

Requesting Organization :	Cooperazione Internazionale - COOPI	
Allocation Type :	Standard Allocation 1 (Jan 2017)	
Primary Cluster	Sub Cluster	Percentage
Water, Sanitation and Hygiene		100.00
		100

Project Title :	EMERGENCY AND SUSTAINED ACCESS TO WATER AND PROMOTION OF HYGIENE PRACTICES AMONG THE DROUGHT AFFECTED HOUSEHOLDS IN LUUQ, GEDO REGION.
Allocation Type Category :	

OPS Details

Project Code :		Fund Project Code :	SOM-17/3485/SA1 2017/WASH/INGO/4548
Cluster :		Project Budget in US\$:	228,371.54
Planned project duration :	6 months	Priority:	
Planned Start Date :	24/03/2017	Planned End Date :	24/09/2017
Actual Start Date:	24/03/2017	Actual End Date:	24/09/2017

Project Summary :	Drought has affected pastoral and riverine communities in Luuq district which has led to reduced water supply to population. Several sources of water in the region have dried up due to drought and communities are travelling for long distances in search of water. Available water sources has experienced pressure from both human and domestic and thus has a high chances of being contaminated. This proposed intervention aims at improving access to sustained access to safe water and prevent incidences of AWD through provision of safe water and intensive hygiene promotion program. The project shall also target public institutions (schools and health facilities) through, multi - sectoral approach in coordination with other projects in Health, WASH, Food Security and protection.
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Direct beneficiaries :

Men	Women	Boys	Girls	Total
1,891	3,115	3,003	3,115	11,124

Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Pastoralists	1,891	3,115	3,003	3,115	11,124

Indirect Beneficiaries :
Catchment Population:
Link with allocation strategy :

The current allocation is in response to scaling up WASH lifesaving interventions in response to the ongoing drought to mitigate the risk of WASH related disease outbreaks, in particular AWD/cholera. The target area for intervention is in line with SHF focused areas of Gedo region. The proposed activities of this project will respond to three proposed SHF funded activities which includes; water trucking, construction/rehabilitation of shallow wells, distribution of WASH supplies (Hygiene kits) and Hygiene awareness raising focusing on household water treatment/behavior change. The project activities will promote immediate access to safe and clean water as well as promoting prevention of incidences of AWD in the target locations. The project will target the most vulnerable households in the community.

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
Deka Warsame	Regional Representative	rep.nairobi@coopi.org	+254 724255324

BACKGROUND**1. Humanitarian context analysis**

Severe drought, poor harvests, limited access to water and pasture resources, poor livestock conditions and dry forecasts, linked with rising prices for food and water, large-scale displacement, ongoing insecurity and lack of basic services "suggest famine is possible in 2017" in the most drought-affect areas (FEWSNET and FSNAU, 2016. In the South, the Deyr 2016 seasonal rainfall commenced in good time from mid-October but performed poorly in terms of frequency, distribution and amount. In October, rains were largely erratic in terms of intensity, temporal and spatial distribution for all livelihood zones in southern Somalia. Most areas received cumulative amounts of 25-150 mm rainfall. Overall, the enhanced rains partially replenished water sources and supported pasture rejuvenation and crop development in rained areas in southern Somalia.

Since August 2016, water trucking has been widespread in most of the Berkad dependent pastoral livelihoods in central regions (Hawd and Addun livelihood zones), as most surface water catchments did not replenish well. Livestock body conditions are largely below average to poor (PET Score 2-1), owing to poor pasture, water crisis, limited migration option and drought induced diseases. According to field reports from NIP, there is high livestock off take (death and distress sell). Most animals are concentrated near permanent water points, where large number of livestock carcasses are observable. Livestock holding of all wealth groups have reduced in most livelihoods in the north and parts of southern Somalia. Significant livestock loss has been reported in NIP livelihood and further decline is expected through Jilaal (January-March) (FSNAU, December 2016).

As a result of the prevailing drought, most water sources have dried up or reduced in yields including River Juba which is the main water source in Gedo region. Other water sources in the region are boreholes, shallow wells and water catchments. Due to persistent drought in the region most of these water points have dried up and the level of water in River Juba have gone low compelling the pastoralists and agro-pastoralist communities to travel long distances in search of water for domestic use and livestock. Every year particularly, during Jilal season the level of water in the river, bore holes and shallow wells remain low and of poor quality. The high evaporation rates leads to salinity of water making it unpleasant for human and livestock consumption. The few water points in the region are often overcrowded, hence increasing time taken to get water (Gedo Health Consortium, 2016).

2. Needs assessment

COOPI in January 2017, carried out a rapid assessment to establish the extent of WASH needs in Gedo region, specifically in Luuq district. The assessments revealed that: (1) the nearest well to the assessed IDP settlements is 1 kilometer away; Average water consumption per household is 11 liters/HH/day, which is below the minimum SPHERE standards (7.5l/person); (2) 62% of the population do not have access to safe water due to the price of the water, which is expensive. The price of 20 liters Jerry can is Ssh 1800 (around US\$0.09); the minimum water need per household is 45 liters/day at price of Ssh. 4,500 (around US\$0.225), which the cannot afford. Inadequate water comprises personal and domestic hygiene and puts the population at risk of AWD and malnutrition. (3) Household water treatment is low (11%) with no separate containers for collection and storage water; (4) IDPs have almost no latrines for instant 7 IDP settlements have only two latrines constructed by ACF and view communal latrines, thus resulting to wide spread of WASH related disease; (5) IDP settlements have increased population stretching the sanitation capacity in terms of waste management, which was further complicated by the absence of waste disposal sites; (6) Community knowledge on hygiene and sanitation was very poor; (7) Schools have no proper access to segregated sanitation facilities.

Inter agency assessment carried out in Gedo in September 2016 revealed that 60 per cent of villages collected water from rivers, 30 per cent relied on shallow wells and 10 per cent on tap (piped) water, indicating that a high percentage (90 per cent) of the local population accessed and used unsafe water sources for drinking and domestic purposes. Also, most respondents trekked long distances to collect water for their households. 14 per cent of respondents did not have access to reliable water source all year round because safe water sources were far away approximately 15 to 35 kilometers (km) or privately owned systems. Also, 75 per cent of the local population did not treat water. This problem has been worsen by current drought which require urgent intervention to save the community from impending serious humanitarian consequences such as AWD.

There is need to increase access to safe water and carry out hygiene promotion to reduce outbreak of AWD, malnutrition and gender based violence. Target locations and number of beneficiaries for this project were selected from the locations covered by COOPI baseline survey conducted in January 2017

3. Description Of Beneficiaries

The project targets drought affected and most vulnerable persons and families in humanitarian emergency and crisis as per IPC classification. The drought has affected most of the households in Luuq district. However the most affected are pastoral and riverine communities which comprise of IDPs and urban and rural poor host communities. The project will target the most vulnerable IDP households from all social groups, boys, girls, men, and women. Apart from IDPs, the project will target most drought affected vulnerable host communities in Luuq. This will include poor rural and urban households. The project will ensure that design of activities is informed by a thorough analysis of gender and cultural dynamics across different livelihoods groups. In addition, the involvement of women, youth, IDPs and marginalized host community in decision making will be promoted.

4. Grant Request Justification

The identified needs in the target locations include AWD incidences, high levels of malnutrition, limited access to safe water sources, poor access to sanitation facilities, low levels of knowledge in good hygiene practices, and sustainability of the WASH infrastructure. To ensure reduction of incidences of AWD and malnutrition of the children, this project will enhance access to safe and sustainable WASH services based in the needs analysis. The proposed intervention for immediate availability of water to the target beneficiaries will be water trucking, hygiene kits distribution, and rehabilitation of existing WASH infrastructure. Water trucking will provide immediate water requirement to the affected household to meet SPHERE standards of 7.5L/person/day. Hygiene kit distribution which will comprise of 20L jerry can, aqua taps and soap will enable beneficiaries to store and have clean water supply within the household and maintain cleanliness. Hand dug wells will be an appropriate source of water in the target villages since the available water sources are limited and overcrowded by both human and livestock. To promote behaviour change and prevention of AWD incidences, the project will carry out health and hygiene promotion with dissemination of key hygiene practices messages in all communities. Hygiene promotion and advocacy will be complemented by distribution of hygiene kits.. The project will take deliberate measures to ensure gender parity of the beneficiaries in participation and decision-making; women will be involved in identification of sites for construction of sanitation facilities and garbage collection. COOPI is currently implementing emergency livelihood project in some of the target locations and this project will complement the livelihood activities. Targeting of beneficiaries will be coordinated with nutrition and food security actors/clusters and includes the following categories; new IDPs arriving in the target locations either due to forced eviction or protracted conflict, households headed by poor females, child headed households, people living with disabilities, poor elderly people, sickly, poor pregnant and lactating mothers.

5. Complementarity

Currently COOPI is implementing ECHO funded Integrated Emergency preparedness and response for population in emergencies and crisis in South central Somalia (EPR III) in Baidoa, Dollow and Luuq districts. This program is aimed at improving food security, nutritional status, access to safe WASH services and to strengthen the resilience of the most vulnerable populations in emergencies and crisis in South-Central Somalia. WASH activities include pipeline extension, rehabilitation of open HDWs, construction of gender sensitive latrines, capacity building of community WASH management committees and hygiene promotion in 9 IDP locations in Baidoa. COOPI has selected some of the locations for this SHF allocation for integration where possible. The proposed project shall complement the ongoing WASH interventions in the target IDP locations to increase synergy and to effectively address the gaps in the locations not targeted by ongoing livelihoods and food security interventions to ensure multisectoral response. WES committee trained under the ongoing project will oversee management of the new water facilities while trained CHPs will be utilized to scale up promotion of hygiene activities. COOPI will further coordinate with active partners in Luuq and Dollow implementing WASH, Food Security, Nutrition, Protection and Education projects to ensure multi-sectoral integrated response to address nutrition causal factors affecting the IDPS and host communities, reduce risk of AWD outbreak and ease pressure on basic services.

LOGICAL FRAMEWORK

Overall project objective

To improve the living conditions of men, women and children IDPs and host community members who are at risk of AWD/cholera diseases in Gedo region – Luuq district through an integrated WASH response by increasing sustained access to safe water, appropriate sanitation and promoting good hygiene practices.

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	50
Provide reliable and sustained access to sufficient safe water-based on identified strategic water points and establishment of sustainable management structures	Somalia HRP 2017	50

Contribution to Cluster/Sector Objectives : Sector Objective 1: Provide access to safe water, sanitation and hygiene for people in emergency need.

Strategic water trucking coupled with rehabilitation of hand dug well and construction of new hand dug well as well as distribution of hygiene kits will promote access to availability of clean drinking water and maintenance of hygiene standards. Intensive hygiene awareness promotion of influencing behaviour change of the beneficiaries to adopt good hygiene practices will prevent AWD incidences.

Sector Objective 2: Provide reliable and sustained access to sufficient safe water based on identified strategic water points and establishment of sustainable management structures

At least 12 strategic water sources (12 new hand dug wells and 8 rehabilitated hand dug well) shall be targeted within the identified villages to serve vulnerable pastoral and riverine communities during emergencies. Daily water trucking within the target area for 90 days will be carried out. This will effectively ease pressure not only on limited basic services to new & protracted IDPs but also to the host communities. Use of trained WES n=management committee will ensure sustainable management of water infrastructure

Outcome 1

Increased and Sustained access to Safe Water for 11,124 persons (1,891 men, 3,115 women, 3,003 boys, 3,115 girls) IDPs in Crisis at Luuq district to reduce incidences of AWD, malnutrition and GBV affecting mainly women/girls.

Output 1.1

Description

At least 1,854HHs 11,124 persons (1,891 men, 3,115 women, 3,003 boys, 3,115 girls) have access to safe water through water trucking and rehabilitation/construction of shallow wells thus increasing water access to vulnerable households and reducing incidence of AWD and malnutrition.

Assumptions & Risks

- Stable civil security;
- Community acceptance and participation
- No widespread and continued conflict;
- No exceptional climatic shocks;
- Availability of good quality and quantity underground water

Activities

Activity 1.1.1

Standard Activity : Water trucking/water Vouchers

Provision of water trucking (45Liters/HH/day) to 1,195HHs to increase immediate access to clean and safe water for human and domestic use. The project will provide selected families with 45Lts of safe water supply per day for 3 months (or appropriate period as per needs) to complement own supply. Cluster guidelines recommend 7.5 l/person/day during emergencies. Distribution will take into consideration the most affected target villages far from any available water point. New IDP camps will be given consideration as first priority as well as vulnerable households. A central location will be identified for distribution as women and children are expected to collect water from trucks. Due to the ongoing drought, water sources have diminished in pastoral and riverine locations in Luuq District and communities are facing acute need of water for domestic use. Poor vulnerable families who cannot afford the high cost of water are forced to reduce consumption (compromising hygiene) or use water from unsafe sources. COOPI participates in joint WASH cluster & REACH water price monitoring in Gedo and would amend water voucher values as per price adjustments. Through a competitive process COOPI would identify water vendors with capacity to provide safe and clean water to the beneficiaries. Action adopts do-no-harm principles. Continuous monitoring of water access and prices in target locations will ensure that there are no market distortions due to project activities, and also no unethical practices by vendors and/or staff.

Complementary distribution of jerry cans for safe water storage and hygiene kits is anticipated. Attention will be paid to size and type of jerry cans and will be adapted to specific needs of women and girls who mostly draw water at HH level. Water supply systems will be rehabilitated at some of the locations as possible to serve as exit strategy to the emergency supply. This activity complements other action activities to ensure comprehensive assistance to create positive public health impact for targeted vulnerable families.

Activity 1.1.2

Standard Activity : Water point construction or rehabilitation

Construct 12 hand dug wells and rehabilitation of 8 hand dug wells to increase availability/ access to safe water through deepening and protection of hand dug wells located in strategic locations. Wells will be constructed in selected locations/ settlement in consultation with beneficiaries to identify central location for the exercise. Designs will consider usage by children. Women and girls will be involved in locating safe sites for the construction of the kiosk guided by COOPI engineer to ensure safety (hence reduce risk to GBV) and convenience by ensuring distance to nearest water point is within the SPHERE standards. This activity aims at increasing access to sufficient and safe water supply services for 1,333HHs HHs (8000 persons) who are facing challenges in accessing safe water for domestic use, and are hence exposed to AWD/cholera and malnutrition, especially in children <5 years old. The activity also serves as exit strategy in some locations where emergency water supply will take place. The activity focuses on rehabilitation of existing sources and adapts proven locally appropriate technological options. Works will be preceded by feasibility assessments for: technical viability, environmental impacts, a technological options and local management capacities. Technical assessments, and designs for the infrastructure will be done by COOPI technical staff involving beneficiaries including identification of sites and accessibility by persons living with disabilities have smooth pathways for access. The civil works will be contracted to qualified local artisans or contractors through competitive process and involving beneficiaries. All the works will be supervised by technical staff and all HDWs installed with hand pumps for protection. To enhance sustainability of the water facilities, water user committees and hand pump caretakers will receive on the job operations & maintenance training. The action will promote private sector participation in operation of water systems where feasible to promote sustainability. Works will be certified on completion before formal hand-over to the community. Relevant information on works will be provided to SWALIM and the cluster (through the 4W matrix).

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 sustained access to safe water					8,000

Means of Verification : - Field visit report
 - Number of completed water sources
 - Number of people accessing developed water sources
 - Photos

Indicator 1.1.2	Water, Sanitation and Hygiene	Number of strategic water sources dug and working					12
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Means of Verification : - Field visit report
 - GPS data HDW
 - Drilling completion certification
 - Number of completed water sources
 - Number of people accessing developed water sources
 - Photos

Indicator 1.1.3	Water, Sanitation and Hygiene	Number of rehabilitated hand dug wells					8
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Means of Verification : - Field visit report
 - GPS data HDW
 - Drilling completion certification
 - Number of completed water sources
 - Number of people accessing developed water sources
 - Photos

Outcome 2							
Improved Hygiene and Sanitation awareness promotion to increase knowledge and practice of appropriate sanitation and hygiene behaviors targeting IDPs and host communities.							
Output 2.1							
Description							
11,124 persons (1,891 men, 3,115 women, 3,003 boys, 3,115 girls) increased their knowledge on preventive measures to WASH related diseases by implementing appropriate comprehensive hygiene promotion activities with increased widespread adaption of safe hygiene practices both at public and household level to practice safe hygiene by participating in hygiene promotion campaigns (e.g. door to door campaigns, institutional campaigns and public awareness activities) by the end of the project.							
Assumptions & Risks							
<ul style="list-style-type: none"> • Stable civil security; • Community acceptance and participation • No widespread and continued conflict; • No exceptional climatic shocks; • Accountability is maintained and there is no diversion of beneficiary entitlements 							
Activities							
Activity 2.1.1							
Standard Activity : Community Hygiene promotion							
Conduct comprehensive Hygiene promotion and mobilization on AWD/Cholera prevention measures to 11,124 persons AWD/Cholera risk men, women, boys and girls through house to house, schools, health and nutrition centers' visits using trained CHPs and approved MoH FGS IEC materials. Each of the 21CHPs will reach 500 persons for every month by visiting house-to-house, schools, health centers, feeding and nutrition centers and community gatherings. The HP will supervise, evaluate and give consultations and guidance to the CMs in accordance to WASH cluster guideline and promotion of hand washing with soaps. KAP survey will be done at the inception and the completion of the project to evaluate the effectiveness of the HP intervention.							
Activity 2.1.2							
Standard Activity : Hygiene kit distribution (complete kits of hygiene items)							
With consultation of the IDP committees, identify the most vulnerable IDP households and Support to promote HHWT, safe water collection and storage to AWD risk men, women, boys and girls through distribution of 1000 Hygiene kits to 1000 HHs; each Hygiene kit contains (200 aqua tabs, 1 Jerry can (20L), 1 bucket, 3 bars of soap). The action will include support the household the use of the aqua tabs and encourage the private companies/chemists to bring the market aqua tabs and other water treatment chemicals. To complement hygiene promotion by CHPs and inspire behaviour change, hygiene items will be distributed to the most vulnerable HHs affected or at risk of AWD (female/child headed households, pregnant and lactating mothers, households with malnutrition child or with cases of AWD). The hygiene items will be provided as per cluster guidelines, and will contain; jerry cans and buckets for safe collection and storage of drinking water; aquatabs for household water treatment, and soap to promote hand washing during critical moments. Distribution of the hygiene items will be planned based on AWD seasonality calendar to prevent outbreak. In the event of AWD/Cholera outbreak, project team will access prepositioned supplies from Regional Supply hub in Baidoa and shall coordinate with other WASH partners to ensure effective response.							
Indicators							
			End cycle beneficiaries				End cycle
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target
Indicator 2.1.1	Water, Sanitation and Hygiene	Number of people who have participated in hygiene promotion activities					11,124
Means of Verification : - Training report - List of participants - Photos							
Indicator 2.1.2	Water, Sanitation and Hygiene	Number of beneficiaries that receive hygiene items by project end					1,000
Means of Verification : - List of beneficiaries - List of items supplied - Photos							
Indicator 2.1.3	Water, Sanitation and Hygiene	Number of Hygiene kits distributed					1,000
Means of Verification : - List of beneficiaries - List of supplies - Photos							
Additional Targets :							
M & R							
Monitoring & Reporting plan							

The Project Manager will develop a detailed monitoring plan and participatory monitoring tools to ensure all the stakeholders including the beneficiaries participate in M&E of the activities. At the inception of project sensitization and coordination meetings will be held with all stakeholders to officially launch the project. Participatory monitoring and evaluation will be employed with regard to frequency, keeping track/ assessing the effectiveness of the interventions with the aim of working within and where necessary adjusting the work plan to enhance efficiency and realization of project objectives. Our project M&E Officer together with the program team and beneficiaries will employ routine information gathering systems through weekly field/site visits, prepare progress reports, carry out rapid monthly assessments on project activities. The field's reports will be sent to the Program Manager who will then assemble the project team to analyze and match actual reporting with indicators in the LFM (Logical Framework Matrix) and project activities in the work plan. Disparities will be explained and appropriate remedial action taken in consultation with the program manager. In this project, COOPI will use four tier level monitoring approaches will include; reporting against agree work plan, staff field visit, meetings, supervision and technical support, Baseline assessment and post project assessment will be conducted to measure the impact of the intervention and lastly Community Feedback and Response Mechanism (CFRM) to check on satisfaction, curb aid diversion and re-evaluation and possible re-adjustments of the intervention. The PM develops a detailed monitoring plan and participatory monitoring tools to ensure all the stakeholders including the beneficiaries participate in M&E of the activities. KAP surveys will be conducted in the target locations at the inception/completion of the project to form basis for monitoring hygiene promotion component. Telephone numbers of community members, CHPs, WASH committee members and authorities will be collected to allow independent and remote monitoring to OCHA, WC and COOPI top management. Monitoring reports of project activities accompanied by photographic evidence with GPS tags (before start, ongoing and completion) will be sent to the COOPI program director and OCHA for evidence. Project Manager and the other project staff will monitor the hygiene promotion activities carried out by the CHPs using variety tools such as daily monitoring tools to record population reached based on gender, weekly reporting of AWD and hygiene kits distribution forms signed by the beneficiaries will be kept for evidence. COOPI will develop elaborate beneficiary complain and feedback tool, project beneficiaries and stakeholders will be given 1 day workshop on how to use the complaint / feedback system to enhance transparency and accountability. Monthly and quarterly progress reports with photographic evidence by the project team to inform COOPI senior management on progress and support requirements will be developed. The target locations are accessible, thus the PM will make day-to-day site visits to supervise and monitor progress. COOPI regularly update the 4W matrix and inform the WASH cluster and OCHA on the progress. Finally, the IDP committees will sign off on progress and completion of the project, witnessed (co-signed) by IDP Chairman. In addition to internal monitoring, COOPI will hire an independent monitoring person/firm to monitor and evaluate the project activities and its impact. COOPI will organize joint monitoring missions with OCHA/WASH cluster partners after the project is completed. All reports required to CHF secretariat will be provided and suggestions fed back into the implementation process as necessary.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
<p>Activity 1.1.1: Provision of water trucking (45Liters/HH/day) to 1,195HHs to increase immediate access to clean and safe water for human and domestic use. The project will provide selected families with 45Lts of safe water supply per day for 3 months (or appropriate period as per needs) to complement own supply. Cluster guidelines recommend 7.5 l/person/day during emergencies. Distribution will take into consideration the most affected target villages far from any available water point. New IDP camps will be given consideration as first priority as well as vulnerable households. A central location will be identified for distribution as women and children are expected to collect water from trucks. Due to the ongoing drought, water sources have diminished in pastoral and riverine locations in Luuq District and communities are facing acute need of water for domestic use. Poor vulnerable families who cannot afford the high cost of water are forced to reduce consumption (compromising hygiene) or use water from unsafe sources. COOPI participates in joint WASH cluster & REACH water price monitoring in Gedo and would amend water voucher values as per price adjustments. Through a competitive process COOPI would identify water vendors with capacity to provide safe and clean water to the beneficiaries. Action adopts do-no-harm principles. Continuous monitoring of water access and prices in target locations will ensure that there are no market distortions due to project activities, and also no unethical practices by vendors and/or staff. Complementary distribution of jerry cans for safe water storage and hygiene kits is anticipated. Attention will be paid to size and type of jerry cans and will be adapted to specific needs of women and girls who mostly draw water at HH level. Water supply systems will be rehabilitated at some of the locations as possible to serve as exit strategy to the emergency supply. This activity complements other action activities to ensure comprehensive assistance to create positive public health impact for targeted vulnerable families.</p>	2017			X	X	X	X	X	X				

<p>Activity 1.1.2: Construct 12 hand dug wells and rehabilitation of 8 hand dug wells to increase availability/ access to safe water through deepening and protection of hand dug wells located in strategic locations. Wells will be constructed in selected locations/ settlement in consultation with beneficiaries to identify central location for the exercise. Designs will consider usage by children. Women and girls will be involved in locating safe sites for the construction of the kiosk guided by COOPI engineer to ensure safety (hence reduce risk to GBV) and convenience by ensuring distance to nearest water point is within the SPHERE standards. This activity aims at increasing access to sufficient and safe water supply services for 1,333HHs HHs (8000 persons) who are facing challenges in accessing safe water for domestic use, and are hence exposed to AWD/cholera and malnutrition, especially in children <5 years old. The activity also serves as exit strategy in some locations where emergency water supply will take place. The activity focuses on rehabilitation of existing sources and adapts proven locally appropriate technological options. Works will be preceded by feasibility assessments for: technical viability, environmental impacts, a technological options and local management capacities. Technical assessments, and designs for the infrastructure will be done by COOPI technical staff involving beneficiaries including identification of sites and accessibility by persons living with disabilities have smooth pathways for access. The civil works will be contracted to qualified local artisans or contractors through competitive process and involving beneficiaries. All the works will be supervised by technical staff and all HDWs installed with hand pumps for protection. To enhance sustainability of the water facilities, water user committees and hand pump caretakers will receive on the job operations & maintenance training. The action will promote private sector participation in operation of water systems where feasible to promote sustainability. Works will be certified on completion before formal hand-over to the community. Relevant information on works will be provided to SWALIM and the cluster (through the 4W matrix).</p>	2017			X	X	X	X	X	X								
<p>Activity 2.1.1: Conduct comprehensive Hygiene promotion and mobilization on AWD/Cholera prevention measures to 11,124 persons AWD/Cholera risk men, women, boys and girls through house to house, schools, health and nutrition centers' visits using trained CHPs and approved MoH FGS IEC materials. Each of the 21CHPs will reach 500 persons for every month by visiting house-to-house, schools, health centers, feeding and nutrition centers and community gatherings. The HP will supervise, evaluate and give consultations and guidance to the CMs in accordance to WASH cluster guideline and promotion of hand washing with soaps. KAP survey will be done at the inception and the completion of the project to evaluate the effectiveness of the HP intervention.</p>	2017			X	X	X	X	X									
<p>Activity 2.1.2: With consultation of the IDP committees, identify the most vulnerable IDP households and Support to promote HHWT, safe water collection and storage to AWD risk men, women, boys and girls through distribution of 1000 Hygiene kits to 1000 HHs; each Hygiene kit contains (200 aqua tabs, 1 Jerry can (20L), 1 bucket, 3 bars of soap). The action will include support the household the use of the aqua tabs and encourage the private companies/chemists to bring the market aqua tabs and other water treatment chemicals. To complement hygiene promotion by CHPs and inspire behaviour change, hygiene items will be distributed to the most vulnerable HHs affected or at risk of AWD (female/child headed households, pregnant and lactating mothers, households with malnutrition child or with cases of AWD). The hygiene items will be provided as per cluster guidelines, and will contain; jerry cans and buckets for safe collection and storage of drinking water; aquatabs for household water treatment, and soap to promote hand washing during critical moments. Distribution of the hygiene items will be planned based on AWD seasonality calendar to prevent outbreak. In the event of AWD/Cholera outbreak, project team will access prepositioned supplies from Regional Supply hub in Baidoa and shall coordinate with other WASH partners to ensure effective response.</p>	2017			X	X	X											

OTHER INFO

Accountability to Affected Populations

COOPI is committed to ensuring that its program implementation process is accountable and transparent. One of the ways of achieving this is through the establishment of a feedback and complaint mechanism to record and act on expression of satisfaction or dissatisfaction about the quality of its services. The key objectives COOPI's feedback and complaints mechanism include:

- Recognition and protection of the beneficiaries' rights;
- Preventing and mitigating risks before they escalate;
- Building and maintaining good relations and dialogue with the community
- Promote accountability towards the stakeholders (beneficiaries, local authorities, donors and partners);
- Identify weaknesses and areas for improvement in the service delivery;

The complaint mechanism contributes towards creating a safer environment for the most vulnerable members of a community as well as increasing their voice during the implementations of the projects. In addition to using the feedback and complaint mechanism the project shall deliberately involve the beneficiaries in the implementation cycle. IDPs and host community leaders, elders, women, men, religious leaders. Local stakeholders, local authorities have specifically been consulted during rapid needs assessment to design this project. Sensitization and coordination meetings will be held during project launch with Baidoa local authority and communities in targeted IDP locations to create awareness on project objectives, activities, target locations, expected outcomes, scope, type and selection criteria for beneficiaries and beneficiary entitlements. Targeting is a joint process involving communities' representatives, as detailed in COOPI internal guidelines. COOPI works through inclusive beneficiary representatives independently selected by beneficiaries. During the sensitization meeting action plans will be drawn with clear division of roles and responsibilities. Capacity building of the beneficiaries is planned to empower them to participate fully in the implementation process. Local vendors will be given priority for contracted works and supplies and the project will promote participatory monitoring and monthly feedback to all stakeholders to enhance accountability.

Implementation Plan

Project will be implemented directly by COOPI staff in coordination with stakeholders, and using participatory approaches. Construction/rehabilitation of water infrastructure will be preceded by technical assessments. Design considers needs of women & children ensuring their safety & appropriateness. Works are contracted to local contractors who also receive continuous on-the-job O&M training and follow up. Project. Participatory KAP survey by project staff at inception will guide in design and planning hygiene awareness promotion actions. Promotion shall be carried out through trained CHPs and health workers and includes distribution of hygiene kits. Implementation is in line with WASH SOF, ensures accountability to target groups, and will be coordinated with other actors. Project staff will supervise and monitor all activities using participatory approaches, and regular feedback provided to the stakeholders including cluster and 4W matrix which shall be completed monthly

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
NRC	COOPI previously coordinated with NRC in village selection and targeting of beneficiaries to respond to the emergency in South Dollow and we will continue with coordination efforts in targeting process of drought affected communities since they have a similar program.
DRC	No emergency interventions ongoing but we will coordinate with DRC since they are working in some of the target villages on resilience programming and we will coordinate with them on complementarity
UN OCHA and WASH cluster	COOPI will coordinate with UNOCHA and the WASH regional level on sector updates and coordination purposes
WFP	WFP Is currently providing food to IDPs stranded in Dollow Somalia and we will coordinate further on other planned interventions
WVI	No emergency interventions ongoing but coordinate on possible planned interventions
Local Authority	COOPI will involve local authorities in the selection of the beneficiaries and keep the local authorities updated on the activity implementation and invite them to COOPI's monitoring activities

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

This project has considered gender during collection of data on needs at the field and in the needs analysis. Based on the gender needs, the project's objectives, outcomes and activities have been designed to address the different needs identified. Women and girls are most affected by limited access to safe water sources as they are the main water collectors in the Household. They walk long distance in search for water, are affected health wise as they carry water on their backs even when they are pregnant or are also carrying young babies at the same time. As they walk the long distance to water sources, they are at risk of GBV. In cases where contaminated water is used, the young children are affected most, they get diarrhoeal diseases and fall sick and women that have to care for them and at the same time perform other household chores. Girls end up having less time to study as they spend much time fetching water. Women also loose time collecting water at the expense of other productive activities including breastfeeding the young. Lack or Limited access to latrines also affects women and girls most and they risk themselves to GBV when walking long distance to look for places to answer calls of nature or dispose menstrual towels. Women and girls require more privacy to answer calls of nature (urinate/defecate/manage menses). All trainings incorporate of women, men and youth. In WES committees women are empowered in to participate and hold position of decision-making. CHPs include 50% women and men representation.

Protection Mainstreaming

The project will ensure protection issues especially for women; girls and children are considered and integrated in the project implementation process. As much as possible the project will take deliberate action to involve women, girls (and children where possible) in the implementation process through consultation, respect of their decisions and wishes and actual participation. To guarantee protection the planned WASH facilities will be age and gender sensitive. The project adapts Do-No-Harm and protection principles in all community interactions to avoid causing more suffering for the target groups. Regular monitoring and PDM will be carried out to monitor potential harmful impact of the activities. Furthermore, all project distribution sites will consider access, safety and security of all categories of beneficiaries. A central location will be identified for water distribution as women and children are expected to collect water from trucks. Shallow wells will be constructed in selected locations/ settlement in consultation with beneficiaries to identify central location for the exercise. Designs will consider usage by children. Women and girls will be involved in locating safe sites for the construction of the kiosk guided by COOPI engineer to ensure safety (hence reduce risk to GBV) and convenience by ensuring distance to nearest water point is within the SPHERE standards

Country Specific Information**Safety and Security**

COOPI has a longstanding presence in South Central Somalia especially Gedo region since 2001 and good understanding of the context. COOPI has in place Standard Operating Procedure for security in Somalia, in order to guarantee a systematic approach to safety in humanitarian actions and specific rules of conduct in such a challenging context of operation. COOPI works with other agencies, UN and government on security matters by sharing information. Teams involved in operations are regularly trained by a Security Manager. A security check list is provided on monthly basis by the field security focal points at COOPI operational bases in Somalia and submitted to the Regional Representative for approval along with Risk Levels. Considering the specific security threats related to operation in Somalia, the organization has conducted in 2016 a risk assessment and defined a set of risk mitigations measures, including security risks. This protocol is reviewed and updated on regular basis. COOPI Area Coordinator has established direct relations with clan elders to promote humanitarian principles, gain access, enhance program awareness, monitoring on issues including complaints/feedbacks about operation within the framework of the new complaint/feedbacks system. COOPI also maintains proper balancing between different clans/sub-clans, including when contracting for services or goods or in staff recruitment. These measures reinforce local acceptance and protection of the staff (local and expatriates when accessible) by the communities, local authorities and other interest groups. COOPI has analyzed the security context in each proposed target location for this project.

Access

The security situation in Luuq and Dollow has been relatively calm for the last eight months compared to other areas in South Central of Somalia, although there has been some Al Shabaab insurgents seen in the area but operating under cover due to the heavy presence of security providers such as the AMISOM regiments operating in the district as well as some civilian police force. The target locations are within the secure areas of the region and accessible to the project staff. Rapid needs assessment and technical assessments were done in the target locations by project staff without security challenges. Security in Somalia is dynamic and the district security focal point will be analyzing security situation and advice the frontline staff of the situation every morning. It is anticipated that the security will remain calm and allow smooth implementation of activities within the project time frame.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
Staff and Other Personnel Costs							
1.1	Project Manager	D	1	4,500.00	6	40.00	10,800.00
	<p><i>Project Manager - Presentation of the Action to stakeholders and beneficiaries and sign MoUs; Recruitment of Action staff, prepare job descriptions and supervise; Planning and supervision, monitoring of the Action; Capacity building, mentoring and training of Actions national staff; Coordinate activities among stakeholders and ensure adherence to COOPI and donor procedures; Supervise the accounting procedures and follow-up budget expenditures; Compile and submit the monthly, interim and final narrative reports; Liaison with strategic actors & other stakeholders. 1 staff for full project period. Unit cost includes salary, PAYE tax, NHIF, NSSF costs, Per diems. SHF is contributing 40%. Grade is Senior Project Management.</i></p> <p><i>(PAYE - Pay as you earn, NHIF - National Hospital Insurance Fund, NSSF - National Social Security Fund)</i></p>						
1.2	Project Administrator	D	1	3,000.00	6	60.00	10,800.00
	<p><i>Project Administrator -The position caters for the person in charge of the management of the funds at the project level. He/she monitors the budget, prepares the monthly request of funds and drafts the financial reports comparing actual results against the budget. The person will be responsible to meet SHF demands from the administrative point of view like procurement regulations and or financial supporting documents. Unit cost includes salary, PAYE tax, NHIF, NSSF costs, Per diems. SHF is contribution 60%. Grade is mid level management</i></p>						
1.3	Field WASH Officer	D	1	830.00	6	100.00	4,980.00
	<p><i>Field WASH-Role is coordination with stakeholders at field level, organize for the mobilization and sensitization meetings, supervise selection of beneficiaries and sign MoUs, supervision and monitoring of field activities; preparing the tendering documents, ensure adherence of activities to COOPI and donor procedures; logistical movement of documents/supplies at field level, controls and verifies the financial documents at the field level, Prepare the tendering procedures according to the needs, manages the staff at the field level.</i></p>						
1.4	WASH construction engineer	D	1	1,200.00	4	100.00	4,800.00
	<p><i>Water construction engineer - National staff civil engineer responsible for conducting technical assessments, preparing designs, technical specifications and bills of quantities and supervising contractors / artisans / casual labourers undertaking the construction / rehabilitation works and approve payments for works that have been undertaken. Also to provide on the job training for the artisans, water source management training ; Unit cost includes salary and medical cover allowance. Grade is Senior Field Technical Staff.</i></p>						
1.5	Hygiene and Sanitation Facilitator	D	1	830.00	6	100.00	4,980.00
	<p><i>Hygiene and Sanitation facilitator -Field based staff involved in data collection during needs assessments, selection of community hygiene promoters (CHPs); Support the CHPs in their respective villages, monitor hygiene promotion activities capture key lessons, and feed them back to improve implementation process; Guide in selection of beneficiaries for hygiene items and sanitation facilities (latrines); guide in location of appropriate sites for construction / rehabilitation of sanitation facilities; Coordinate distribution of hygiene items and sanitation tools; Monitor use and maintenance of the hygiene items, sanitation tools and facilities. Unit cost includes salary and medical cover allowance.</i></p>						
1.6	Monitoring and Evaluation Officer	D	1	2,000.00	6	50.00	6,000.00
	<p><i>The M&E officer will oversee the onsite works monitoring as well as facilitate the third party monitoring . He will ensure that quality data is collected to support the reporting against the project indicators.Costs charged are only 50%</i></p>						
1.7	Data Entry clerks (2 data entry clerks at Nairobi for 2 periods each lasting 5 days	D	2	12.00	10	100.00	240.00

	<i>Data entry clerks to support with capturing of data during assessments. 2 data entry clerk over a period of 10 days (representing 2 periods) at a daily rate of USD 12 = (2 data clerks x 10 days x 12 USD) = USD 240</i>						
1.8	Incentives for 21 Community Hygiene Promoters	D	21	30.00	3	100.00	1,890.00
	<i>Incentives for 21 hygiene promoters - as per the WASH cluster standards, hygiene promoters are provided with an incentive of USD 30 per month.</i>						
	Section Total						44,490.00
Supplies, Commodities, Materials							
2.1	Water Trucking	D	143	220.00	1	100.00	31,460.00
	<i>Water trucking companies to supply clean and safe water to 1195HHs in seven villages in Luuq. Total daily requirement of one HH is 7.5L/person x 6 people = 45L/HH. This will be delivered through water bowzers (143 truck loads) with a capacity of 10,000 liters each costing USD 220. Total cost of water trucking for 30 days for 1195HHs is USD 31,460.</i>						
2.2	Construction of 12 new HDW (Hand dug well)	D	12	4,514.00	1	100.00	54,168.00
	<i>12 hand dug wells with complete concrete reinforcement and hand pump. The cost includes, the cost of the construction materials (sand, cement, gravel, timber and Iron sheets) and the skilled and unskilled labours, which is US\$54,168 as detailed in the BOQ</i>						
2.3	Rehabilitation of 8 new HDW	D	8	2,890.00	1	100.00	23,120.00
	<i>8 Hand Dug Wells require re-deepening to allow penetration of more water as well as repairing the outer cover. The cost will include construction materials, skilled and unskilled labour which is USD 23,120</i>						
2.4	Water Environmental Sanitation (WES) Committees Training	D	1	2,158.00	1	100.00	2,158.00
	<i>WES committees training for 100 persons. The number of persons was arrived by multiplying the number of locations where we shall develop water point by five persons (which is the standard number of committee members). The unit cost of per diem is the current rate by humanitarian organizations in Luuq town of (USD 15 for per diem and USD 2 for refreshment (tea, water and snacks during trainings), cost of training materials for the number of participants to be conducted in Luuq town. Refer to BOQ attached</i>						
2.5	Training of HDW Caretakers	D	1	1,150.00	1	100.00	1,150.00
	<i>In consultation with community members, COOPI will identify, select and train caretakers for 20 HDWs from the 7 targeted villages. The caretakers will be trained on better management water source, household water treatment methodologies, maintenance and sustainability of WASH facilities. The cost of the HDWs caretakers training is US\$1150 as indicated in the BOQ</i>						
2.6	Hygiene Kits (Aquatabs (200 tablets x 1000HH, 20 Litres Jerry Cans (1000HH x 1pc), Bar Soap (1000HH x 5 Bars), Bucket (1000HH x 1pc)	D	1000	26.00	1	100.00	26,000.00
	<i>Hygiene kits to be provided to 1000HH at a unit cost of 26USD. Hygiene kits will include Aquatabs, 20 litre jerrycan, soaps and a bucket.</i>						
2.7	Hygiene Promotion Materials (Radio Broadcasting, Information Education Communication (IEC), Events, Billboards etc)	D	1	2,130.00	1	100.00	2,130.00
	<i>Hygiene promotion materials - Refer to BOQ attached includes costs for Radio Broadcasting of hygiene messages</i>						
2.8	Freight Charges - Cargo Transport (Aqua tabs, Training Materials etc.)	D	1	150.00	3	100.00	450.00
	<i>Freight charges - Freight Cost is derived from the current Airline rates charged. Transport of Cargo USD 5 per every 5kgs for aquatabs and training materials.</i>						
2.9	Voucher design and production	D	1195	0.15	1	100.00	179.25
	<i>This line will meet the cost of designing and producing voucher books that will be distributed to the project beneficiaries during distributions</i>						
	Section Total						140,815.25
Travel							
5.1	Flight Cost - (Air Ticket, Visa Fees, Airport Taxes/Transfers, mission expenses)	D	1	4,290.00	1	100.00	4,290.00
	<i>Flight costs - costs include Air Ticket, Visa Fees, Airport Taxes, Airport transfers within Nairobi, mission expenses). Flight Cost is from Nairobi to Dollow and then from there movement by road as there are no direct flights to Luuq at the moment.</i>						
5.2	Vehicle Rent	D	1	2,000.00	6	100.00	12,000.00
	<i>Vehicle rental - costs for hire of vehicle inclusive of driver in Luuq town</i>						
	Section Total						16,290.00
General Operating and Other Direct Costs							
7.1	Office Rent (LUUQ)	D	1	2,200.00	6	50.00	6,600.00

	Office rent for LUUQ office - costs for monthly office rent being charged. SHF is contributing 50%						
7.2	Office Supplies & Consumable (Stationeries, .)	D	1	149.00	6	50.00	447.00
	Office supplies and consumables - cost of stationary and office materials as per the BOQ attached. SHF is contributing 50%						
7.3	Office Utilities (Water, Electricity,)	D	1	250.00	6	50.00	750.00
	Office utilities - monthly charges for water, electricity on a monthly basis for the Baidoa office. SHF is contributing 50%						
7.4	Communication Cost - Internet facilities, air time for mobile phone	D	1	480.00	6	50.00	1,440.00
	Covers the cost of communication for the field office - telephone and internet charges. SHF is contributing 50%						
7.5	Bank Transfer Commission	D	1	2,599.10	1	100.00	2,599.10
	The line covers bank charges and the charges related to sending money to the field through Galaxy which is at 1.5%						
	Section Total						11,836.10
SubTotal			2,398.00				213,431.35
Direct							213,431.35
Support							
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							14,940.19
Total Cost							228,371.54

Project Locations							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Gedo -> Luuq -> Dooryaanley	20	408	672	648	672	2,400	Activity 1.1.1 : Provision of water trucking (45Liters/HH/day) to 1,195HHs to increase immediate access to clean and safe water for human and domestic use. The project will provide selected families with 45Lts of safe water supply per day for 3 months (or appropriate period as per needs) to complement own supply. Cluster guidelines recommend 7.5 l/person/day during emergencies. Distribution will take into consideration the most affected target villages far from any available water point. New IDP camps will be given consideration as first priority as well as vulnerable households. A central location will be identified for distribution as women and children are expected to collect water from trucks. Due to the ongoing drought, water sources have diminished in pastoral and riverine locations in Luuq District and communities are facing acute need of water for domestic use. Poor vulnerable families who cannot afford the high cost of water are forced to reduce consumption (compromising hygiene) or use water from unsafe sources. COOPI participates in joint WASH cluster & REACH water price monitoring in Gedo and would amend water voucher values as per price adjustments. Through a competitive process COOPI would identify water vendors with capacity to provide safe and clean water to the beneficiaries. Action adopts do-no-harm principles. Continuous monitoring of water access and prices in target locations will ensure that there are no market distortions due to project activities, and also no unethical practices by vendors and/or staff. Complementary distribution of jerry cans for safe water storage and hygiene kits is anticipated.

Attention will be paid to size and type of jerry cans and will be adapted to specific needs of women and girls who mostly draw water at HH level. Water supply systems will be rehabilitated at some of the locations as possible to serve as exit strategy to the emergency supply. This activity complements other action activities to ensure comprehensive assistance to create positive public health impact for targeted vulnerable families.

Activity 1.1.2 : Construct 12 hand dug wells and rehabilitation of 8 hand dug wells to increase availability/ access to safe water through deepening and protection of hand dug wells located in strategic locations. Wells will be constructed in selected locations/ settlement in consultation with beneficiaries to identify central location for the exercise. Designs will consider usage by children. Women and girls will be involved in locating safe sites for the construction of the kiosk guided by COOPI engineer to ensure safety (hence reduce risk to GBV) and convenience by ensuring distance to nearest water point is within the SPHERE standards. This activity aims at increasing access to sufficient and safe water supply services for 1,333 HHs (8000 persons) who are facing challenges in accessing safe water for domestic use, and are hence exposed to AWD/cholera and malnutrition, especially in children <5 years old. The activity also serves as exit strategy in some locations where emergency water supply will take place. The activity focuses on rehabilitation of existing sources and adapts proven locally appropriate technological options. Works will be preceded by feasibility assessments for: technical viability, environmental impacts, a technological options and local management capacities. Technical assessments, and designs for the infrastructure will be done by COOPI technical staff involving beneficiaries including identification of sites and accessibility by persons living with disabilities have smooth pathways for access. The civil works will be contracted to qualified local artisans or contractors through competitive process and involving beneficiaries. All the works will be supervised by technical staff and all HDWs installed with hand pumps for protection. To enhance sustainability of the water facilities, water user committees and hand pump caretakers will receive on the job operations & maintenance training. The action will promote private sector participation in operation of water systems where feasible to promote sustainability. Works will be certified on completion before formal hand-over to the community. Relevant information on works will be provided to SWALIM and the cluster (through the 4W matrix).

Activity 2.1.1 : Conduct comprehensive Hygiene promotion and mobilization on AWD/Cholera prevention measures to 11,124 persons AWD/Cholera risk men, women, boys and girls through house to house, schools, health and nutrition centers' visits using trained CHPs and approved MoH FGS IEC materials. Each of the 21 CHPs will reach 500 persons for every month by visiting house-to-house, schools, health centers, feeding and nutrition centers and community gatherings. The HP will supervise, evaluate and give consultations and guidance to the CMs in accordance to WASH cluster guideline and promotion of hand washing with soaps. KAP survey will be done at the inception and the completion of the project to evaluate the effectiveness of the HP intervention.

Activity 2.1.2 : With consultation of the IDP committees, identify the most vulnerable IDP households and Support to promote HHWT, safe water collection and storage to AWD risk men, women, boys and girls through distribution of 1000 Hygiene kits to 1000 HHs; each Hygiene kit contains (200 aqua tabs, 1 Jerry can (20L), 1

							<p>bucket, 3 bars of soap). The action will include support the household the use of the aqua tabs and encourage the private companies/chemists to bring the market aqua tabs and other water treatment chemicals. To complement hygiene promotion by CHPs and inspire behaviour change, hygiene items will be distributed to the most vulnerable HHs affected or at risk of AWD (female/child headed households, pregnant and lactating mothers, households with malnutrition child or with cases of AWD). The hygiene items will be provided as per cluster guidelines, and will contain; jerry cans and buckets for safe collection and storage of drinking water; aquatabs for household water treatment, and soap to promote hand washing during critical moments. Distribution of the hygiene items will be planned based on AWD seasonality calendar to prevent outbreak. In the event of AWD/Cholera outbreak, project team will access prepositioned supplies from Regional Supply hub in Baidoa and shall coordinate with other WASH partners to ensure effective response.</p>
Gedo -> Luuq -> Haanoy	20	408	672	648	672	2,400	<p>Activity 1.1.1 : Provision of water trucking (45Liters/HH/day) to 1,195HHs to increase immediate access to clean and safe water for human and domestic use. The project will provide selected families with 45Lts of safe water supply per day for 3 months (or appropriate period as per needs) to complement own supply. Cluster guidelines recommend 7.5 l/person/day during emergencies. Distribution will take into consideration the most affected target villages far from any available water point. New IDP camps will be given consideration as first priority as well as vulnerable households. A central location will be identified for distribution as women and children are expected to collect water from trucks. Due to the ongoing drought, water sources have diminished in pastoral and riverine locations in Luuq District and communities are facing acute need of water for domestic use. Poor vulnerable families who cannot afford the high cost of water are forced to reduce consumption (compromising hygiene) or use water from unsafe sources. COOPI participates in joint WASH cluster & REACH water price monitoring in Gedo and would amend water voucher values as per price adjustments. Through a competitive process COOPI would identify water vendors with capacity to provide safe and clean water to the beneficiaries. Action adopts do-no-harm principles. Continuous monitoring of water access and prices in target locations will ensure that there are no market distortions due to project activities, and also no unethical practices by vendors and/or staff. Complementary distribution of jerry cans for safe water storage and hygiene kits is anticipated. Attention will be paid to size and type of jerry cans and will be adapted to specific needs of women and girls who mostly draw water at HH level. Water supply systems will be rehabilitated at some of the locations as possible to serve as exit strategy to the emergency supply. This activity complements other action activities to ensure comprehensive assistance to create positive public health impact for targeted vulnerable families.</p> <p>Activity 1.1.2 : Construct 12 hand dug wells and rehabilitation of 8 hand dug wells to increase availability/ access to safe water through deepening and protection of hand dug wells located in strategic locations. Wells will be constructed in selected locations/ settlement in consultation with beneficiaries to identify central location for the exercise. Designs will consider usage by children. Women and girls will be involved in locating safe sites for the construction of the kiosk guided by COOPI engineer to ensure safety (hence reduce risk to GBV) and</p>

convenience by ensuring distance to nearest water point is within the SPHERE standards. This activity aims at increasing access to sufficient and safe water supply services for 1,333HHs HHs (8000 persons) who are facing challenges in accessing safe water for domestic use, and are hence exposed to AWD/cholera and malnutrition, especially in children <5 years old. The activity also serves as exit strategy in some locations where emergency water supply will take place. The activity focuses on rehabilitation of existing sources and adapts proven locally appropriate technological options. Works will be preceded by feasibility assessments for: technical viability, environmental impacts, a technological options and local management capacities. Technical assessments, and designs for the infrastructure will be done by COOPI technical staff involving beneficiaries including identification of sites and accessibility by persons living with disabilities have smooth pathways for access. The civil works will be contracted to qualified local artisans or contractors through competitive process and involving beneficiaries. All the works will be supervised by technical staff and all HDWs installed with hand pumps for protection. To enhance sustainability of the water facilities, water user committees and hand pump caretakers will receive on the job operations & maintenance training. The action will promote private sector participation in operation of water systems where feasible to promote sustainability. Works will be certified on completion before formal hand-over to the community. Relevant information on works will be provided to SWALIM and the cluster (through the 4W matrix).

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Activity 2.1.2 : With consultation of the IDP committees, identify the most vulnerable IDP households and Support to promote HHWT, safe water collection and storage to AWD risk men, women, boys and girls through distribution of 1000 Hygiene kits to 1000 HHs; each Hygiene kit contains (200 aqua tabs, 1 Jerry can (20L), 1 bucket, 3 bars of soap). The action will include support the household the use of the aqua tabs and encourage the private companies/chemists to bring the market aqua tabs and other water treatment chemicals. To complement hygiene promotion by CHPs and inspire behaviour change, hygiene items will be distributed to the most vulnerable HHs affected or at risk of AWD (female/child headed households, pregnant and lactating mothers, households with malnutrition child or with cases of AWD). The hygiene items will be provided as per cluster guidelines, and will contain; jerry cans and buckets for safe collection and storage of drinking water; aquatabs for household water treatment, and soap to promote hand washing during critical moments. Distribution of the hygiene items will be planned based on AWD seasonality calendar to prevent outbreak. In the event of AWD/Cholera outbreak, project team will access prepositioned supplies from Regional Supply hub in Baidoa and shall coordinate with other WASH partners to ensure effective response.

Gedo -> Luuq -> Luuq	53	963	1,586	1,529	1,586	5,664	<p>Activity 1.1.1 : Provision of water trucking (45Liters/HH/day) to 1,195HHs to increase immediate access to clean and safe water for human and domestic use. The project will provide selected families with 45Lts of safe water supply per day for 3 months (or appropriate period as per needs) to complement own supply. Cluster guidelines recommend 7.5 l/person/day during emergencies. Distribution will take into consideration the most affected target villages far from any available water point. New IDP camps will be given consideration as first priority as well as vulnerable households. A central location will be identified for distribution as women and children are expected to collect water from trucks. Due to the ongoing drought, water sources have diminished in pastoral and riverine locations in Luuq District and communities are facing acute need of water for domestic use. Poor vulnerable families who cannot afford the high cost of water are forced to reduce consumption (compromising hygiene) or use water from unsafe sources. COOPI participates in joint WASH cluster & REACH water price monitoring in Gedo and would amend water voucher values as per price adjustments. Through a competitive process COOPI would identify water vendors with capacity to provide safe and clean water to the beneficiaries. Action adopts do-no-harm principles. Continuous monitoring of water access and prices in target locations will ensure that there are no market distortions due to project activities, and also no unethical practices by vendors and/or staff. Complementary distribution of jerry cans for safe water storage and hygiene kits is anticipated. Attention will be paid to size and type of jerry cans and will be adapted to specific needs of women and girls who mostly draw water at HH level. Water supply systems will be rehabilitated at some of the locations as possible to serve as exit strategy to the emergency supply. This activity complements other action activities to ensure comprehensive assistance to create positive public health impact for targeted vulnerable families.</p> <p>Activity 1.1.2 : Construct 12 hand dug wells and rehabilitation of 8 hand dug wells to increase availability/ access to safe water through deepening and protection of hand dug wells located in strategic locations. Wells will be constructed in selected locations/ settlement in consultation with beneficiaries to identify central location for the exercise. Designs will consider usage by children. Women and girls will be involved in locating safe sites for the construction of the kiosk guided by COOPI engineer to ensure safety (hence reduce risk to GBV) and convenience by ensuring distance to nearest water point is within the SPHERE standards. This activity aims at increasing access to sufficient and safe water supply services for 1,333HHs HHs (8000 persons) who are facing challenges in accessing safe water for domestic use, and are hence exposed to AWD/cholera and malnutrition, especially in children <5 years old. The activity also serves as exit strategy in some locations where emergency water supply will take place. The activity focuses on rehabilitation of existing sources and adapts proven locally appropriate technological options. Works will be preceded by feasibility assessments for: technical viability, environmental impacts, a technological options and local management capacities. Technical assessments, and designs for the infrastructure will be done by COOPI technical staff involving beneficiaries including identification of sites and accessibility by persons living with disabilities have smooth pathways for access. The civil works will be contracted to qualified local artisans or contractors through competitive process and involving beneficiaries. All the works will be</p>
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Gedo -> Luuq -> Shadiiley	7	112	185	178	185	660	<p>Activity 1.1.1.1 : Provision of water trucking (45Liters/HH/day) to 1,195HHs to increase immediate access to clean and safe water for human and domestic use. The project will provide selected families with 45Lts of safe water supply per day for 3 months (or appropriate period as per needs) to complement own supply. Cluster guidelines recommend 7.5 l/person/day during emergencies. Distribution will take into consideration the most affected target villages far from any available water point. New IDP camps will be given consideration as first priority as well as vulnerable households. A central location will be identified for distribution as women and children are expected to collect water from trucks. Due to the ongoing drought, water sources have diminished in pastoral and riverine locations in Luuq District and communities are facing acute need of water for domestic use. Poor vulnerable families who cannot afford the high cost of water are forced to reduce consumption (compromising hygiene) or use water from unsafe sources. COOPI participates</p>

in joint WASH cluster & REACH water price monitoring in Gedo and would amend water voucher values as per price adjustments. Through a competitive process COOPI would identify water vendors with capacity to provide safe and clean water to the beneficiaries. Action adopts do-no-harm principles. Continuous monitoring of water access and prices in target locations will ensure that there are no market distortions due to project activities, and also no unethical practices by vendors and/or staff. Complementary distribution of jerry cans for safe water storage and hygiene kits is anticipated. Attention will be paid to size and type of jerry cans and will be adapted to specific needs of women and girls who mostly draw water at HH level. Water supply systems will be rehabilitated at some of the locations as possible to serve as exit strategy to the emergency supply. This activity complements other action activities to ensure comprehensive assistance to create positive public health impact for targeted vulnerable families.

Activity 2.1.1 : Conduct comprehensive Hygiene promotion and mobilization on AWD/Cholera prevention measures to 11,124 persons AWD/Cholera risk men, women, boys and girls through house to house, schools, health and nutrition centers' visits using trained CHPs and approved MoH FGS IEC materials. Each of the 21CHPs will reach 500 persons for every month by visiting house-to-house, schools, health centers, feeding and nutrition centers and community gatherings. The HP will supervise, evaluate and give consultations and guidance to the CMs in accordance to WASH cluster guideline and promotion of hand washing with soaps. KAP survey will be done at the inception and the completion of the project to evaluate the effectiveness of the HP intervention.

Activity 2.1.2 : With consultation of the IDP committees, identify the most vulnerable IDP households and Support to promote HHWT, safe water collection and storage to AWD risk men, women, boys and girls through distribution of 1000 Hygiene kits to 1000 HHs; each Hygiene kit contains (200 aqua tabs, 1 Jerry can (20L), 1 bucket, 3 bars of soap). The action will include support the household the use of the aqua tabs and encourage the private companies/chemists to bring the market aqua tabs and other water treatment chemicals. To complement hygiene promotion by CHPs and inspire behaviour change, hygiene items will be distributed to the most vulnerable HHs affected or at risk of AWD (female/child headed households, pregnant and lactating mothers, households with malnutrition child or with cases of AWD). The hygiene items will be provided as per cluster guidelines, and will contain; jerry cans and buckets for safe collection and storage of drinking water; aquatabs for household water treatment, and soap to promote hand washing during critical moments.

Distribution of the hygiene items will be planned based on AWD seasonality calendar to prevent outbreak. In the event of AWD/Cholera outbreak, project team will access prepositioned supplies from Regional Supply hub in Baidoa and shall coordinate with other WASH partners to ensure effective response.

Documents

Category Name	Document Description
Project Supporting Documents	Copy of COOPI SHF WASH Villages LUUQ 2017_1_30 final.xls
Project Supporting Documents	COOPI SHF WASH Villages LUUQ 22_2_17 Final.xls
Budget Documents	Budget- COOPI SHF WASH Luuq 30_1_17 Final.xlsx

Budget Documents	Budget- COOPI SHF WASH Luuq 22_2_17 Final.xlsx
Budget Documents	COOPI WASH BOQs - HFU comments.xlsx
Budget Documents	Revised COOPI WASH BOQs - HFU comments addressed 28_2_17.xlsx.xls
Budget Documents	Revised COOPI WASH BOQs - HFU comments readdressed 2_3_17.xls
Budget Documents	Revised COOPI WASH BOQs - HFU comments readdressed 7_3_17.xls
Budget Documents	Revised COOPI WASH BOQs - 10_3_17.xls
Budget Documents	Revised COOPI WASH BOQs - 13_3_17.xls
Grant Agreement	HC signed COOPI GA 4548.pdf
Grant Agreement	COOPI Grant Agreement SHF4548_Part 1.pdf
Grant Agreement	COOPI Grant Agreement SHF4548_Part 2.pdf
Grant Agreement	Grant Agreement SHF 4548 Part 1.pdf
Grant Agreement	Grant Agreement SHF 4548 Part_2.pdf
Grant Agreement	Grant Agreement SHF 4548 Part_3.pdf