

Requesting Organization :	Hidig Relief And Development Organization				
Allocation Type :	Standard Allocation 1 (Jan 2017)				
Primary Cluster	Sub Cluster	Percentage			
Water, Sanitation and Hygiene		100.00			
		100			
Project Title :	Vulnerable drought and displacement-affected populations in Elberde district of Bakool region, disaggregated by sex have increased equal temporary and sustained access to reliable safe water, appropriate sanitation and hygiene services				
Allocation Type Category :					
OPS Details					
Project Code :		Fund Project Code :	SOM-17/3485/SA1 2017/WASH/NGO/4653		
Cluster :		Project Budget in US\$:	248,835.24		
Planned project duration :	6 months	Priority:			
Planned Start Date :	14/03/2017	Planned End Date :	14/09/2017		
Actual Start Date:	14/03/2017	Actual End Date:	14/09/2017		
Project Summary :	<p>As the drought intensifies through out Somalia, water becomes an essential and very expensive commodity to the pastoralists, agro-pastoralists as well as the vulnerable IDPs in Elberde district. Under this project, HRDO proposes to improve temporary and sustainable access to safe water, sanitation facilities and promote good hygiene practices in an effort to improve the health status of 12,500 drought affected pastoral communities and internally displaced men, women, boys and girls at 5 rural villages in Elberde district of Bakool region. Limited access to safe and adequate water and sanitation facilities coupled with poor hygiene knowledge and practices put these communities at risk to the prolonged drought and waterborne diseases. Apart from the ongoing health and nutrition activities, which HRDO is implementing in the region, HRDO would like to implement WASH services as an integration project through: (1) Distribution of emergency and temporary safe water through water voucher system to 9,920 people from the drought affected communities and internal displaced populations in five villages (Qurac joomo, Elmagaad, Abesale, Fikta and Baadikeen) of Elberde district in a period of 60 days; (2) As an exit strategy, HRDO will rehabilitate three shallow wells with animal troughs to 3 targeted villages (Abeesaale, Qurac joomo, El magan); (3) Capacity building training will be given to WASH committees, well operators and community members; (4) HRDO will construct 4 gender sensitive twin block latrines with hand washing basin at two MCHs in Quracjoomo and El magan (2-twin latrines per each MCH); (5) HRDO will distribute 50 sanitation kits to 5 targeted villages (10 kit/village) to carry out routine campaigns on sanitation and improve the environmental sanitation of the villages; and (6) HRDO will carry out comprehensive hygiene promotion activities to the targeted 5 villages participating around 12,600 persons. During HP activities HRDO will distribute hygiene promotion kits to 1,000 people, who are at risk of AWD/cholera. The proposed response took into consideration the impact of the conflict on women, and children in terms of access to the WASH services.</p>				
Direct beneficiaries :					
	Men	Women	Boys	Girls	Total
	1,889	3,149	3,781	3,781	12,600
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
Pastoralists	1,619	2,700	3,240	3,240	10,799
Internally Displaced People/Returnees	270	449	541	541	1,801
Indirect Beneficiaries :					
6,000 beneficiaries scattered in the district and using the MCHs and the rehabilitated water points					
Catchment Population:					
59,520 projected population at Elberde district for the year 2017 (UNFPA)					
Link with allocation strategy :					

This proposal has direct link with SHF-2017-SA1 allocation:

- 1) the project is scaling up WASH lifesaving interventions in response to the ongoing drought to mitigate the risk of WASH related disease outbreaks, in particular AWD/cholera at Elberde in Bakool district.
 - 2) The project focuses on initiated WASH response to drought and scale up the response to the increased AWD/cholera episodes as a direct consequence of the drought
 - 3) The project is focuses on drought, including drought related diseases such as AWD/cholera and measles
 - 4) The project focuses on immediate life-saving response through provision of temporary and emergency WASH services.
- As the four above points are the objectives of SHF-2017-SA1, thus this project has direct link with this allocation.

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
Daud Moalim Abdinur	Executive director	damac09@hotmail.com	+252615532161

BACKGROUND

1. Humanitarian context analysis

According to World Bank 2016 report, Somalia remains among the worst humanitarian crises in the world. The humanitarian emergency exists in a context of a dire socio economic situation. More than 73% of the population lives below poverty line (\$1.25/day). Coupled with dwindling finances for the provision of humanitarian assistance, the humanitarian crisis shows no signs of abetting. Somalia had the highest index for risk management ranking meaning that Somalia not only faced high hazard levels, but also had high levels of vulnerability and low levels of resilience/coping capacity. Somalia remains in a state of ‘chronic catastrophe’, characterized by a complex of political environment, extreme poverty, food insecurity, conflict and instability. The large-scale failure of rains during October-December 2016 has led to a devastating drought across parts of the Horn of Africa. Central and southern Somalia received less than a quarter of their normal seasonal rainfall. Availability of water is declining fast and crops and pasture have been ravaged; vegetation conditions are the worst on record in many areas, surpassing those observed during the drought of 2010-11. Deaths of livestock, an economic mainstay in Somalia, are now widespread. The drought follows poor March-May rains followed by poor rain October-December in Somalia, during which many vulnerable families saw their coping strategies eroded. More than 5 million people in Somalia are facing food and water shortages. With early indications suggesting that the next rains may also be poorer than average, agencies are warning that we could see a third, consecutive, drought-affected season. Somalia one of the top ten countries with highest prevalence of malnutrition in the world and the third highest in the eastern and southern Africa region at 14.3 per cent (GAM) amongst children under five years with 2.9 per cent being severely malnourished. As per the recent FSNAU Gu 2016 findings, the current GAM population quantified from both IDPs settlements and Rural Livelihood zones nutritional assessments have increased by 19% and 6% respectively. The Gu 2016 result had also revealed that the current poor nutritional situation identified in most of the IDPs settlements and Rural Livelihood zones will either deteriorate or sustain in serious or critical situation with no nutritional improvement expected. Furthermore, According to FSNAU December 2017 report, pastoral livelihood zones, pasture and water resources are very limited, especially in central and northeastern areas. This is leading to atypical livestock migration and livestock deaths. Large-scale water trucking is also ongoing in these regions, forcing many households to redirect limited income to buy water for themselves and their livestock. In agricultural and agropastoral areas, harvest prospects are poor in both surplus producing areas (i.e. Middle/Lower Shabelle and Bay Regions), and in more marginal cropping areas of the south (e.g., Hiran, Bakool, Middle Juba, and Gedo Regions). Overall, January Deyr harvests are likely to be 60-70 percent below the five-year average and among the lowest on record. Poor basic services continue to undermine the resilience of vulnerable people. About 3.2 million women/girls, and men/boys need emergency health services, while 2.8 million women/girls, men/boys required improved access to water, sanitation and hygiene (Health & WASH cluster). The impact of this lack of basic services is felt most strongly among IDPs who continue to be affected by cyclical disease outbreaks and suffer from high levels of acute malnutrition as result.

2. Needs assessment

Trend analysis on the seasonal surveys conducted by FSNAU since 2007 to 2016 clearly indicates; the fact that Acute Malnutrition trends in Somalia remains stable at emergency level of GAM/SAM threshold with no significant variations in the malnutrition rates over the years (p>0.05). According to UNHCR, 52,344 people were displaced between July to Sep. 2015 as a result of insecurity due to military offensive (31%), eviction (24 %) and due to other security related reasons (23%). 2.8 million women/girls, men/boys require improved access to water, sanitation and hygiene (WASH cluster). The impact of this lack of basic services is felt most strongly among IDPs who continue to be affected by cyclical disease outbreaks and suffer from high levels of acute malnutrition as result. HRDO made a rapid assessment on 20-22 November 2016 at Elberde district, to know the impact of the drought hit by the communities in this district as HRDO is currently implementing Nutrition and health activities in the district. The assessment revealed that: 1) Availability of water is declining fast and pasture have been ravaged; vegetation conditions are the worst; 2) deaths of livestock, are now started; 3) 68% of the shallow wells and 92% of water catchments were dried out, thus water trucking is ongoing in the district, forcing many households to redirect limited income to buy water for themselves and their animals. The assessment methodology used was: focus group discussion; household interview; transect walk or observation; Individual interview. The assessment report at household level revealed that: 1) 76% have no access to safe water, where exist women/girls walk long distance and queue for long hours due to the limited number of reliable water points. Thus, most of the communities rely on unprotected shallow wells for their water needs; 2) 63% of the community in the rural villages practice open defecation and have no knowledge to the effects to the overall livelihood, particularly its health hazards. AWD/cholera is endemic and claims lives (especially children under age of five; 3) 64% of water points are unprotected and need immediate rehabilitation. In conclusion, poor access to safe water and lack of adequate sanitation facilities coupled with poor hygiene practices are major threats for the survival and development of the children and it is the root cause of the increased malnourished children. In this regard, after consultations with women/girls (who pay high price for lack of WASH services) and other different stakeholders, HRDO proposes emergency and sustainable WASH services in complementary with HRDO health and nutrition programs in Elberde district of Bakool region.

3. Description Of Beneficiaries

The target beneficiaries of the proposed project will be exclusively drought affected pastoral and vulnerable displacement-affected populations at 5 rural villages in Elberde disreict in Bakool region. The direct beneficiaries will include 2100HH representing 12600 persons (1,890 men, 3,150 women, 3,780 boys and 3,780 girls) shared by the 5 villages (795HH Qurac Joomo, 300HH Elmagaad, 370HH Abesale, 260 Fikta, and 375HH at Baadikeen) will benefit from WASH life saving interventions.

4. Grant Request Justification

- 1) HRDO is implementing Nutrition and health projects in the project area. Thus, this project is integrated to the ongoing projects and the planned scaling-up nutrition and health project requested in this allocation.
- 2) The project location is one of the priority locations under this allocation, which is Elberde district of Bakool region
- 3) The project responds life saving WASH interventions to drought and Displacement affected households,
- 4) currently there is no security in the district and the HRDO and other partners can easily access.
- 4) HRDO was working in Elbarde district of Bakool region. Therefore HRDO have good relation with the community and the local authority

5. Complementarity

HRDO has been working Elberde district since its establishment and have implemented humanitarian emergency, food security, health and nutrition since its establishment. The proposed project shall complement the ongoing health and nutrition projects in the target villages under Elberde villags, effectively addressing on the gaps of the WASH intervention to the ongoing drought affected people. HRDO is applying for funding from SHF in health and nutrition and WASH. The WASH intervention will complement these projects and will be designed to ensure the highest level of integration into Elberde Program. The program will strive to layer and sequence the activities in such a way that the program produces tangible impacts on the vulnerable communities being targeted.

LOGICAL FRAMEWORK

Overall project objective

Vulnerable drought/AWD affected households and displaced affected people disaggregated by sex have increased equal access to temporary life saving and sustained access to reliable safe water, appropriate sanitation and hygiene services.

Water, Sanitation and Hygiene

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Provide access to safe water, sanitation and hygiene for people in emergency	Somalia HRP 2017	76
Provide reliable and sustained access to sufficient safe water-based on identified strategic water points and establishment of sustainable management structures	Somalia HRP 2017	24

Contribution to Cluster/Sector Objectives : This proposed project contributes:

WASH objective 1: provide access to safe, sanitation and hygiene for people in emergency by providing Safe water through water voucher, sanitation and hygiene for people in 5 villages at Elberde district of Bakool region.

WASH objective 2: Provide reliable and sustained access to sufficient safe water-based on identified strategic water points and establishment of sustainable management services through rehabilitation of two shallow wells with animal troughs, establishment of WASH committees to the two water points and providing training to improve their capacities in the management of their respective water points. In addition to that HRDO will train 4 well operators for maintenance and operation of the well, in order to continue the sustainability of the rehabilitated water source.

Outcome 1

9920 (1488 men, 2480 women, 2970 boys and 2970 girls) drought/AWD and displaced affected communities have access of temporary safe drinking water in a period of 60 days and 3000 (450 men, 750 women, 900 boys and 900 girls) of them will have sustained access of safe water after the project is ended.

Output 1.1

Description

9920 drought/AWD and displaced affected communities at 5 rural villages in Elberde district have temporary and sustainable equally access to safe water through water voucher and rehabilitation of 3 shallow wells with animal troughs.

Assumptions & Risks

Activities

Activity 1.1.1

Standard Activity : Water trucking/water Vouchers

With the community elders, select the most vulnerable drought/AWD and displaced affected 9920 persons within the targeted villages, then identify water vendors sign with them MoU to provide water through voucher to assigned personals with identified ratio of water (the water deemed in voucher will be calculated in accordance to the size of the household multiply by 7.5lt/day). The water should be chlorinated and brought from recognized water point (the hygiene promoter officer will check the water point and select according to its water reliability).

Activity 1.1.2

Standard Activity : Water point construction or rehabilitation

Rehabilitate 3 flood proof shallow wells with animal troughs. The action includes: deepening of the shallow wells to at least 3 meters to increase the yield of the wells, lining the walls of the wells with concrete rings, construction of Reinforced concrete apron to improve the environmental sanitation of the well area, construction of canal for the drainage, construct the head of the wells with rubble stone at least 50cm above the ground to avoid flooding and water contamination. Chlorination will be undertaken in all the 3 shallow wells to ensure positive residual chlorine at household level and minimize chances of contamination. Water quality testing on physical will also be undertaken within every month to alleviate possible outbreak of AWD. The water source should be equally accessible to men, women, boys and girls. The design and the location of the well will be consulted to the women and girls to reduce GBV.

Activity 1.1.3

Standard Activity : Capacity building (water committees and WASH training)

Conduct:

(1) 5 days training to selected 3 WASH committees with equal and active participation of both women and men, to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committees will be trained on water management including financial management, record keeping, tariff setting, operation and maintenance, DRR, different roles of women and men in the committees.

(2) 3 days training to 6 well operators (3 men and 3 women) each shallow well with 2 well operators on maintenance and operation including changing oil, filters and revenue collection.

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	Water, Sanitation and Hygiene	Number of people with temporary access to safe water					9,920
Means of Verification : The security is stable, community are cooperative, market and roads are accessible (no road blocks from the insurgents and freelance militias)							
Indicator 1.1.2	Water, Sanitation and Hygiene	Number of people with sustained access to safe water					3,000
Means of Verification : The security is stable, community are cooperative, market and roads are accessible (no road blocks from the insurgents and freelance militias)							
Indicator 1.1.3	Water, Sanitation and Hygiene	Number of wash committee members who have participated in capacity building activities					77

Means of Verification : The security is stable, community are cooperative, market and roads are accessible (no road blocks from the insurgents and freelance militias)

Outcome 2

Improved access of sanitation facilities to women, men, boys and girls who visited health facilities

Output 2.1**Description**

Improved access to sanitation facilities to 2 MCHs in Qoracjoom and Abeesale villages.

Assumptions & Risks

The security is stable, community are cooperative, market and roads are accessible (no road blocks from the insurgents and freelance militias).

Activities**Activity 2.1.1****Standard Activity : Institutionsl Latrine construction**

Construct flood proof, desludgable, gender sensitive 4-twin block latrines to two MCHs in Qoracjoom and Abeesale villages at Elberde district. The design and the location of the latrines should be appropriate to women, men, boys, girls, aged and disabled. The latrines should have lockable doors and hand washing basin.

Activity 2.1.2**Standard Activity : Solid Waste Management**

To improve the environmental sanitation of the targeted villages and avoid the spread of AWD/cholera to the targeted villages, distribute 50 sanitation kits to the village community committees (village community committees are composed men and women) to carry out routine clean-up campaigns. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes.

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	Water, Sanitation and Hygiene	Number of people assisted with access to sustainable sanitation					240
Means of Verification : The security is stable, community are cooperative, market and roads are accessible (no road blocks from the insurgents and freelance militias)							
Indicator 2.1.2	Water, Sanitation and Hygiene	Number of sanitation kits distributed					50

Means of Verification : Security is stable, no road blocks to the market, community are willing to participate the campaign

Outcome 3

Vulnerable drought/AWD and displacement-affected populations including women, girls, boys and men, have improved awareness on public health risks and positive hygiene practices adopted

Output 3.1**Description**

Improved at least 12,600 (1890 men, 3150 women, 3780 and 3780 girls) vulnerable drought/AWD and displacement-affected populations including women, girls, boys and men, have awareness on public health risks and positive hygiene practices adopted through comprehensive hygiene promotion carried out all our 5 targeted villages

Assumptions & Risks

community are friendly, cooperative and ready to adopt behavior change

Activities

Activity 3.1.1

Standard Activity : Community Hygiene promotion

The hygiene promotion activities will be conducted through the community hygiene promoters who have been trained on better hygiene promotion activities. More than 50% of CHPs are women, in order to be able to undertake household visits which mainly are female-headed. Trained 16 hygiene promoters will make house to house, health facilities, nutrition centers and schools visits. Regular hygiene campaigns will be conducted focusing on 3 key messages of hand washing with soap, safe excreta disposal including children faeces and safe chain water management. This will complement the chlorination and water quality monitoring to avert further contamination at household level, thus reducing chances of occurrence of AWD in the targeted villages.

Activity 3.1.2

Standard Activity : Community Hygiene promotion

Organize and select 16 (8 men, 8 women) community hygiene promoters (CHPs) and 2 Hygiene Promoters (HPs). Conduct 5 days training the 16 CHPs and 2 HPs on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan.

Activity 3.1.3

Standard Activity : Hygiene kit distribution (complete kits of hygiene items)

Provide 1,000 hygiene promotion kits to 1,000 vulnerable AWD risk households identified by the health facilities. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs).

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	Water, Sanitation and Hygiene	Number of people who have participated in hygiene promotion activities					12,600
Means of Verification : Security stable, community are friendly, cooperative and willing to practice behavior change.							
Indicator 3.1.2	Water, Sanitation and Hygiene	Number of hygiene promoters trained					15
Means of Verification : Security stable, community are friendly, cooperative and willing to practice behavior change.							
Indicator 3.1.3	Water, Sanitation and Hygiene	Number of people who have received hygiene kits					1,000

Means of Verification : Security stable, no road blocks at the market roads, community are friendly, cooperative and willing to practice behavior change.

Additional Targets :

M & R

Monitoring & Reporting plan

HRDO Programme Coordinator will be the main person in charge of this project. He will be assisted by the project and M&E Officer, as well as office manager at HRDO Bakool office and the entire HRDO team in the field will be fully responsible for monitoring, evaluation and reporting. Monitoring of activities and deliverables will be daily and weekly reporting lines established and managed. Project manager together with the project staff will carry out day to day monitoring to the project sites. Telephone numbers of the beneficiaries, WASH committees, Community Hygiene Promoters will be registered and kept for remote monitoring for OCHA and funding partners. HRDO will be compiling data and reports as indicated in the results framework and additional information where needed and necessary and share accordingly as the plan. Programme Coordinator and M&E officer will be visiting the implementation sites to provide guidance and monitor the situation and rectify anomalies where they exist. In the event of unforeseen circumstances or material change in implementation activities, HRDO will accordingly notify UNOCHA immediately. HRDO will also be reporting to the WASH Cluster on monthly basis by submitting the 4W matrix. HRDO will also train its staff on M&E activities and reporting lines at its own cost for better project management. HRDO management team will organize field visit to WASH cluster partners, OCHA focal person and local authority at district level after the completion of the project to monitor and evaluate the HRDO WASH intervention to Elberde district.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: With the community elders, select the most vulnerable drought/AWD and displaced affected 9920 persons within the targeted villages, then identify water vendors sign with them MoU to provide water through voucher to assigned personals with identified ratio of water (the water deemed in voucher will be calculated in accordance to the size of the household multiply by 7.5lt/day). The water should be chlorinated and brought from recognized water point (the hygiene promoter officer will check the water point and select according to its water reliability).	2017				X	X							

Activity 1.1.2: Rehabilitate 3 flood proof shallow wells with animal troughs. The action includes: deepening of the shallow wells to at least 3 meters to increase the yield of the wells, lining the walls of the wells with concrete rings, construction of Reinforced concrete apron to improve the environmental sanitation of the well area, construction of canal for the drainage, construct the head of the wells with rubble stone at least 50cm above the ground to avoid flooding and water contamination. Chlorination will be undertaken in all the 3 shallow wells to ensure positive residual chlorine at household level and minimize chances of contamination. Water quality testing on physical will also be undertaken within every month to alleviate possible outbreak of AWD. The water source should be equally accessible to men, women, boys and girls. The design and the location of the well will be consulted to the women and girls to reduce GBV.	2017						X	X	X					
Activity 1.1.3: Conduct: (1) 5 days training to selected 3 WASH committees with equal and active participation of both women and men, to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committees will be trained on water management including financial management, record keeping, tariff setting, operation and maintenance, DRR, different roles of women and men in the committees. (2) 3 days training to 6 well operators (3 men and 3 women) each shallow well with 2 well operators on maintenance and operation including changing oil, filters and revenue collection.	2017			X	X	X	X	X	X					
Activity 2.1.1: Construct flood proof, desludgable, gender sensitive 4-twin block latrines to two MCHs in Qoracjome and Abeesale villages at Elberde district. The design and the location of the latrines should be appropriate to women, men, boys, girls, aged and disabled. The latrines should have lockable doors and hand washing basin.	2017						X	X						
Activity 2.1.2: To improve the environmental sanitation of the targeted villages and avoid the spread of AWD/cholera to the targeted villages, distribute 50 sanitation kits to the village community committees (village community committees are composed men and women) to carry out routine clean-up campaigns. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes.	2017			X	X	X	X	X	X					
Activity 3.1.1: The hygiene promotion activities will be conducted through the community hygiene promoters who have been trained on better hygiene promotion activities. More than 50% of CHPs are women, in order to be able to undertake household visits which mainly are female-headed. Trained 16 hygiene promoters will make house to house, health facilities, nutrition centers and schools visits. Regular hygiene campaigns will be conducted focusing on 3 key messages of hand washing with soap, safe excreta disposal including children faeces and safe chain water management. This will complement the chlorination and water quality monitoring to avert further contamination at household level, thus reducing chances of occurrence of AWD in the targeted villages.	2017			X	X	X	X	X	X					
Activity 3.1.2: Organize and select 16 (8 men, 8 women) community hygiene promoters (CHPs) and 2 Hygiene Promoters (HPs). Conduct 5 days training the 16 CHPs and 2 HPs on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan.	2017			X										
Activity 3.1.3: Provide 1,000 hygiene promotion kits to 1,000 vulnerable AWD risk households identified by the health facilities. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs).	2017						X	X						

OTHER INFO

Accountability to Affected Populations

HRDO will ensure that it is accountable to the affected populations by providing leadership through the demonstration of commitment and ensuring feedback and accountability mechanisms are integrated into response mechanism, programme implementation, monitoring and evaluations, recruitment, staff inductions, training and performance management, partnership agreements, and highlighted in reporting. Transparency by providing accessible and timely information to affected populations on organizational procedures, structures and processes. By having a feedback and complaints mechanism that actively seek the views of affected populations to improve policy and practice in programming, ensuring that feedback and complaints mechanisms are streamlined, appropriate and robust enough to deal with (communicate, receive, process, respond to and learn from) complaints about breaches in policy and stakeholder dissatisfaction Specific issues raised by affected individuals regarding violations and/or physical abuse that may have human rights and legal, psychological or other implications should have the same entry point as programme-type complaints, but procedures for handling these should be adapted accordingly. By ensuring participation and enabling affected populations to play an active role in the decision-making processes that affect them and by designing, a monitoring and evaluation goals and objectives that are meant for the programmes with the involvement of affected populations.

Implementation Plan

HRDO shall implement the project, but in close coordination with other stakeholders such as the regional ministries of Water and Mineral Resources and other humanitarian agencies in the area. Within the structure of HRDO, the Project Manager and the other project staffs will be responsible for the day-to-day of implementing the project activities. He will lead the team on weekly planning and share the resources based on the team weekly needs. He has the overall to lead the technical and programmatic leadership. In the implementation of hygiene promotion activities, The community hygiene promoters with the supervision of hygiene promoters will be responsible the awareness and sensitization by visiting house-to-house, health facilities, nutrition/feeding centers and schools. HRDO top management team and M&A officer will visit the project site in routine to overlook the smooth implementation of the project and make routine monitoring and evaluation of the project. If any unexpected scenario the may hinder the implementation of the project, the HRDO chairperson will immediately contact to the stakeholders to sort out the issue.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
WASH Cluster	HRDO is an active member of WASH cluster in Nairobi and in the field. The WASH cluster coordinates all organizations and government stakeholders who are actively involved in implementation of WASH programs in Somalia. The Cluster has developed 4W matrix which tracks activities implemented by WASH agencies. The matrix is updated monthly and is one of the platforms for sharing information by the cluster. This assists in avoiding duplication of activities in the field. The WASH cluster meetings take place monthly both in Nairobi and the field where there are focal points responsible for chairing regular meetings and facilitating needs assessment whenever required. HRDO uses a Strategic Operational Framework developed by the WASH Cluster that collates WASH cluster standards and recommended approaches.
UNICEF	Essential Supply Support
Ministry of water at state level	Provision of leadership and oversight
WHO	Staff training and technical guidelines
ACF	For referral and coordination with their stabilization center in Elbarde town

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

Gender Considerations in Implementation: Gender will be mainstreamed throughout the project: data are disaggregated by sex whenever possible and activities are tailored to respond to the specific needs of women, girls, men and boys affected by the drought and the conflict. Particular attention has been given to women as women will participate in the identification of safe sites for the latrines construction. Latrines will be separated by gender (male and female). All the blocks will be lockable and latrines location will aim to maximize safety for women and girls. Hygiene kits distribution will give particular attention to the female head of households. Wash Committees will guarantee equal participation of women and men. During the hygiene promotion sessions, where women, girls, men and boys are equally represented, confidentiality and integrate cultural sensitivity will be guaranteed. Hygiene kits will be designed according to the specific needs of women, girls, men and boys.

Protection Mainstreaming

Through its WASH technical designs, HRDO strives to reduce the risks from exposure to GBV, to create safe and friendly environments for women, female adolescents and girls to access WASH services and to rehabilitate facilities to be accessible to individuals with disability. Illustrative actions HRDO takes to ensure protection and gender are mainstreamed in WASH programming include: • Positioning of water distribution, water points, public latrines at the sites that are easily accessible and highly visible to reduce incidence of GBV and other forms of violence. • Sufficient number of water hand pumps to minimize waiting time at the water points and reduce the risk of violence while collecting water, traditionally and most often the role of the girl child or mother. • Technical designs that feature adequate separation of latrine blocks for men and women to ensure dignified access and reduce risks from GBV, with particular attention to consideration of the unique needs of girls and women, and culturally appropriate separation; are equipped with locks and privacy walls, and culturally appropriate in their disaggregation and separation by sex; • Ensuring participation of men and women in design of the WASH facilities through committee work in order to ensure privacy and dignified use of facilities by women; • Ensure women and men have equitable influence on hygiene promotion using the PHAST methodological approach; • Sensitivity to the particular needs of children in designing WASH facilities and hygiene promotion activities. Poor functionality of existing water points due to damage in times of conflict often pushes females to fetch water along the outskirts of their villages leaving them vulnerable to harm by rural militias or competing/conflicting sub-clans. While males are not responsible for collecting water and do not face harm from this perspective, gender consideration of male involvement in conflicts is necessary, noting that most sub-clan rivalries and conflicts are associated with access to water for human and/or animal use. Thus, the tendency of young boys and men to engage in violence over water management suggests a critical need to incorporate conflict DE-escalation and resolution techniques, particularly for males involved in water governance. Thus project will increase availability of WASH services within the community and therefore women and girls will not walk long distance and violence against them will be avoided/reduced.

Country Specific Information**Safety and Security**

HRDO's staff have access to the area and will be directly manning the facilities and providing services. However, security is unpredictable in Somalia and HIDIG will be closely monitoring the situation and will closely work with other actors to monitor the situation. HRDO has local based security plan so that its staff and facilities are safe and secure. Staff are informed to be on the look for any suspicious elements and report to authorities and also evacuate as necessary. HRDO will be participating in cluster forums and will be implementing all security advisories and shared briefings. In the event of untoward activities, HRDO will immediately notify the communities, local authority, the WASH Cluster and UNOCHA plus other actors in the area.

Access

HRDO is also in the area and is quite familiar with the situation on ground and communities. HRDO also runs facilities in neighboring districts in Bakool region with the collaboration of UNICEF and is familiar with these areas. HRDO's services will be strategically placed and thus easily 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	WASH project manager	D	1	2,000.00	6	100.00	12,000.00
	<i>The WASH manager will be a WASH expert who will be recruited through job advertisement. The WASH Manager is responsible of overall the project activities (implementation, management, reporting monthly, interim and final report of the project). The salary of the WASH manager is US\$2000 per month. WASH manger will work 100% on this project. SHF will pay 100% of his/her salary.</i>						
1.2	WASH project supervisors	D	1	500.00	6	100.00	3,000.00
	<i>The WASH project supervisor will be based in the field during the project duration. His/her main responsibilities includes but not limited to: Supervise day-to-day project activities; prepare meetings with the community, local authorities and other stakeholders; prepare daily work plan and activities reports; controls the workers, support the logistical needs of the project and submit to the WASH manager for approval; any other activities as directed by the WASH manager and WASH engineer. The salary of the WASH officer is US\$500/month. He/she spends 100% of his/her time this project. SHF will pay 100%.</i>						
1.3	WASH Engineer	D	1	2,000.00	6	100.00	12,000.00
	<i>The WASH Engineer will spend 100% of his work times on this project. His responsibilities include but not limited to: Responsible for all rehabilitation of WASH infrastructures, provide technical direction to the project staff, coordinate and supervise the implementation of the project construction works according to the international standard, prepare daily reports of the project construction/rehabilitation activities and submit to the project manager. The WASH Engineer's salary is US\$2000/month. SHF will pay 100%.</i>						
1.4	Hygiene promoters	D	2	300.00	6	50.00	1,800.00
	<i>HRDO with the consultation of the community leaders will select 2 qualified Hygiene Promoters from the community. The Hygiene Promoters should have good experience of Hygiene Promotion activities and background of health. The Hygiene Promoters will spend 100% of his/her working times to this project. His/her responsibilities to this project include but not limited to: community mobilization, hygiene promotion and cholera preparedness components of the project; develop community capacity to maximize and sustain health benefits from improvements in water and sanitation infrastructures; promote and facilitate healthy hygiene behavior throughout the community, including hand-washing, proper use of water and safe disposal of faeces; reinforce community capacity to respond rapidly and effectively to outbreaks of water-borne disease, especially Cholera; participate in training and supervising the community hygiene promoters on resource mobilization, hygiene promotion and cholera preparedness and response; oversee the implementation of community plans, including mobilization and motivation of Community Hygiene Promoters, and delivery of health promotion activities, contribute to the development of effective behavior change, supervise the activities of Community Hygiene Promoters in sensitizing communities in AWD/Cholera risk hot-spots on AWD/Cholera key messages; monitor the distribution of HP kits. The salary of Hygiene Promoter is USD300/month. SHF will pay 50% of the salary, while HRDO will cover the remaining 50%.</i>						
1.5	Community Hygiene Promoters	D	16	30.00	6	100.00	2,880.00
	<i>In consultation of the community elders, HRDO will identify and select 16 Community Hygiene promoters to promote hygiene promotion activities in the target villages . The Community Hygiene Promoters will be given incentives according to the WASH Cluster standard rate, which is US\$30/month. SHF will pay 100%</i>						
	Section Total						31,680.00
Supplies, Commodities, Materials							
2.1	Provision of water voucher	D	78165	0.03	60	100.00	140,697.00
	<i>The cost of the provision of water voucher includes: provision of 10,422 persons (around 1,737 households) to 7.5 liters/day/persons of safe water for a period of 60 days. The cost of 1 liter of safe water is USD0.03. Thus, the provided safe water is 10,422 persons x 7.5 liters/days = 78,165 liters/day. The total cost of the water voucher is USD140,697, SHF will pay 100% of the cost</i>						
2.2	Rehabilitation of shallow wells with animal troughs	D	3	4,775.50	1	100.00	14,326.50
	<i>Rehabilitate 3 flood proof shallow wells with animal troughs. The action includes: deepening of the shallow wells to at least 3 meters to increase the yield of the wells, lining the walls of the wells with concrete rings, construction of Reinforced concrete apron to improve the environmental sanitation of the well area, construction of canal for the drainage, construct the head of the wells with rubble stone at least 50cm above the ground to avoid flooding and water contamination, Chlorination will be undertaken in all the 3 shallow wells supplying water to ensure a positive residual chlorine at household level minimizing chances of contamination thus alleviating possible outbreak of AWD. Water quality testing on physical will be undertaken. The budget of this rehabilitation activities is US\$14,326.50. SHF will contribute 100%.</i>						
2.3	Construction of twin block latrines with hand washing facilities	D	4	3,975.00	1	100.00	15,900.00
	<i>The budget for the construction of latrines is USD15,900, which includes the cost of the construction materials (sand, stone, gravel, cement, iron bars and the cost of the labours (skilled and unskilled). SHF will contribute 100%.</i>						
2.4	WASH committees training	D	1	6,014.00	1	100.00	6,014.00

	<i>Conduct 5 days training to selected 3 WASH committees (21 WASH committees members), equal and active participation of both women and men will be encouraged to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committee will be trained based on water management manual which has many modules ranging from financial management, record keeping, tariff setting, operation and maintenance, different roles of women and men in the committee. The budget of the training is USD6,014, SHF will contribute 100%</i>						
2.5	Hygiene promotion training	D	1	3,768.00	1	100.00	3,768.00
	<i>5 days training of 16 (8men, 8 women) community hygiene promoters CHPs) and 2 Hygiene Promoters on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan. The budget for the training is USD3,768, SHF will contribute 100%.</i>						
2.6	Well operators training	D	1	1,054.00	1	100.00	1,054.00
	<i>Train 6 well operators (3 men and 3 women) from the constructed shallow well (2 well operators/shallow well), on maintenance and operation including changing oil, filters and revenue collection. The training budget is USD1,054, SHF will contribute 100%.</i>						
2.7	Hygiene promotion kits	D	1000	14.08	1	100.00	14,080.00
	<i>Purchase and distribute 1,000 hygiene promotion kits to 1,000 vulnerable AWD risk households. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs). The budget for the HP kits is USD14,080. SHF will contribute 100%</i>						
2.8	Sanitation kits	D	50	81.80	1	100.00	4,090.00
	<i>Purchase and distribute 50 sanitation kits to improve the environmental sanitation of the targeted villages to avoid the spread of AWD/cholera to targeted villages and upgrade its environmental sanitation. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes. The budget is 4,090, SHF will contribute 100%.</i>						
	Section Total						199,929.50
General Operating and Other Direct Costs							
7.1	Office stationery	S	1	314.00	6	20.00	376.80
	<i>the stationery used at HRDO sub office in Elberde. The estimation cost of the stationery is USD340/month. SHF will contribute 20% of the stationery cost while the remaining 80% cost will be covered to other ongoing projects in the district.</i>						
7.2	Communication cost	S	1	380.00	6	25.00	570.00
	<i>This will be use by the project manager and project supervisors at Elberde and the internet bil for monthly communication, which is costed at USD 380/month. SHF will contribute 25% of the cost while the remaining 75% cost will be covered to other ongoing projects in the district.</i>						
	Section Total						946.80
SubTotal			79,248.00				232,556.30
Direct							231,609.50
Support							946.80
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							16,278.94
Total Cost							248,835.24
Project Locations							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Bakool -> Ceel Barde -> El-Magad	14	270	450	540	540	1,800	Activity 1.1.1 : With the community elders, select the most vulnerable drought/AWD and displaced affected 9920 persons within the targeted villages, then identify water vendors sign with them MoU to provide water through voucher to assigned personals with identified ratio of water (the water deemed in voucher will be calculated in accordance to the size of the household multiply by 7.5lt/day). The water should be chlorinated and brought from recognized water point (the hygiene promoter officer will check the water point and select according to its water reliability).

Activity 1.1.2 : Rehabilitate 3 flood proof shallow wells with animal troughs. The action includes: deepening of the shallow wells to at least 3 meters to increase the yield of the wells, lining the walls of the wells with concrete rings, construction of Reinforced concrete apron to improve the environmental sanitation of the well area, construction of canal for the drainage, construct the head of the wells with rubble stone at least 50cm above the ground to avoid flooding and water contamination. Chlorination will be undertaken in all the 3 shallow wells to ensure positive residual chlorine at household level and minimize chances of contamination. Water quality testing on physical will also be undertaken within every month to alleviate possible outbreak of AWD. The water source should be equally accessible to men, women, boys and girls. The design and the location of the well will be consulted to the women and girls to reduce GBV.

Activity 1.1.3 : Conduct:

(1) 5 days training to selected 3 WASH committees with equal and active participation of both women and men, to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committees will be trained on water management including financial management, record keeping, tariff setting, operation and maintenance, DRR, different roles of women and men in the committees.

(2) 3 days training to 6 well operators (3 men and 3 women) each shallow well with 2 well operators on maintenance and operation including changing oil, filters and revenue collection.

Activity 2.1.2 : To improve the environmental sanitation of the targeted villages and avoid the spread of AWD/cholera to the targeted villages, distribute 50 sanitation kits to the village community committees (village community committees are composed men and women) to carry out routine clean-up campaigns. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes.

Activity 3.1.1 : The hygiene promotion activities will be conducted through the community hygiene promoters who have been trained on better hygiene promotion activities. More than 50% of CHPs are women, in order to be able to undertake household visits which mainly are female-headed. Trained 16 hygiene promoters will make house to house, health facilities, nutrition centers and schools visits. Regular hygiene campaigns will be conducted focusing on 3 key messages of hand washing with soap, safe excreta disposal including children feaces and safe chain water management. This will complement the chlorination and water quality monitoring to avert further contamination at household level, thus reducing chances of occurrence of AWD in the targeted villages.

Activity 3.1.2 : Organize and select 16 (8 men, 8 women) community hygiene promoters (CHPs) and 2 Hygiene Promoters (HPs). Conduct 5 days training the 16 CHPs and 2 HPs on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan.

Activity 3.1.3 : Provide 1,000 hygiene promotion kits to 1,000 vulnerable AWD risk households identified by the health facilities. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs).

Bakool -> Ceel Barde -> Figta	18	343	571	686	686	2,286	<p>Activity 1.1.1 : With the community elders, select the most vulnerable drought/AWD and displaced affected 9920 persons within the targeted villages, then identify water vendors sign with them MoU to provide water through voucher to assigned personals with identified ratio of water (the water deemed in voucher will be calculated in accordance to the size of the household multiply by 7.5lt/day). The water should be chlorinated and brought from recognized water point (the hygiene promoter officer will check the water point and select according to its water reliability).</p> <p>Activity 1.1.3 : Conduct: (1) 5 days training to selected 3 WASH committees with equal and active participation of both women and men, to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committees will be trained on water management including financial management, record keeping, tariff setting, operation and maintenance, DRR, different roles of women and men in the committees. (2) 3 days training to 6 well operators (3 men and 3 women) each shallow well with 2 well operators on maintenance and operation including changing oil, filters and revenue collection.</p> <p>Activity 2.1.2 : To improve the environmental sanitation of the targeted villages and avoid the spread of AWD/cholera to the targeted villages, distribute 50 sanitation kits to the village community committees (village community committees are composed men and women) to carry out routine clean-up campaigns. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes.</p> <p>Activity 3.1.1 : The hygiene promotion activities will be conducted through the community hygiene promoters who have been trained on better hygiene promotion activities. More than 50% of CHPs are women, in order to be able to undertake household visits which mainly are female-headed. Trained 16 hygiene promoters will make house to house, health facilities, nutrition centers and schools visits. Regular hygiene campaigns will be conducted focusing on 3 key messages of hand washing with soap, safe excreta disposal including children feaces and safe chain water management. This will complement the chlorination and water quality monitoring to avert further contamination at household level, thus reducing chances of occurrence of AWD in the targeted villages.</p> <p>Activity 3.1.2 : Organize and select 16 (8 men, 8 women) community hygiene promoters (CHPs) and 2 Hygiene Promoters (HPs). Conduct 5 days training the 16 CHPs and 2 HPs on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan.</p> <p>Activity 3.1.3 : Provide 1,000 hygiene promotion kits to 1,000 vulnerable AWD risk households identified by the health facilities. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs).</p>
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Bakool -> Ceel Barde -> Baadikeen	12	222	370	445	445	1,482	<p>Activity 1.1.1 : With the community elders, select the most vulnerable drought/AWD and displaced affected 9920 persons within the targeted villages, then identify water vendors sign with them MoU to provide water through voucher to assigned personals with identified ratio of water (the water deemed in voucher will be calculated in accordance to the size of the household multiply by 7.5lt/day). The water should be chlorinated and brought from recognized water point (the hygiene promoter officer will check the water point and select according to its water reliability).</p> <p>Activity 1.1.3 : Conduct: (1) 5 days training to selected 3 WASH committees with equal and active participation of both women and men, to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committees will be trained on water management including financial management, record keeping, tariff setting, operation and maintenance, DRR, different roles of women and men in the committees. (2) 3 days training to 6 well operators (3 men and 3 women) each shallow well with 2 well operators on maintenance and operation including changing oil, filters and revenue collection.</p> <p>Activity 2.1.2 : To improve the environmental sanitation of the targeted villages and avoid the spread of AWD/cholera to the targeted villages, distribute 50 sanitation kits to the village community committees (village community committees are composed men and women) to carry out routine clean-up campaigns. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes.</p> <p>Activity 3.1.1 : The hygiene promotion activities will be conducted through the community hygiene promoters who have been trained on better hygiene promotion activities. More than 50% of CHPs are women, in order to be able to undertake household visits which mainly are female-headed. Trained 16 hygiene promoters will make house to house, health facilities, nutrition centers and schools visits. Regular hygiene campaigns will be conducted focusing on 3 key messages of hand washing with soap, safe excreta disposal including children feaces and safe chain water management. This will complement the chlorination and water quality monitoring to avert further contamination at household level, thus reducing chances of occurrence of AWD in the targeted villages.</p> <p>Activity 3.1.2 : Organize and select 16 (8 men, 8 women) community hygiene promoters (CHPs) and 2 Hygiene Promoters (HPs). Conduct 5 days training the 16 CHPs and 2 HPs on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan.</p> <p>Activity 3.1.3 : Provide 1,000 hygiene promotion kits to 1,000 vulnerable AWD risk households identified by the health facilities. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs).</p>
Bakool -> Ceel Barde -> Qurac Joome	38	720	1,200	1,440	1,440	4,800	<p>Activity 1.1.1 : With the community elders, select the most vulnerable drought/AWD and displaced affected 9920 persons within the targeted villages, then identify water vendors sign with them MoU to provide water through voucher to assigned personals with identified ratio of water (the water deemed in voucher will be calculated in accordance to the size of the household multiply by 7.5lt/day). The water should be chlorinated and brought from recognized water point (the hygiene promoter officer will check the water point and select according to its water</p>

reliability).

Activity 1.1.2 : Rehabilitate 3 flood proof shallow wells with animal troughs. The action includes: deepening of the shallow wells to at least 3 meters to increase the yield of the wells, lining the walls of the wells with concrete rings, construction of Reinforced concrete apron to improve the environmental sanitation of the well area, construction of canal for the drainage, construct the head of the wells with rubble stone at least 50cm above the ground to avoid flooding and water contamination. Chlorination will be undertaken in all the 3 shallow wells to ensure positive residual chlorine at household level and minimize chances of contamination. Water quality testing on physical will also be undertaken within every month to alleviate possible outbreak of AWD. The water source should be equally accessible to men, women, boys and girls. The design and the location of the well will be consulted to the women and girls to reduce GBV.

Activity 1.1.3 : Conduct:

(1) 5 days training to selected 3 WASH committees with equal and active participation of both women and men, to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committees will be trained on water management including financial management, record keeping, tariff setting, operation and maintenance, DRR, different roles of women and men in the committees.

(2) 3 days training to 6 well operators (3 men and 3 women) each shallow well with 2 well operators on maintenance and operation including changing oil, filters and revenue collection.

Activity 2.1.1 : Construct flood proof, desludgable, gender sensitive 4-twin block latrines to two MCHs in Qoracjome and Abeesale villages at Elberde district. The design and the location of the latrines should be appropriate to women, men, boys, girls, aged and disabled. The latrines should have lockable doors and hand washing basin.

Activity 2.1.2 : To improve the environmental sanitation of the targeted villages and avoid the spread of AWD/cholera to the targeted villages, distribute 50 sanitation kits to the village community committees (village community committees are composed men and women) to carry out routine clean-up campaigns. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes.

Activity 3.1.1 : The hygiene promotion activities will be conducted through the community hygiene promoters who have been trained on better hygiene promotion activities. More than 50% of CHPs are women, in order to be able to undertake household visits which mainly are female-headed. Trained 16 hygiene promoters will make house to house, health facilities, nutrition centers and schools visits. Regular hygiene campaigns will be conducted focusing on 3 key messages of hand washing with soap, safe excreta disposal including children feaces and safe chain water management. This will complement the chlorination and water quality monitoring to avert further contamination at household level, thus reducing chances of occurrence of AWD in the targeted villages.

Activity 3.1.2 : Organize and select 16 (8 men, 8 women) community hygiene promoters (CHPs) and 2 Hygiene Promoters (HPs). Conduct 5 days training the 16 CHPs and 2 HPs on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan.

Activity 3.1.3 : Provide 1,000 hygiene promotion

								kits to 1,000 vulnerable AWD risk households identified by the health facilities. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs).
Bakool -> Ceel Barde -> Abeesale	18	334	558	670	670	2,232		<p>Activity 1.1.1 : With the community elders, select the most vulnerable drought/AWD and displaced affected 9920 persons within the targeted villages, then identify water vendors sign with them MoU to provide water through voucher to assigned personals with identified ratio of water (the water deemed in voucher will be calculated in accordance to the size of the household multiply by 7.5lt/day). The water should be chlorinated and brought from recognized water point (the hygiene promoter officer will check the water point and select according to its water reliability).</p> <p>Activity 1.1.2 : Rehabilitate 3 flood proof shallow wells with animal troughs. The action includes: deepening of the shallow wells to at least 3 meters to increase the yield of the wells, lining the walls of the wells with concrete rings, construction of Reinforced concrete apron to improve the environmental sanitation of the well area, construction of canal for the drainage, construct the head of the wells with rubble stone at least 50cm above the ground to avoid flooding and water contamination. Chlorination will be undertaken in all the 3 shallow wells to ensure positive residual chlorine at household level and minimize chances of contamination. Water quality testing on physical will also be undertaken within every month to alleviate possible outbreak of AWD. The water source should be equally accessible to men, women, boys and girls. The design and the location of the well will be consulted to the women and girls to reduce GBV.</p> <p>Activity 1.1.3 : Conduct: (1) 5 days training to selected 3 WASH committees with equal and active participation of both women and men, to ensure reflection of both genders in decision-making. each committee composes (3 women and 4 men). The WASH committees will be trained on water management including financial management, record keeping, tariff setting, operation and maintenance, DRR, different roles of women and men in the committees. (2) 3 days training to 6 well operators (3 men and 3 women) each shallow well with 2 well operators on maintenance and operation including changing oil, filters and revenue collection.</p> <p>Activity 2.1.1 : Construct flood proof, desludgable, gender sensitive 4-twin block latrines to two MCHs in Qoracjome and Abeesale villages at Elberde district. The design and the location of the latrines should be appropriate to women, men, boys, girls, aged and disabled. The latrines should have lockable doors and hand washing basin.</p> <p>Activity 2.1.2 : To improve the environmental sanitation of the targeted villages and avoid the spread of AWD/cholera to the targeted villages, distribute 50 sanitation kits to the village community committees (village community committees are composed men and women) to carry out routine clean-up campaigns. Each village will be distributed 10 sets of sanitation kits; each kit is composed 1 wheel barrow, 1 barrel, 1 shovel, 1 pick axe, 1 spade, 4 barrooms, 4 bucket and 2 rakes.</p> <p>Activity 3.1.1 : The hygiene promotion activities will be conducted through the community hygiene promoters who have been trained on better hygiene promotion activities. More than 50% of CHPs are women, in order to be able to undertake household visits which mainly are female-headed. Trained 16 hygiene promoters will make house to house, health facilities, nutrition centers and schools visits. Regular</p>

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Activity 3.1.2 : Organize and select 16 (8 men, 8 women) community hygiene promoters (CHPs) and 2 Hygiene Promoters (HPs). Conduct 5 days training the 16 CHPs and 2 HPs on hygiene and sanitation awareness methods including hand washing with soap, using WASH cluster manuals and WASH cluster AWD/cholera preparedness and response plan.

Activity 3.1.3 : Provide 1,000 hygiene promotion kits to 1,000 vulnerable AWD risk households identified by the health facilities. Each HP kit contains (1 Jerry can, 1 Bucket, 3 soaps and 200 aqua tabs).

Documents

Category Name	Document Description
Budget Documents	BOQ WASH _ 2017.xls
Budget Documents	Revised BOQ WASH _ 22feb17.xls
Budget Documents	HRDO - BOQ WASH _ HFU comments.xls
Budget Documents	Revised BOQ WASH _ 24feb17.xls
Budget Documents	HRDO - BOQ WASH _ HFU comments with HRDO response 28feb17.xls
Budget Documents	HRDO - BOQ WASH _ Final.xls
Grant Agreement	HC signed HRDO GA.pdf
Grant Agreement	HRDO Signed MOU Wash.pdf