countries there likelihood the supplies may delay to reach the location.

**Activities****Activity 2.1.1**

Identification and rapid rehabilitation of 20 Non-functional Boreholes with consideration of community participation.

**Activity 2.1.2**

Establishment and training of 100 (50 female and 50 male) basic Water Management Committees for the administration and caretaking of newly rehabilitated boreholes.

**Indicators**

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	WATER, SANITATION AND HYGIENE	Frontline # of water points/boreholes rehabilitated					20
<b>Means of Verification</b> : Water points rehabilitation report using the rehabilitation log Observation of rehabilitation stages before and after Handover document							
Indicator 2.1.2	WATER, SANITATION AND HYGIENE	Frontline # Number of emergency affected people with access to improved water sources	1,000	1,500	1,200	1,500	5,200
<b>Means of Verification</b> : Queuing time at water points is no more than 30 minutes Average water use for drinking and cooking at least 15 liters per day							
Indicator 2.1.3	WATER, SANITATION AND HYGIENE	# of Community members trained on management of water, sanitation and hygiene services.					100
<b>Means of Verification</b> : Participant attendant form Observation of Water management Committees exercising their roles Training photos and attendant list							
<b>Output 2.2</b>							
<b>Description</b>							
Improved quantity and quality of safe water accessible to target populations through the distribution of household portable water treatment items.							
<b>Assumptions &amp; Risks</b>							
Risks: The biggest risk factor is insecurity. Project implementation requires security and stability to access the project areas. Assumptions Access to locations, IDP sites is always dependent on security, community site leaders, IDP participation, government restrictions, military interventions, and security. Project activity completion is dependent on total access to locations by program staff. It is assumed that seasonality will not impede project activities given that the location is accessible easily by road and the activities implemented are dependent on not being inhibited by rain and flooding. WASH NFI materials will be access through Juba Level Core WASH pipeline for other project procurement will be done through Juba Office. In case the materials are to be procured from neighboring countries there likelihood the supplies may delay to reach the location.							
<b>Activities</b>							
<b>Activity 2.2.1</b>							
Distributions of Water treatment households items (PUR and Aqua tabs) benefiting 6000 people							
<b>Activity 2.2.2</b>							
Conduct 1200 sensitization household sessions on Point of Use (PoU) water treatment options (PuR sachets and aquatabs) for 6000 people							
<b>Activity 2.2.3</b>							
Regular reporting by Emergency WASH coordinator to Donor and Cluster by submitting monthly,quarterly and final reports or as required							
<b>Indicators</b>							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.2.1	WATER, SANITATION AND HYGIENE	# of Community members receiving education on use of PuR sachets /aquatabs					6,000
<b>Means of Verification</b> : Attendance forms Observation of households visited that have received and use distributed supplies session reports supported by photos							
Indicator 2.2.2	WATER, SANITATION AND HYGIENE	Core Pipeline # of water treatment products distributed					6,000
<b>Means of Verification</b> : Registration and distribution signed form Observation of households visited that have received and use distributed supplies Distribution reports supported by photos							
<b>Additional Targets :</b>							
<b>M &amp; R</b>							
<b>Monitoring &amp; Reporting plan</b>							

The WASH team will undertake the monitoring and reporting progress and achievements of the project activities. The hygiene promoters will compile daily reports and share to hygiene supervisor. The hygiene superior will consolidate the data, and share with the WASH officer. The WASH technician and WASH Officer will be responsible for compiling the activity report reports and other field reports and send to the Emergency WASH Coordinator coordinator will be responsible for submitting the monthly, quarterly and final report to the cluster using the format developed by the cluster as well the donor. The reports will show progress focusing on the number of people reached, by sex, age and location. Emergency WASH Coordinator will conduct joint field together with the WASH team on quarterly basis and they will use FGD Guides tool, Observation check list, Key informant Interview Guide as well as questionnaires. IHO and CHF Monitoring team will conduct joint monitoring field visit to the project sites after the completion and submission of final report preferably April 2016 establish the impact of the project. To ensure proper Monitoring and reporting of the project finances, the Emergency WASH Coordinator, WASH Technician and WASH Officers shall be in charge of project finances spending and will report to the organization Finance and Administration Officer. The Finance and Administration Officer will track budget lines and ensure all activities funded are accounted for using the laid down financial regulations. The finance Officer will compile financial reports, which will be shared with the donor.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Conduct training of 40 hygiene promoters(Nimule Payam 20 people, 20 Magwi Payam) with 60% female and 40% male.	2016										X	X	
	2017												
Activity 1.1.2: Conduct atleast one hygiene awareness campaigns in each location with emergency hygiene and sanitation needs	2016										X	X	X
	2017	X	X	X									
Activity 1.1.3: Mobilize, register and distribute basic hygiene items (i.e. soap and jerry cans) to 2000 beneficiaries in Magwi County.	2016											X	X
	2017	X	X	X									
Activity 2.1.1: Identification and rapid rehabilitation of 20 Non-functional Boreholes with consideration of community participation.	2016											X	X
	2017	X	X										
Activity 2.1.2: Establishment and training of 100 (50 female and 50 male) basic Water Management Committees for the administration and caretaking of newly rehabilitated boreholes.	2016											X	X
	2017	X	X										
Activity 2.2.1: Distributions of Water treatment households items (PUR and Aqua tabs) benefiting 6000 people	2016											X	X
	2017	X	X	X									
Activity 2.2.2: Conduct 1200 sensitization household sessions on Point of Use (PoU) water treatment options (PuR sachets and aquatabs) for 6000 people	2016											X	X
	2017	X	X	X									
Activity 2.2.3: Regular reporting by Emergency WASH coordinator to Donor and Cluster by submitting monthly, quarterly and final reports or as required	2016										X	X	X
	2017	X	X	X									

#### OTHER INFO

##### Accountability to Affected Populations

As a proponent of the Humanitarian Accountability Project, accountability to affected people is underlies every facet of humanitarian assistance. The project shall use community based approaches at all steps from targeting, to engagement on design and implementation to accountability and monitoring.

IHO will promotes WASH and other social service within the affected populations by conducting stakeholders meetings that involves community leader (chiefs, IDP leaders, etc) and partners to address issues related to service delivery and accountability.

To ensure that the project address the true WASH needs of the affected population IHO will conduct consultation meeting with the beneficiaries, as well as ensure that community is part and partial of the project implementation team. This aim shall be fulfilled in way that most of the project staff shall be people who understand the local culture and operational environment. We shall also ensure the local beneficiary community take control of the completed project outputs such as rehabilitated boreholes will be handed over to community as well as train members on maintenance.

Participatory monitoring and evaluation will also promoted accountability to the local population where key informants and surveys will provide a ground for the beneficiaries to evaluate the impact of the project and source recommendations for improvement.

##### Implementation Plan

The project is the result a result the humanitarian response plan, specially this projects follows within the WASH Cluster priorities, therefore through the project implementation IHO will work closely with the WASH and Other relevant clusters. In the same regard, IHO will work closely with other relevant WASH partners by strengthening the coordination mechanism with government and other relevant partners. The community capacity will be strengthen at process of the project implementation by ensuring community members participate in the planning, delivery and sustainability of the activities. IHO WASH team will oversee the overall of this project implementation and coordination by directly implementing the activities, attend cluster meetings and activities, hold stakeholder meeting, training, supervision and documenting success stories and lessons learnt.

##### Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
American Refugee Council	Rehabilitation of boreholes and hygiene promotion

**Environment Marker Of The Project**

A+: Neutral Impact on environment with mitigation or enhancement

**Gender Marker Of The Project**

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

**Justify Chosen Gender Marker Code**

Understanding that women, men, boys, and girls are affected differently by disasters and displacement is a key in promoting gender equality. Among the ways IHO under takes to promote gender includes holding a series of key informant interviews, focus group discussions (FGDs) with the intervention communities. The result is a strategy that incorporates the view, opinions and needs of all men, women, boys and girls and seeks to address existing gaps. It is through this process that IHO identifies the WASH priorities for both men and women in terms of needs. At all stages in programme planning and design, gender mainstreaming is a key priority. IHO aims to improve the well being of women, girls, boys and men through prevention and control of WASH related disease. Although IHO targets both men and women equally, the latter are the largest service user group. The programme design takes into account the very specific needs of women and children in South Sudan. Training programmes will involve both men and women.

**Protection Mainstreaming**

The project will aim at integrating protection activities in WASH programme and understanding and monitoring beneficiaries' experience and perception of safety and security shall influence the ways in which the activities will be implemented. IHO has and will continue to consult with the communities (men, women, boys, girls, youth, elderly) we work with to identify the particular needs of the affected communities throughout all phases of programming (assessment, implementation, monitoring, and evaluation). As evidenced throughout the proposal, needs of women, men, boys, girls, elderly, and persons with disabilities or special needs have been explicitly incorporated, including the need for continued consultation. Among other issues IHO will incorporate HIV/AIDS education sessions in all its activities targeting staff and beneficiaries. IHO will continue promote equal participation of women, boys, girls and men in the management of WASH activities and will coordinate with other sectors like protection cluster to address WASH gender related issues.

**Country Specific Information****Safety and Security**

The project is going to be implemented in Magwi County where IHO has operational presence. The security situation in the area, remains calm in some locations but with some tension some payams of the county. However, this does not threaten the security and safety of our staff. IHO is cooperating with both the opposition and the government respectively to determine the safe staff movements in the area. IHO puts life of its staff on the front agenda and will ensure that every staff is brief about the situation and in case of intense insecurity the staff will be evacuated.

**Access**

Magwi County accessible by road both during dry and wet seasons. The presence of the field office in Magwi Town makes logistical preparation and operation easy.

**BUDGET**

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
1.1	Emergency WASH Coordinator	D	1	2,500.00	6	80.00	12,000.00
	<i>The Emergency WASH Coordinator will spend 80% of the time supporting the project</i>						
1.2	WASH Technician	D	1	1,500.00	6	100.00	9,000.00
	<i>The WASH Technician will spend 100% of the time supporting this project</i>						
1.3	Wash Officer	D	1	1,300.00	6	100.00	7,800.00
	<i>The WASH Officer will spend 100% of the time supporting this project</i>						
1.4	Hygiene Field supervisor	D	1	700.00	6	100.00	4,200.00
	<i>The Hygiene Field supervisor will spend 100% of the time supporting this project</i>						
1.5	Hygiene Promoters	S	40	50.00	6	100.00	12,000.00
	<i>The Hygiene Promoters will spend 100% of the time supporting this project</i>						
1.6	Fiance and Admin Manager	S	1	1,500.00	6	50.00	4,500.00
	<i>The Fiance and Admin Manager will spend 50% of the time supporting this project</i>						
1.7	Procurement/Logistic Officer	S	1	1,000.00	6	50.00	3,000.00

	<i>The Procurement/Logistic Officer will spend 50% of the time supporting this project</i>						
	<b>Section Total</b>						<b>52,500.00</b>
<b>Supplies, Commodities, Materials</b>							
2.1	Repair/Rehabilitation of boreholes	D	20	700.00	1	100.00	14,000.00
	<i>20 boreholes will rehabilitated @\$700 each, the fee will cover Materials as well as social mobilization</i>						
2.2	Water management committes trainings	D	20	300.00	1	100.00	6,000.00
	<i>20 training sessions each consisting of 20 people will be conducted for the 20 boreholes rehabilitated and the training fee lunch and refreshments and materials</i>						
2.3	Training of hygiene promoters	D	2	950.00	1	100.00	1,900.00
	<i>40 hygiene promoters in two sessions @ \$950 per session of 3 days the cost will cover Training materials, transport refund, meals, hall and refreshments</i>						
2.4	Hygiene promotion mobilization for campaigns and ssessions	D	20	200.00	1	100.00	4,000.00
	<i>Each campaign will conducted at cost of \$200, focusing emergence water treatment, sanitation and hygiene as well diarrhea disease prevention</i>						
2.5	Car hire for field transport and Truck for logistics movement	D	1	6,000.00	1	100.00	6,000.00
	<i>Car hire to support field activities for 40 days @\$100=\$4000 and Truck hire for 2 trips (WASH Supplies) @1000=\$2000 total transport cost =\$6000</i>						
2.6	Project visibility	D	1	3,400.00	1	100.00	3,400.00
	<i>20 sign posts @\$100=\$2000 to placed next to the rehabilitated boreholes, Aprons for Hygiene promoters 45 pieces @\$20=\$900, Banners 5 @ \$100=500, Total visibility cost =\$3400</i>						
	<b>Section Total</b>						<b>35,300.00</b>
<b>Equipment</b>							
3.1	Laptops	D	2	500.00	1	100.00	1,000.00
	<i>The laptops will for the WASH officer and WASH Technician 2 laptops @500</i>						
3.2	Camera	D	1	300.00	1	100.00	300.00
	<i>The Camera will be used by the WASH team for reporting project activities</i>						
	<b>Section Total</b>						<b>1,300.00</b>
<b>Travel</b>							
5.1	Juba Staff field visit Perdiem	D	60	10.00	1	100.00	600.00
	<i>Juba staff will travel in the field 60 days in the course and each field day @\$10</i>						
5.2	Juba based Field Accomodation	D	60	20.00	1	100.00	1,200.00
	<i>Juba Staff will be accommodated in the field for 60 days @\$25</i>						
	<b>Section Total</b>						<b>1,800.00</b>
<b>General Operating and Other Direct Costs</b>							
7.1	Rent Juba Office	S	1	1,000.00	6	20.00	1,200.00
	<i>IHO pays \$1000 per month for Juba office rent and CHF will be charged 20% of \$1000 =\$200 per month</i>						
7.2	Juba office internet	S	1	450.00	6	50.00	1,350.00
	<i>IHO pays \$450per month on Internet and CHF will be charged 50% of \$450 =\$225 per month</i>						
7.3	Rent Field office	S	1	350.00	6	50.00	1,050.00

	<i>IHO pays \$350 per month on Magwi office rent and CHF will be charged 50% of \$350=\$175</i>						
7.4	Office supplies	S	1	100.0	6	47.80	286.80
	<i>CHF will be charged 56.4% of \$100 spent on supplies =\$56.4 per month.</i>						
	<b>Section Total</b>						<b>3,886.80</b>
<b>SubTotal</b>			237.00				<b>94,786.80</b>
Direct							71,400.00
Support							23,386.80
<b>PSC Cost</b>							
PSC Cost Percent							5.50
PSC Amount							5,213.27
<b>Total Cost</b>							<b>100,000.07</b>
<b>Grand Total CHF Cost</b>							<b>100,000.07</b>

#### Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Eastern Equatoria -> Magwi	100	5,000	7,000	1,800	1,200	15,000	Activity 1.1.1 : Conduct training of 40 hygiene promoters(Nimule Payam 20 people, 20 Magwi Payam) with 60% female and 40% male. Activity 1.1.2 : Conduct atleast one hygiene awareness campaigns in each location with emergency hygiene and sanitation needs Activity 1.1.3 : Mobilize, register and distribute basic hygiene items (i.e. soap and jerry cans) to 2000 beneficiaries in Magwi County. Activity 2.1.1 : Identification and rapid rehabilitation of 20 Non-functional Boreholes with consideration of community participation. Activity 2.1.2 : Establishment and training of 100 (50 female and 50 male) basic Water Management Committees for the administration and caretaking of newly rehabilitated boreholes. Activity 2.2.1 : Distributions of Water treatment households items (PUR and Aqua tabs) benefiting 6000 people Activity 2.2.2 : Conduct 1200 sensitization household sessions on Point of Use (PoU) water treatment options (PuR sachets and aquatabs) for 6000 people

#### Documents

Category Name	Document Description
Project Supporting Documents	IHO Rapid Assessment for IDPs in Magwi Payam-Magwi County-Imatong State.pdf
Project Supporting Documents	RRC Figure report on the IDPs situation in Magwi Corridor.doc