

Requesting Organization :	Community in Need Aid				
Allocation Type :	1st Round Standard Allocation				
Primary Cluster	Sub Cluster	Percentage			
PROTECTION	Child Protection in Emergencies	100.00			
		100			
Project Title :	Access to quality Family Tracing and Reunification and Psychosocial Support Response Services to IDP children in Awerial County				
Allocation Type Category :					
OPS Details					
Project Code :	SSD-16/P-HR-RL/89790	Fund Project Code :	SSD-16/HSS10/SA1/P/NGO/824		
Cluster :	Protection	Project Budget in US\$:	160,018.50		
Planned project duration :	6 months	Priority:	1		
Planned Start Date :	01/02/2016	Planned End Date :	31/07/2016		
Actual Start Date:	01/02/2016	Actual End Date:	31/07/2016		
Project Summary :	<p>Project Objective: To increase access to quality family tracing and reunification and psychosocial support services for conflict affected children.</p> <p>Proposed Activities:</p> <p>Output 1.1: Identified and registered separated/unaccompanied and missing children (UASC) reunited and supported with their parents/primary caregivers and further separation reduced.</p> <p>Activity 1.1.1: Initiate registration and tracing and provide appropriate family reunification services for 40 UASC (20 boys, 20 girls) identified.</p> <p>Activity 1.1.2: Provide regular monitoring for project activities to CP/FTR caseworkers, CB CPNs and caregivers on weekly and monthly bases.</p> <p>Output 1.2: Intensive follow up services for registered UASC accelerated and family reunion is enhanced.</p> <p>Activity 1.2.1. Increase follow up care to 40 registered UASC (20 boys, 20 girls) and report appropriately services provided through temporary care monitoring form on a weekly/monthly basis.</p> <p>Output 1.3: Appropriate family-based alternative care arrangements are initiated and children without parental care are supported.</p> <p>Activity 1.3.1. Provide comprehensive family-based interim care to 20 children (10 boys, 10 girls) identified as without parental care.</p> <p>Output 2.1. Quality PSS services provided mainly through community-based and non-community-based PSS (CFS) prevention and response services, by supporting and working with caregivers and community based child protection network;</p> <p>Activity 2.1.1. Provide PSS services to 700 children (350 boys, 350 girls) through community based PSS activities in church, FDGs, community centres, peer-to-peer outreach, etc.</p> <p>Activity 2.1.2. Provide PSS services to 300 children (150 boys, 150 girls) through non-community based PSS activities in the CFS, schools, etc.</p> <p>Activity 2.1.3. Support and work with 10 kinship families (10 women), 20 community based child protection mechanisms (10 men, 10 women) and 50 caregivers (40 women, 10 men) to provide protection, psychosocial support and care to children without parental care.</p> <p>Outcomes/expected results:</p> <ol style="list-style-type: none"> 1. UASC registered reunited with their families and followed up regularly. 2. UASC without parental care receive services in appropriate family-based care. 3. Distressed and other conflict affected children cope with threats and vulnerabilities. 				
Direct beneficiaries :					
	Men	Women	Boys	Girls	Total
	20	60	530	530	1,140
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
Internally Displaced People	0	0	530	530	1,060
Trainers, Promoters, Caretakers, committee members, etc.	20	60	0	0	80
Indirect Beneficiaries :					

Catchment Population:**Link with allocation strategy :**

This project will contribute to the second protection cluster objective:

CO2: Quality protection response services are available and can be accessed safely and freely.

CINA interventions will focus mainly on provision of rapid life-saving family tracing and reunification (FTR) services for separated/unaccompanied and missing children (UASC and psychosocial support component (Mainly community based PSS):

CINA will double efforts in scaling up reunification and monitoring of the new UASC identified and documented through its existing FTR capacity. Active case management will be ensured through maximizing follow up actions after referral of UASC to other services. CINA will establish appropriate family-based care arrangements for UASC without adult caregivers where identified UASC can be temporarily fostered under kinship care which is contextually the best applicable type of alternative care, awaiting family reunification. CINA will also ensure that, where separated children may already be attached to families or individuals, these situations will be thoroughly reviewed to ensure that the child is in a safe environment which will afford him/her with appropriate care and opportunities. CINA will also support and work with caregivers and community child protection network to provide community based PSS and non-community based PSS services to the conflict affected children. . This project aims at scaling up the FTR and PSS work CINA has been providing to IDP children in Mingkaman and its surrounding IDP sites in Awerial County as well as responding to the growing protection needs of IDP children given the new influx of IDPs in Mingkaman in from December 2015, in addition to the pre-existing IDPs. For 2016 HRP, Awerial (Mingkaman) is a Tier 1 location for Protection Cluster and in this dry season opportunity, efforts will be made to meet the desperate Child Protection needs of IDPs in close collaboration and coordination with Protection Cluster and especially Child Protection Sub-cluster (CPSC) at both national and state level CPWG and other sectors to mainstream child protection in other services and programmes, including access to referral services, for all children including children living with disabilities, children living with HIV/AIDS, children living and working on the streets and survivors of sexual and gender based violence, abduction and armed recruitment (ex-CAAFAG). This 2016 CHF SA1 funding will complement CINA's CP activities (through scaling up FTR and PSS) in Mingkaman being supported by UNICEF (2015 PCA) aiming to reach 3000 conflict affected children by end of March 2016 and the 1140 direct beneficiaries will be involved in implementation of project activities through establishment of appropriate beneficiary feedback mechanisms to enhance clear transparency and accountability to children, their caregivers and community members.

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 :

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Dr. Daniel Machuor Arok	Executive Director	machuorcina@gmail.com	+ 211 955 413 184
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BACKGROUND**1. Humanitarian context analysis**

The crisis in South Sudan greatly hit Jonglei (Bor) among other states, including the neighboring Lakes State (Awerial County) to where big population from Bor, Twic East and Duk has been displaced since early February 2014. Many former IDPs and refugees are returning to their places of origin given a relative peace being witnessed in January 2014 to present in the two states. However, the humanitarian situation of IDP and conflict-affected populations has been deteriorating as a result of fear from continuous attacks, inadequacy of basic services in IDP sites and PoCs and increased protection threats which have continued to cause increased mobility of families to safe locations within the country and across the region. There are currently 78,307 IDPs in Awerial County Lakes States (UNOCHA: South Sudan Crisis IDP monitor 01/10/2015). Again, another 29,656 individuals displaced by fresh attacks in Jalle (Bor) and Mar Payams (Twic East) arrived Mingkaman (Mingkaman IRNA: December 04, 2015). This increased mobility has resulted to further separation of children from families, difficulty in tracing, follow up and reunification of separated and/or unaccompanied minors; increased tensions of psychosocial distress, especially among the adolescents, being aggravated by absence of schools; increased tendency of adolescent boys to be used by armed forces and armed groups; increased food insecurity and poor livelihood condition resulting into children living and working on the streets, forced child marriage and increased child exploitation and worse forms of child labour. Protection response in 2015 show more needs and significant gaps that include: Out of 21,140 children at risk of family separation, 483 separated/unaccompanied children have received FTR case management services with only reunification less than 70%, being in part due to widespread population movements, inaccessibility to location such as Duk and Twic East where parents missing children could be traced; Of 31,282 children are at risk of psychosocial distress, 9500 children have received individual psychosocial support services release; 310 boys are at risk of armed recruitment and of those 20 CAAFAG have received social reintegration assistance services; yet 13608 more children are at risk of dangers and injuries due to land mines/ERWs that need to be reached in schools/community by close work with Education and Mine Action partners; 13608 children at risk of physical violence and other harmful practices and 10100 children at risk of sexual violence and exploitation. (CINA W matrix Report to CPSC: October 28, 2015). This project will address the above critical needs through accelerating provision of FTR services through tracing and closing the current caseload up to 100% follow ups and reunifications and/or family based care as well as managing new cases of UASC to be identified in 2016 through improved quality of registration, maintenance of database locally and improved coordination of data nationally to strengthen FTR case management services; effective community based psychosocial support services (main approach) by working with caregivers, community based mechanisms and adolescents clubs as well as non-community based PSS services through CFS activities. This project will be coordinated at national level with PC, CPSC, FTR WG, PSS WG, and at state level with CPWG and local authorities to explore synergies, ensure quality and accountability to beneficiaries and adherence to minimum relevant policy standards.

2. Needs assessment

In Awerial, IRNAs (protection needs assessments) and regular protection response show that more boys, (aged 8-11 and 12-17 years) were separated/unaccompanied/missing compared to girls of the same age. However, girls (especially aged 7-11, and 12-17 years) have experienced violence, including sexual and gender based violence and exploitation. CINA's response in Awerial county in 2015 show that out of 197 UASC registered, only 45 UASC have been reunited with their families, 90 received follow up services and 40 UASC received other FTR case management services. These achievements are far below the active FTR case management services expected. Furthermore, the continuous IDP influx is expected to cause more family separation and thus the increased FTR needs will outstretch the existing resources for the currently ongoing project. In PSS response, CINA reached its target (Target: 3400 children; Reached 8682 children). Despite these achievements, more IDP influx has created additional PSS needs, coupled with the fact that partners (SCI) have pulled out from Mingkaman, leaving CINA with the challenge to meet those growing CP needs in Awerial County. IRNA assessment has been carried out in Mingkaman on December 04, 2015 where CINA participated and the reports show eminent protection needs of children which prompted CINA to expedite CPIE response in Mingkaman last December. The target numbers of current beneficiaries were developed in December 2015 when CINA, with UNICEF support and guidance from CPSC considered the prevailing CP needs of IDP children in Awerial County.

3. Description Of Beneficiaries

The direct beneficiaries of this project will include IDP, returnees and conflicted affected children and adolescents in Awerial County including 1060 children (530 boys, 530 girls); 50 caregivers (40 women, 10 men) and 20 community based child protection networks, 10 foster/kinship parents. The beneficiaries are targeted based on their protection risks and threats as identified through needs assessment from location hosting large numbers of IDPs, where services are overstrained. Boys and girls will be targeted based on individual child and group's protection concerns especially the separated and unaccompanied minors and missing children. Adolescents (12-17 years) will be more targeted especially for psychosocial support and be also involved in all activities. This project will also ensure continuous support of caregivers and CB-CPNs to provide care, protection and PSS care services in their communities. The caregivers and CP-CPNs have been selected on the basis of personal willingness to voluntarily support vulnerable children within their communities. Working with caregivers (parents, relatives and foster parents) and CB-CPN network is critical in ensuring community based care, preserving and strengthening local structures and systems, in the context of providing services in such a complex displacement pattern in South Sudan. Community members (parents, church leaders, teachers, youth representatives, etc.) that have been identified with the help of local authorities (chiefs, village heads, payam administrators) and trained will be continuously supported by CINA on issues of child protection in emergency, identification of separated/unaccompanied child and working with UASC children, as well as prevention of family separation to strengthen their skills to provide appropriate PSS care and FTR services to children.

4. Grant Request Justification

The violence which broke out in South Sudan capital Juba on December 16, 2013 and quickly spread to Bor, Duk and Twic East resulting into huge displacements in Awerial County of Lakes States has exacerbated family stresses, disrupted normal patterns of living and crumbled social support systems exposing children to protection threats including widespread separation of families. Children have been forced to flee all that is familiar to them and have experienced violence, fear and loss.

Without appropriate care and family-based support, these children will be forced to process their conflict experience alone, which may prevent them from being able to fully engage in daily activities such as playing, learning, or basic social interaction. Conflict affected and displaced children have been exposed to physical threats as well. Without protection and support their physical survival is threatened, and their status puts them at high risk of abuse, exploitation, forced labor, abduction, or recruitment into armed forces. The interventions proposed in this project will focus on increasing access to quality family tracing and reunification and psychosocial support services for conflict affected children; thus contributing to the cluster priority of ensuring quality protection response services are available and can be accessed safely and freely. Given the numerous threats to the survival and well being of conflict affected and displaced children this project seeks to increase access to age appropriate, effective, multi-sectoral FTR and PSS responses in the priority county.

The proposed interventions in this project are aimed at increasing rate and improve quality of family reunion for separated/unaccompanied and psychosocial support for conflict affected children in Awerial, Lakes State. This project will focus on critical activities related to Objective 2 of the Protection Cluster. Given the seriousness of the protection threats faced by children affected by conflict and displacement, the child protection interventions proposed under this project are one of the frontline services that are critical to the physical and psychosocial survival of conflict affected and displaced children in Awerial County. CINA has been implementing Child Protection Programs in Awerial County since January 2015 among other locations (Bor, Twic East and Duk in Jonglei) and has made a clear institutional commitment to providing quality programs that support children's well-being in emergencies and crises, and the agency continues to invest in highly skilled staff who have the knowledge and skills to ensure optimal Child Protection in emergencies. The agency has a strong established presence in Mingkaman and will be able to rapidly mobilize resources at the start of the project. CINA is committed to securing additional funds, especially from UNICEF to supplement the CHF funding and is in discussions with other partners in this regard. CINA has a secured funding from UNICEF that is running up to March 2016, but even if extended, it will be directed to meet other CP needs including CAAFAG response, sexual and GBV, access to justice for children, etc. in Tier 2 locations of CINA (Bor, Twic East and Duk of Jonglei State and populations living on those surrounding islands. CINA has demonstrated success in previous CHF funded project (with thematic areas of FTR, PSS, CAAFAG, Child protection monitoring mechanisms, prevention of violence, etc.) in Jonglei.

5. Complementarity

In line with 2016 HRP, CINA will continue to respond to the protection needs of UASC and PSS distressed children with UNICEF support that will be complemented by CHF funding. CINA's 2015 CP response with UNICEF support in Mingkaman show that there are significant gaps that exist in the areas of follow up and reunification of separated/unaccompanied children, including individual and group case management, as well as referral mechanisms and child protection mainstreaming. In line with 2016 HRP and priorities for CHF SA1 2016, and protection Cluster Strategic Plan, the CHF SA1 grant will help in complementing the current gaps in FTR and PSS needs of conflict affected children so far highlighted. More emphasis will be directed towards working with caregivers and community based mechanisms, and caseworkers, enabling their capacity to increase rates of tracing, follow ups and reunifications of previously registered and new UASC and missing children and continue to support caregivers in providing family-based care and psychosocial support for children without parental care. The CHF complementary grant will be an ideal support grant to quickly accelerate the FTR work in the dry season of 2016 (February to July) with aim to bring reunification and follow up rates to 100% of all documented UASC cases and other new cases in the RapidFTR database by July 31, 2016 as well as enhancing coping mechanisms for distressed children through provision of improved community based PSS and non-community based PSS services. UNICEF funding ends in March 2016, but even if extended, it will be directed to meet other CP needs including CAAFAG response, sexual and GBV, access to justice for children, etc., in Tier 2 locations of CINA (Bor, Twic East and Duk0 of Jonglei State and populations living on those surrounding islands. CINA has demonstrated success in previous CHF funded project (with thematic areas of FTR, PSS, CAAFAG, Child protection monitoring mechanisms, prevention of violence, etc.) in Jonglei.

LOGICAL FRAMEWORK

Overall project objective

To increase access to quality family tracing and reunification and psychosocial support services for conflict affected children

PROTECTION

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
CO2: Quality protection response services are available and can be accessed safely and freely	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	100

Contribution to Cluster/Sector Objectives : As a contribution to above protection cluster objectives, CINA will triple its efforts to scaling up reunification and monitoring of the new and previously documented UASC through its existing FTR capacity as well as enhancing delivery of quality PSS services to the conflict affected children . The current CRP show that more cases of separation that continue to happen are voluntary as a result of high population movement to locations with accessible basic services. CINA will also establish appropriate alternative care arrangements for UASC without adult caregivers where identified UASC can be temporarily fostered, awaiting family reunification. CINA will ensure where separated children may already be attached to families or individuals, these situations will be thoroughly reviewed to ensure that the child is in a safe environment which will afford him/her with appropriate care and opportunities. CINA will ensure quality of FTR data, reporting and enhanced case management through strengthening staff capacity in the use of RapidFTR/CPIMS system as well as supporting the caregivers and CB CPNs to gain necessary skills for working with UASC and providing community based PSS and also non-community based PSS services in their locations.

Outcome 1

Registered UASC are reunited with their families and regular follow-up leads to a reduced rate of separation

Output 1.1

Description

UASC who are identified, registered and have a family tracing service provided

Assumptions & Risks

Continuous displacement as a result of conflict increase rate of families separation

Risks:

1. Infrastructure problems i.e. roads and telecoms.
2. Capacity i.e. national staff may not have training or be able to move easily. Or hiring international staff may leave a partner vulnerable to high turnover rates when such staff are turned off by harsh living conditions.
3. Insecurity.
4. Unpredictable government restrictions (i.e. on where you can go, who you can hire)
5. Culture and society (i.e. sometimes the beneficiaries don't like being monitored or may speak another language).
6. Priorities i.e. partners may face pressure from the donor to get stuff out there in a short time so standards might slip).

Activities

Activity 1.1.1

Initiate registration and tracing and provide family reunification services for 40 UASC (20 boys, 20 girls) identified

Activity 1.1.2

Provide regular monitoring for project activities to CP/FTR caseworkers, CB CPNs and caregivers on weekly and monthly bases

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	PROTECTION	Frontline services # of UASC reunited with their parents or primary caregivers, or placed in alternative care			20	20	40

Means of Verification : RapidFTR database registration and reunification updates.

- Registration and Tracing Action Forms.
- Photos of UASC identified.
- Weekly/Monthly reports.
- Monitoring reports.
- Baseline data: 197UASC cases managed in the 2015.

Indicator 1.1.2	PROTECTION	Frontline services # of UASC and missing children registered			20	20	40
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Means of Verification : Registration forms.

- RapidFTR database updates
- Weekly/monthly reports.
- Monitoring Reports.
- Baseline data: Over 197 UASC registered in CHF Supported project 2015

Indicator 1.1.3	PROTECTION	Frontline services # of UASC and missing children for whom active family-tracing is initiated			20	20	40
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Means of Verification : Tracing action forms.

- RapidFTR database updates.
- Weekly/monthly reports.
- Monitoring Reports.
- Baseline: 100 UASC traced for CHF project 2015

Output 1.2

Description

UASC reunited with their family who receive follow-up visits.

Assumptions & Risks

Widespread population movement makes follow up difficult.

Risks:

- 1.. Infrastructure problems i.e. roads and telecoms.
2. Capacity i.e. national staff may not have training or be able to move easily. Or hiring international staff may leave a partner vulnerable to high turnover rates when such staffs are turned off by harsh living conditions.
3. Insecurity.
4. Unpredictable government restrictions (i.e. on where you can go, who you can hire)
5. Culture and society (i.e. sometimes the beneficiaries don't like being monitored or may speak another language).
6. Priorities i.e. partners may face pressure from the donor to get stuff out there in a short time so standards might slip).

Mitigation:

1. The project will be implemented in dry season to avoid challenges of inaccessibility due to bad roads
2. Improve staff motivation through other funding (UNICEF) to ensure staff retention during critical period of implementation

Activities

Activity 1.2.1

Increase follow up care to 40 UASC registered (20 boys, 20 girls) and report appropriately services provided through temporary care monitoring form on a weekly/monthly basis.

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	PROTECTION	Frontline services # of UASC cases who receive follow-up visits			20	20	40
<p>Means of Verification : RapidFTR database</p> <ul style="list-style-type: none"> -CINA weekly reports -Temporary Monitoring Forms completed for children under alternative family-based care -CINA weekly reports -Monthly/quarterly narrative reports -Monitoring Reports -Baseline: 80 UASC cases followed up Jan-December 2015 							
Outcome 2							
UASC without parental care are in appropriate family-based care and multisectoral referral services support comprehensive social reintegration into their communities.							
Output 2.1							
Description							
Children without parents who receive family-based alternative care and support							
Assumptions & Risks							
<p>Community and family ties still hold and most relatives will be ready to take appropriate care of UASC left to their responsibility</p> <ul style="list-style-type: none"> -Most actors are not always willing to mainstream CP in their activities <p>Risks:</p> <ol style="list-style-type: none"> 1. Infrastructure problems i.e. roads and telecoms. 2. Insecurity. 3. Unpredictable government restrictions (i.e. on where you can go, who you can hire) 4. Culture and society (i.e. sometimes the beneficiaries don't like being monitored or may speak another language). <p>Mitigation:</p> <ol style="list-style-type: none"> 1. Plan mobile response team to carry out rapid response missions to where populations move abruptly. 2. Preparedness in place to move to new locations as government may decide 							
Activities							
Activity 2.1.1							
Continue to support and work with 10 kinship families (10 women), 20 community based child protection mechanisms (10 men, 10 women) and 50 caregivers (40 women, 10 men) on protection and provision of care to children without parental care							
Activity 2.1.2							
Provide comprehensive family-based care to 20 children (10 boys, 10girls) identified as without parental care through critical child protection referral services (including safety, food, medication, water, shelter/NFI, education, psychosocial support, etc.) available within the community mapped through various thematic groups and in line with policy on children without parental care-South Sudan 2015 and Minimum Standards for Child Protection in Humanitarian Action							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	PROTECTION	Frontline services # of UASC in interim care, including family-based care			10	10	20
<p>Means of Verification : 5 w matrix reports</p> <ul style="list-style-type: none"> -CINA weekly reports -Photos of unaccompanied minors with their caregivers -Monthly/quarterly narrative reports -Monitoring Reports -Baseline data: 26 children are already in family based care support by CINA in Mingkaman 							
Outcome 3							
Conflict affected children cope with threats and vulnerabilities through appropriate community based-PSS and non-community based PSS services							
Output 3.1							
Description							
Conflict affected children who received community based psychosocial support and non-community based services with support from caregivers/CB-CPNs and community members							
Assumptions & Risks							

1. Community and family ties still hold and most relatives/community members will be ready to provide appropriate PSS services to children in their community.
2. Community based PSS has been tested as and found the most appropriate PSS approach for South Sudan current context and is hoped to work best.
3. The big problem of volunteering as community members against current economic crisis in the country.

Risks:

1. Infrastructure problems i.e. lack of space in IDP camp
2. Insecurity, from communal conflicts
3. Unpredictable government restrictions (i.e. on where you can go, who you can hire)
4. Culture and society (i.e. sometimes the beneficiaries don't like being monitored or may speak another language).

Mitigation:

The issue of volunteering will be addressed through initiating the CB-PSS activities right within the community by involving the teachers, church leaders, local chiefs, women leaders who will then appoint CB- CPN as volunteers, stressing the importance of collective responsibility of protecting their children as community members.

Activities

Activity 3.1.1

Provide PSS services to 700 children (350 boys, 350 girls) through community based PSS activities in church, FDGs, community centres, peer-to-peer outreach, etc

Activity 3.1.2

Provide PSS services to 300 children (150 boys, 150 girls) through non-community based PSS activities in the CFS, schools, etc

Activity 3.1.3

Support and work with 10 kinship families (10 women), 20 community based child protection mechanisms (10 men, 10 women) and 50 caregivers (40 women, 10 men) to provide protection, psychosocial support and care to children without parental care

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	PROTECTION	Frontline services # of children reached with community-based PSS			350	350	700
<p>Means of Verification : - 5 w matrix reports</p> <ul style="list-style-type: none"> -CINA weekly reports -Photos of conflict affected children with their caregivers/community members while playing -Monthly/quarterly narrative reports -Monitoring Reports -Baseline data: 3746 children and 854 adults reached through CB-PSS in Mingkaman with UNICEF support in 2015 							
Indicator 3.1.2	PROTECTION	Frontline services # of children reached through non-community-based PSS			150	150	300
<p>Means of Verification : -Daily CFS attendance</p> <ul style="list-style-type: none"> -Photos of children playing in the CFS/other community space -CFS activity chart -PSS database weekly report -CINA weekly update -Monthly/quarterly reports -Monitoring reports 							
Indicator 3.1.3	PROTECTION	Frontline services # of caregivers reached with community-based PSS	10	50			60
<p>Means of Verification : -Attendance and minutes of meetings with caregivers/community based CP networks/community leaders</p> <ul style="list-style-type: none"> -Photos during trainings with community members -Weekly and 5 W Reports of activities provided to community members -Monthly and quarterly reports 							
Indicator 3.1.4	PROTECTION	Frontline services # of community members (other than caregivers) reached with capacity-building on PSS	10	10	0	0	20
<p>Means of Verification : -Attendance and minutes of meetings with community members</p> <ul style="list-style-type: none"> -Training photos and attendance for community members -5 W and weekly reports for capacity building training provided -Monthly and quarterly reports -Monitoring reports 							
Indicator 3.1.5	PROTECTION	Frontline services # of caregivers reached through non-community-based PSS	10	50			60
<p>Means of Verification : -Attendance of adult caregivers during PSS activities in the church, schools, community, etc.</p> <ul style="list-style-type: none"> -Photos during meetings and trainings of caregivers -Weekly, monthly, quarterly and monitoring reports 							
Indicator 3.1.6	PROTECTION	Frontline services # of adult caregivers reached with capacity-building on PSS	10	50			60

Means of Verification : -Attendance and training plan during training of caregivers

-Photos of caregivers and facilitators during training

-Certificate of attendance for the trainings

-Reports of activity

Additional Targets :**M & R****Monitoring & Reporting plan**

CINA has an existing and improved monitoring and reporting system under the responsibility of Monitoring and Reporting Officer, apart from the child protection staff, which will be responsible for all monitoring and reporting activities of this project. From the inception of previous 2015 CHF SA1 and SA2 projects, the CP staff have been oriented on the project implementation strategies, the indicators and means of verification and will continue to be strongly highlighted in this CHF SA1 2016 and mentored further to ensure that they understand the current project targets and all reporting lines and send their reports timely (weekly, monthly and quarterly narrative) in line with the planned outputs, indicators and with reference to means of verification. Project implementation and management decisions will always be informed by reporting indicators, ensuring flexibility in re-prioritizing specific interventions, at some point, as needs may arise. CINA has 3 CPiE Officers and 6 FTR caseworkers/data entry clerks and a PSS Officer that will be responsible for collecting information about children, compile and submit their reports to Child Protection Manager, coping Monitoring and Reporting Officer, who then compiles the whole reports and share it with the Donor and Senior Management of CINA. There is also FTR Officer who records FTR information using the CPIMS/RapidFTR smart phone/laptop and directly sends it to Save the Children through the CPIMS/RapidFTR system.

The monitoring tools for collecting the data and reporting on specific indicators will include: IRNAs/RRM missions reports to Child Protection Sub cluster and CHF, CPIMS/RapidFTR weekly reports to Save the Children and a copy to the donor (CHF South Sudan), 5 W matrix reports to Child Protection Sub Cluster, with a copy to CHF, weekly activity progress reports (that highly activities implemented against targets and indicators) directly to CHF, the monthly activity progress reports (activities against targets and indicators) to CHF and a quarterly narrative and financial reports to CHF and FTS, with attached means of verifications. Apart from the narrative reports on CHF supported activities, CINA will also provide a response analysis reports showing the profile of beneficiaries reached against targets and the qualitative aspect of results achieved. These monitoring and reporting tools are already in place since they are inter-agency tools and those that were specific to CINA (weekly, monthly and quarterly progress reports) have been recommended by our current donor, UNICEF and have been in used during the 2015 CRP project monitoring and reporting period.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Initiate registration and tracing and provide family reunification services for 40 UASC (20 boys, 20 girls) identified	2016	X	X	X	X	X	X						
Activity 1.1.2: Provide regular monitoring for project activities to CP/FTR caseworkers, CB CPNs and caregivers on weekly and monthly bases	2016	X	X	X	X	X	X						
Activity 1.2.1: Increase follow up care to 40 UASC registered (20 boys, 20 girls) and report appropriately services provided through temporary care monitoring form on a weekly/monthly basis.	2016		X	X	X	X	X						
Activity 2.1.1: Continue to support and work with 10 kinship families (10 women), 20 community based child protection mechanisms (10 men, 10 women) and 50 caregivers (40 women, 10 men) on protection and provision of care to children without parental care	2016		X	X	X	X	X						
Activity 2.1.2: Provide comprehensive family-based care to 20 children (10 boys, 10girls) identified as without parental care through critical child protection referral services (including safety, food, medication, water, shelter/NFI, education, psychosocial support, etc.) available within the community mapped through various thematic groups and in line with policy on children without parental care-South Sudan 2015 and Minimum Standards for Child Protection in Humanitarian Action	2016	X	X	X	X	X	X						
Activity 3.1.1: Provide PSS services to 700 children (350 boys, 350 girls) through community based PSS activities in church, FDGs, community centres, peer-to-peer outreach, etc	2016	X	X	X	X	X	X						
Activity 3.1.2: Provide PSS services to 300 children (150 boys, 150 girls) through non-community based PSS activities in the CFS, schools, etc	2016	X	X	X	X	X	X						
Activity 3.1.3: Support and work with 10 kinship families (10 women), 20 community based child protection mechanisms (10 men, 10 women) and 50 caregivers (40 women, 10 men) to provide protection, psychosocial support and care to children without parental care	2016	X	X	X	X	X	X						

OTHER INFO**Accountability to Affected Populations**

The project is designed in a way that will promote accountability to CINA FTR and PSS beneficiaries. From the previous CHF 2015 projects, beneficiary feedback on the FTR and PSS case management services offered by CINA have been documented (FTR issues such as delay in getting referral services, empty promise from some programmes/service providers, inadequate education and medication packages, etc.) and will inform current response strategies to improve inclusion of beneficiary feedback from the onset of project implementation. CINA M&R Officer will complete these forms at the field with beneficiaries and share the findings with field staff and CINA management to inform response strategies. To make it very transparent, CINA will convene Beneficiary Feedback Conferences at agreed intervals with parents/primary caregivers, community based CP networks, individual children and adolescents attending CFS/under care placement, to gather their views on their level of satisfaction about our child protection/FTR services, as well as their suggestions for improvement in services delivery. Information provided by individual child or group of children/adolescents and caregivers, including their photos will be kept confidential, accessible only to those persons it concerns on a need-base and in line with information sharing protocol (ISP) for National CP SC, 2014. In dealing with issues of children, all those staff and individuals in regular contact with children will have to sign and adhere by provisions of CINA Child Protection Policy and Code of Conduct. This is to ensure that children are safe and services are in line with Do No Harm principle, remembering the fact those buildings on existing structures/systems as well as respecting community/individual norms and beliefs are ideal in keeping with the humanitarian core principles of partiality and neutrality, provided that the best interest of the child is met.

Implementation Plan

CINA will directly implement this project without sub-contracting. CINA plans to incept the project where all CP/FTR staff directly and indirectly involved in the project will be oriented on the project activities, outputs, indicators. The lines of distribution of duties to this project runs at the top from the Director, who plans the project implementation timelines, directs program staff to implement the project and evaluates project results and financial management, submit technical reports and maintains donor relations. CINA's Child Protection Manager supports and supervises project staff in project implementation, reports to the donor and coordinates activities with other actors. The FTR project activities will be coordinated with CP SC (locations/services mapping, coordination and policy direction), Save the Children (for RapidFTR database) State Ministry of Gender, Child and Social Welfare (Government policy and direction), Relief and Rehabilitation Commission (link with communities and support coordination at state level) and local authorities (County Commissioners, Payam Administrators and chiefs for community mobilization and local solutions). Special coordination with UNICEF, Protection Cluster and UN OCHA to ensure their technical and coordination support. The M&R Officer compiles reports and send to the donor, monitor and evaluate field staff and advice on project progress. The frontline CP staffs are responsible for implementing project activities; work with children and caregivers and community and local authorities, especially the field supervisor. The project accountant (Admin/Finance Officer and Assistant) are responsible for management of project funds, use of funds on planned project activities and financial reports to the donor in line with donor requirements, given the physical presence of CINA CPiE/FTR and PSS team currently on ground in Mingkaman in humanitarian hub and the dry season opportunity. However, if for any reason (as may be due to insecurity or other emergencies) that disrupts activities, CINA will respond according to the needs, capacity and availability of funds to provide services in any other safe locations to which the IDPs have moved and settled.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
WHO/CHD	Referral of UASC and distressed children for provision of health and medical services
Save the Children	Referral of UASC and distressed children for provision of nutritional services
WFP/ACTED/HDC	Referral of UASC and distressed children for food provision and NFIs
UNHCR/UNFPA	Referral of UASC and distressed children NFIs and Dignity kits
UNICEF/RUWASA	Referral of UASC and distressed children for WASH

Environment Marker Of The Project

Gender Marker Of The Project

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

Justify Chosen Gender Marker Code

The project has been contributing directly to meeting both the specific needs of boys and girls and specific role of caregivers (women and men) and will continue to highlight those gender-specific needs are addressed differently. In brief, more boys compared to girls (60% boys: 40% girls) are being targeted because the current project shows that boys more boys (110 UASC boys) compared to girls (87 UASC) have been affected by the conflict. However, despite this context-related difference, this project will ensure that equal number of girls as boys is reached, especially during awareness raisings on prevention of family separation and during case by case management

Protection Mainstreaming

CINA will ensure that all staff, volunteers and clients that come in contact with children have signed and adhere to CINA's Child Protection Policy, to ensure that service providers Do No Harm in due course and those services are purely humanitarian, provided in safety and dignity. The project will ensure that needs of all children are equally met, including children living with HIV/AIDS, children living with disabilities and street children. To achieve these all children will be given equal opportunity to participate at all stages of project cycle. Advocacy meetings and awareness sessions, as well as focus group discussions and life skills discussions will be held with different groups of children and adolescents as well as caregivers to ensure that they understand how to protect themselves and individually from any form of abuse, violence and exploitation.

Country Specific Information

Safety and Security

In Awerial County, the security situation is generally good with no threats to humanitarian work. However, due to lack of spaces for privacy for women and girls, there are issues of GBV against women and girls in the camps at night especially, resulting to sexual violence and abuse.

Access

CINA has established physical presence in Mingkaman. The location is generally accessible both by air, on land from Juba and via river from Bor. There are UNHAS regular flights to Mingkaman coordinated from Juba by WFP. Although the road from Juba to Awerial is rough, it's still accessible.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
Staff and Other Personnel Costs							
1.1	Awerial, Child Protection Manager monthly salaries (100% CHF)	D	1	1,500.00	6	100%	9,000.00
	<i>Child Protection Manager (Grade 2.A) supervises implementation of CP activities, coordinates with CP actors on ground, reports and evaluates CP activities. Gross Monthly salary: \$75 per day for 20 working days=\$1500; Social security: 8%=\$120; medical insurance: 5%=\$75; Hazard pay:10% =\$150; Net monthly salary:77%=\$1155</i>						
1.2	Awerial (3), Bor (1) CPIE Officers monthly salaries (100% CHF)	D	4	900.00	6	100%	21,600.00
	<i>CPIE Officers (Grade 4.A) implements CPIE (FTR and PSS) programs activities of field staff and coordinates with Juba level, coordinates with other CP actors, reports progress, train and support field staff and evaluates project results. Gross Monthly salary: \$60 per day for 20 working days=\$1200; Social security: 8%=\$96; medical insurance: 5%=\$60; Hazard pay:\$10=\$120; Net monthly salary:77%=\$924</i>						
1.3	Juba, CINA Director monthly salaries (50% CHF)	S	1	2,500.00	6	50%	7,500.00
	<i>Director (Grade 1.A) makes policies, plans and supervises programs, and build/maintains donor relations Gross Monthly salary: \$125 per day for 20 working days=\$2500; Social security: 8%=\$200; medical insurance: 5%=\$125; Hazard pay:\$10=\$250; Net monthly salary:77%=\$1925</i>						
1.4	Juba, Admin/Finance Manager (Project Accountant) 50% CHF	S	1	1,600.00	6	50%	4,800.00
	<i>Admin/Finance Manager (Grade 3.B) administers project staff (HR role), manages and reports use of donor's funds. Gross Monthly salary: \$80 per day for 20 working days=\$1600; Social security: 8%=\$128; medical insurance: 5%=\$80; Hazard pay:\$10=\$160; Net monthly salary:77%=\$1232</i>						
1.5	Awerial (2), Bor (2), Juba (1) Support Staff monthly salaries (70%)	S	5	700.00	6	50%	10,500.00
	<i>Support Staff (Grade 7.A) serve the role of Admin/logistics Assistants, security guard, cleaner/messenger and driver. Gross Monthly salary: \$35 per day for 20 working days=\$700; Social security: 8%=\$56; medical insurance: 5%=\$35; Hazard pay:\$10=\$70; Net monthly salary:77%=539 \$231</i>						
	Section Total						53,400.00
Supplies, Commodities, Materials							
2.1	Tracing and Reunification support packages to 40 UASC (100% CHF)	D	40	50.00	6	100%	12,000.00
	<i>Interim care support of UASC while tracing family per child=\$25 (=food, clothes, shoes, medication, etc.); Reunification and monitoring packages per child@\$40 (=transportation, food, clothes, medication, etc.); LOCATIONS: Awerial:250 UASC</i>						
2.2	Alternative care support for 20 UASC children without adult caregivers (100% CHF)	D	20	75.00	6	100%	9,000.00
	<i>Daily meal per child@\$3*30days=\$90 per month; clothes, medication and others=\$10 per month. Overall total= \$75 per a UASC child per month. LOCATIONS: Awerial</i>						
2.3	Cost for construction of community based CFS for PSS activities (100% CHF)	D	2	1,500.00	1	100%	3,000.00
	<i>Local materials for constructing 1 CFS= \$ 1500* 2 CFS= \$3000 (based on local market rates of local construction materials).</i>						
2.4	Support to 50 caregivers, 10 foster parents, 20 CB-CPN on PSS and CP of UASC and distressed children (100% CHF)	D	80	30.00	3	100%	7,200.00
	<i>80 participants @\$ 30 for 5 days trained on basic CPIE, PSS and FTR LOCATION: Awerial</i>						
2.5	Hall hire for 6 groups meetings for caregivers/community based CP networks on FTR and PSS(100% CHF)	D	6	100.00	5	100%	3,000.00
	<i>4 groups meetings for 50 caregivers (group of 20 participants), and 2 combined meetings(for 10 foster parents and 20 CB CPNs =6 trainings* \$100* 5 days=\$4000 LOCATIONS: Mingkaman Hotels</i>						

2.6	Stationery supplies for training of CB CPN and caregivers for their records during orientation and work (100% CHF)	D	6	100.0 0	1	100%	600.00
	<i>100 notebooks, 100 pens, 3 dozens of markers, 12 rolls of flip charts, 4 rim of printing papers, 12 pairs of ink cartridge)= \$100 per training*8 trainings= \$800</i>						
2.7	Awerial (20) Community based child Protection Network (100% CHF)	D	20	100.0 0	6	100%	12,000.00
	<i>Community based child protection volunteers (Grade 7.B) serve as the community entry points, work with parents, caregivers and children; identify and reports and respond to CP issues affecting children. Volunteers are not entitled to social security, medical insurance and hazard allowances</i>						
	Section Total						46,800.00
Equipment							
3.1	Hire of vehicle for transporting field staff to Mingkaman and field work in Awerial (100%CHF)	D	1	3,000 .00	6	100%	18,000.00
	<i>Cost of hiring a vehicle @\$100 per day*30 days*6 months=\$18000 LOCATIONS: Awerial County</i>						
3.2	Cost of purchasing 2 Motorbikes for field staff (100% CHF)	D	2	3,000 .00	1	100%	6,000.00
	<i>Cost of purchase and registration of Yamaha in Juba = \$3000*2=\$6000 for logistic facilitation of field activities by the CPiE officers</i>						
	Section Total						24,000.00
Travel							
5.1	Air tickets for 2 Program Officer and 2 CP Officers for Monthly field visit (100% CHF)	D	4	400.0 0	6	100%	9,600.00
	<i>Air tickets for 4 staff @\$400*6months=\$9600 based on UNHAS rates. LOCATIONS: Air tickets from Juba to Mingkaman and back</i>						
5.2	2 tickets for 2 CP for participating in IRNAs and RRM missions (100% CHF)	D	2	400.0 0	2	100%	1,600.00
	<i>2 air tickets for 2 CP staff@ \$400* 2 months LOCATIONS: Air tickets from Juba to Mingkaman and back.</i>						
5.3	DSA for 4 Program Officers during CP monitoring for 3 months (100% CHF)	D	4	200.0 0	3	100%	2,400.00
	<i>DSA=\$200 per half month* 4 staff* 6 months=\$2400 LOCATION: 1 trip every 2 months to Mingkaman.</i>						
5.4	DSA for 2 CP Officers during participation in IRNAs and RRM (100% CHF)	D	2	200.0 0	2	100%	800.00
	<i>DSA=\$200 per month*2 staff* 2 months=\$800 LOCATIONS: 2 Assessment missions in Awerial/periphery in 6 months period.</i>						
	Section Total						14,400.00
General Operating and Other Direct Costs							
7.1	Fuel for vehicle, motorbike and 2 offices (50% CHF)	S	300	2.00	6	50%	1,800.00
	<i>300 litres per month *\$2 USD * 6 months=\$3600(50%CHF Contribution. Locations: Mingkaman and Juba</i>						
7.2	Office rent for 6 months (2) 50% CHF	S	2	700.0 0	6	50%	4,200.00
	<i>Office rent and maintenance=\$700 *2 offices*6 months= \$ 8400 (50%) LOCATIONS: Bor Office:1, Juba Office 1</i>						
7.3	Office stationery for 2 offices for 6 months (50% CHF)	S	2	300.0 0	6	50%	1,800.00
	<i>(printing papers, ink cartridges, pens, note pads, envelopes, cleaning services, lighting services)= \$ 300 per month * 2 offices*6months= \$3600 (50%).</i>						
7.4	Communication cost for 6 months (50% CHF)	S	2	300.0 0	6	50%	1,800.00
	<i>2 Offices' internet systems and air time units for field staff = \$300*2 Offices* 6 months=\$ 3600 (50%)</i>						
7.5	Others (bank charges, maintenance of vehicle and motorbike) 50% CHF	S	3	150.0 0	6	50%	1,350.00

	<i>Lump sum charges by bank, maintenance of vehicle, motorbikes, monthly=3 costs*\$200*6=\$3600: 50%</i>			
	Section Total			10,950.00
SubTotal	510.00			149,550.00
Direct				115,800.00
Support				33,750.00
PSC Cost				
PSC Cost Percent				7%
PSC Amount				10,468.50
Total Cost				160,018.50
Grand Total CHF Cost				
				160,018.50

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Lakes -> Awerial	100	20	60	530	530	1,140	<p>Activity 1.1.1 : Initiate registration and tracing and provide family reunification services for 40 UASC (20 boys, 20 girls) identified</p> <p>Activity 1.1.2 : Provide regular monitoring for project activities to CP/FTR caseworkers, CB CPNs and caregivers on weekly and monthly bases</p> <p>Activity 1.2.1 : Increase follow up care to 40 UASC registered (20 boys, 20 girls) and report appropriately services provided through temporary care monitoring form on a weekly/monthly basis.</p> <p>Activity 2.1.1 : Continue to support and work with 10 kinship families (10 women), 20 community based child protection mechanisms (10 men, 10 women) and 50 caregivers (40 women, 10 men) on protection and provision of care to children without parental care</p> <p>Activity 2.1.2 : Provide comprehensive family-based care to 20 children (10 boys, 10girls) identified as without parental care through critical child protection referral services (including safety, food, medication, water, shelter/NFI, education, psychosocial support, etc.) available within the community mapped through various thematic groups and in line with policy on children without parental care-South Sudan 2015 and Minimum Standards for Child Protection in Humanitarian Action</p> <p>Activity 3.1.1 : Provide PSS services to 700 children (350 boys, 350 girls) through community based PSS activities in church, FDGs, community centres, peer-to-peer outreach, etc</p> <p>Activity 3.1.2 : Provide PSS services to 300 children (150 boys, 150 girls) through non-community based PSS activities in the CFS, schools, etc</p>

Documents

Category Name	Document Description