

| | | | | | |
|---|---|---------------------------------|-----------------------------|--------------|--------------|
| Requesting Organization : | Nile Hope | | | | |
| Allocation Type : | 1st Round Standard Allocation | | | | |
| Primary Cluster | Sub Cluster | Percentage | | | |
| PROTECTION | | 100.00 | | | |
| | | 100 | | | |
| Project Title : | Providing quality psychosocial support and timely access to services for Gender Based Violence survivors in conflict affected Communities in Leer County of Unity state. | | | | |
| Allocation Type Category : | Frontline services | | | | |
| OPS Details | | | | | |
| Project Code : | SSD-17/P-HR-RL/103395 | Fund Project Code : | SSD-17/HSS10/SA1/P/NGO/5206 | | |
| Cluster : | Protection | Project Budget in US\$: | 90,000.05 | | |
| Planned project duration : | 6 months | Priority: | | | |
| Planned Start Date : | 01/04/2017 | Planned End Date : | 30/09/2017 | | |
| Actual Start Date: | 01/04/2017 | Actual End Date: | 30/09/2017 | | |
| Project Summary : | <p>Gender Based Violence project is targeting 4,020 vulnerable, IDPs and host communities to provide quality psychosocial support and timely access to services for Gender Based Violence survivors in conflict affected Communities in Leer County Unity State to reduce suffering of women, girls, men and boys. Nile Hope shall intervene through; Provision of mobile psychosocial support to GBV survivors using appropriate case management tools, make appropriate referrals; Engage GBV survivors and other vulnerable women and girls in weekly group psychosocial activities (bead work and knitting of bed sheets) at the women friendly spaces and involve them in various discussions to identify protection risks and mitigation measures which are income generating, referrals and Strengthen the capacity of frontline service providers (case managers, Health service Providers, police ,legal structures and community leaders) sensitize the community on the existing referral pathway putting into consideration the survivor centered principle, Psychosocial First Aid. There is need for Nile Hope protection staff to continue creating awareness on GBV concerns, consequences, and availability of services for GBV survivors.</p> | | | | |
| Direct beneficiaries : | | | | | |
| | Men | Women | Boys | Girls | Total |
| | 1,350 | 1,870 | 350 | 450 | 4,020 |
| Other Beneficiaries : | | | | | |
| Beneficiary name | Men | Women | Boys | Girls | Total |
| Internally Displaced People | 700 | 800 | 345 | 445 | 2,290 |
| People in Host Communities | 380 | 800 | 0 | 0 | 1,180 |
| Trainers, Promoters, Caretakers, committee members, etc. | 20 | 10 | 5 | 5 | 40 |
| Other | 250 | 260 | 0 | 0 | 510 |
| Indirect Beneficiaries : | | | | | |
| other groups: 480 include young men, elderly and disabled | | | | | |
| Catchment Population: | | | | | |
| | | | | | |
| Link with allocation strategy : | | | | | |
| | | | | | |

The proposed protection project is in response to, and consistent with, the allocation strategy, the Fund's Strategic Objective as well as the Protection Cluster's Specific Objectives and is multi-sectoral focused. The proposed response aims at, among other things, IDPs and conflict-affected populations facing protection risks and threats are provided with timely protection, response and prevention services, Protection needs of the most vulnerable IDPs and conflict-affected populations are identified through effective protection monitoring, reporting and response, including promoting safe movement and durable solutions, and to ensure vulnerable persons affected by violence have the skills, opportunities and positive coping strategies required to return and reintegrate into their communities in safety and dignity. To enhance coping mechanism during the phase of emergency and working closely with Nile Hope's intra-sectors (especially WASH, Health, Nutrition, Education and Food Security and Livelihoods) and partners. The response will enhance resilience and positive coping mechanism for women, men, boys and girls, which are locations of high to needs according to the heat matrix of county in need. All activities proposed will be complementary and or restorative. By restorative we mean, for example, Establishment of women friendly space, strengthen Income Generating skills/activities to mainly women, young mothers and vulnerable children who are the bread winners in the family Nile Hope has her expertise, existing presence as a National Organization and good relation with the government and the local community in the area will use community based approaches in responding to, and providing services in Leer County

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 |
|------------------|---------------------------------|------------------------|---------------|
| Caroline Kavunga | Gender & Protection Specialist | caroline@nilehope.org | +211915028756 |
| Martha Nyakueka | Gender & Protection Coordinator | mnyakueka@nilehope.org | +211955055926 |

BACKGROUND

1. Humanitarian context analysis

According to Nonviolent Peaceforce protection assessment findings conducted on 13th-15th December 2016; the security context of Leer area remains in flux and unpredictable some of the protection concerns include; threats to the lives of men, women and children, Sexual and gender-based violence, threat of forced recruitment and abduction, movement due to food insecurity and the need to collect firewood; movement to risky areas, Elderly and disabled people doing much of the movement and physical labor, Homes/tukuls being burned, Theft and stolen items (livestock, crops, clothing, ration cards, food, money, farming implements, building materials, beds), Starvation, Restricted movement due to safety concerns and Lack of services including healthcare and education

The protection trends paper (October- December 2016) Gender-based violence (GBV) remains one of the most serious and prevalent protection threats to women and children in South Sudan. From October to December 2016, the Gender-Based Violence Information Management System (GBV-IMS), used by humanitarian service providers and managed by UNFPA, recorded 575 incidents of GBV, with 96 of those incidents against children.¹ As in previous quarters, they include rapes, other forms of sexual violence, abductions and possible sexual slavery, forced and early marriage and harmful traditional practices. The highest number of reports involved incidents of intimate partner violence. Incidents of all the forms of GBV occurred both inside and outside of POC sites. As other areas open and the need to roll out service provision in the previous locations become eminent, the project will play a big role in ensuring service provision at local areas and reduce the risk by providing quality psychosocial support through mobile PSS and existing community structures, referral pathways to mitigate protection risks to women, men, boys and girls in the location.

2. Needs assessment

Increasingly, IDPs are making decisions about their future security and access to humanitarian assistance. As the conflict expands with increasing violence, protection has continued to diminish during this reporting period. Freedom of movement from all locations in and outside of POC sites must continue to be strongly advocated for with the government to assist people find protection for themselves and their families (According to protection trends paper No.9- 2016). According to the south Sudan humanitarian (snap shot) as of 16th August 2016, 4.6 m people are severely food insecure, 1, 606,400 Internally displaced persons and 616,010 number of south Sudanese have fled to the neighboring countries. There are also other myriad factors that have contributed to increased vulnerabilities of the resultant IDPs and host community members. These include multiple displacements of the populations (especially women and children), loss of lives and livelihoods, increased protection risks, diseases associated with people's sudden movements and displacements (such as Cholera) and the serious matter of lack of food.

It is instructive to note that especially in Leer the conflict destroyed homes, major social infrastructure like health centers and schools and people are also vulnerable to epidemiological outbreak because of poor sanitation (IRNA Report, New Fangak – Wicmuon and Buom – Jonglei State, 12 to 14th August 2014). Both the IDPS and host communities are in urgent need of assistance in terms of Protection, food, NFIs, education, WASH, Nutrition and health services. Women and children are most vulnerable; children are redundant and idle with no education or Psychosocial activities and could potentially be recruited by armed groups and travelling long distance in search for food put women and girls at risk of SGBV.

According to the protection trends as of 5th July 2015, families continued to be separated with only steady child reunification rates as a sharp decline in registration due to insecurity hence forth the need for strengthening the capacity of community based protection teams to identify UASC in both host and among the IDP setting, provide support in the entire process of family tracing and reunification. Nile Hope is an active actor who has both previous and ongoing project in Leer County for Health, Nutrition, WASH, FSL, Education and GBV previously with support from CHF and UNICEF. With strong technical expertise scaled up administratively and better understanding of the working context, Nile Hope will be able to use the community based approach to mitigate risks and increase the capacity of the vulnerable groups- women, men, boys, girls and others.

The CHF funding SA Rd 1 2017 will enable Nile Hope respond to protection gaps in service delivery in Leer county. Nile Hope will ensure that those affected by protection risks and threats are provided with timely protection and prevention interventions by integrating with other sectors; Health, Nutrition, FSL, WASH and Education (involve the children at TLS in PSS activities) to ensure that survivors needs are met when referrals are done, this will be achieved through monthly coordination meeting where referral pathway will be enhanced. Nile Hope will monitor the implementation of the recommendations of the safe audits by all sectors to maximise the impact of GBV mainstreaming across sectors.

To ensure the needs become effectively addressed, we shall have an in-built Log frame that will be the focal reference for measuring project progress and results; this will be coupled with additional tools and approaches including FGDs with community beneficiary members, case study profiling, interviews with key informants and community feedback engagement forums. The findings of these monitoring reports, copies will be provided to the GBV Sub-cluster and the Health Cluster within 2 weeks of the monitoring exercise.

3. Description Of Beneficiaries

The project will target a population of 4, 020 (women 1,870, girls 450, men 1, 350 and 350 boys) of all age groups (5-17 years Children both girls and boys), (18-59 years men and women) putting into consideration gender sensitivity, the groups includes; IDPS, host communities and the returnees in Leer. Other indirect beneficiaries and these will include; young men, elderly and disabled. The population of Leer has moved to other villages which is deemed to be much safer. Among the 4,020 more women and girls are selected than the men and boys since they are more vulnerable to Sexual Gender Based Violence and if take a close observation of the IDP population movement it consist of mostly women and girls.

Nile Hope staff will continue to work closely with previous groups of women and children by strengthening mobile psychosocial activities and case management. Mobilize the already existing groups to take part in identifying the issues affecting women and girls and also create awareness at different forums on SGBV concerns, available services to ensure we reach out to targeted 4,020 women, men, girls and boys have access to information and services.

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4. Grant Request Justification

The project seeks to provide services across the three key protection cluster objectives for 2017 by providing quality and timely protection and prevention interventions through supporting referral pathway, establishment of a women friendly space, train health care providers on CMR and form community protection mechanisms. Nile Hope therefore being an active actor for both GBV on both prevention and response previously in some locations in Leer.

CHF funding SA R1 2017 will enable us to respond to Protection and GBV in emergency related gaps that have heavily affected both women and children. The women friendly space will be established for women to access during psychosocial activities, engage in focus group discussion on GBV concerns and provision of individual psychosocial support and to promote confidentiality since they will have space where they can freely express their concerns without fear regularly discussions GBV concerns, sharing experience among women and girls which enable them gain skills on coping mechanisms. Furthermore, the existing Nile Hope requisite systems, policies and procedures in place will be strengthened to enhance effective response project monitoring.

5. Complementarity

Nile Hope will work closely with other GBV/protection partners (UNIDO, NRC, IRC) and other service providers in Health, Nutrition, FSL and WASH who will directly be in contact with GBV survivor's. This will help to enhance the referral path way and offer improved timely response to survivors. We will also sensitize all partners and communities members in the area of operation on the existing referral pathway to ensure that survivors of GBV utilize the available services without any stigma attached. Since prevention and response to GBV, PSS services are priority of protection cluster and the current humanitarian situation in South Sudan. Engage and coordinate activities with the County authorities, payam administrators, WASH, Health, Nutrition and FSL departments. Nile Hope has established presence and good networking linkages with the local communities which is a strong advantage.

LOGICAL FRAMEWORK

Overall project objective

This project is aiming at providing quality protection response services and preventive measures to reach 4,020 (women 1,870, girls 450, men 1,350 and 350 boys) in conflict affected population and other vulnerable men and women to live a dignified life in Leer location Unity state by end of 2017

| PROTECTION | | | | | | | |
|---|------------|--|--------------------------|-------|------|-------|-----------|
| Cluster objectives | | Strategic Response Plan (SRP) objectives | Percentage of activities | | | | |
| Protection response services are available in all counties that are heavily affected by conflict or displacement. | | SO1: Save lives and alleviate the suffering of those most in need of assistance and protection | 50 | | | | |
| Prevention-oriented programming is implemented in counties that are heavily affected by conflict or displacement, and communities are assisted to maintain their coping capacities | | SO2: Protect the rights and uphold the dignity of the most vulnerable | 20 | | | | |
| Individuals' right to freedom of movement and to live in safety and dignity is enhanced. | | SO3: Support at-risk communities to sustain their capacity to cope with significant threats | 30 | | | | |
| Contribution to Cluster/Sector Objectives : The GBV and protection project will contribute to all cluster/sector objectives for a holistic and responsive intervention. Nile Hope shall work to ensure that people affected by conflict receive immediate response as a live saving measure and to alleviate suffering to men, women, boys and girls in Leer. Nile Hope will use community based approaches to implement participatory interventions by ensuring that NO HARM approach will effect positive coping mechanism, self reliance and rebirth of peoples livelihoods for quick recovery. | | | | | | | |
| Outcome 1 | | | | | | | |
| Survivor of Gender Based Violence develop resilience and confidence to seek appropriate services in the community | | | | | | | |
| Output 1.1 | | | | | | | |
| Description | | | | | | | |
| GBV survivors have confidence in seeking response services in a safe environment that upholds their dignity | | | | | | | |
| Assumptions & Risks | | | | | | | |
| Funds will be available on time to execute timely interventions, ensured safety and accessibility to the available services , availability of competent staff to provide services, improved reporting and service seeking behaviors of GBV survivors, Prevailing peace and harmony to prevent multiple displacements, insecurity, willingness of beneficiaries, Cultural beliefs and practices on issues related to SGBV | | | | | | | |
| Indicators | | | | | | | |
| Code | Cluster | Indicator | End cycle beneficiaries | | | | End cycle |
| | | | Men | Women | Boys | Girls | Target |
| Indicator 1.1.1 | PROTECTION | Number of GBV survivors receiving case management services | 15 | 45 | 10 | 25 | 95 |
| Means of Verification : GBVIMS reports submitted | | | | | | | |
| Indicator 1.1.2 | PROTECTION | Number of safety audits conducted (inside and outside of PoCs) | | | | | 3 |
| Means of Verification : Safety audit reports,photos | | | | | | | |
| Indicator 1.1.3 | PROTECTION | Number of functional women and girls safe spaces (inside and outside PoCs) | | | | | 1 |
| Means of Verification : photos | | | | | | | |
| Indicator 1.1.4 | PROTECTION | Number of women accessing women and girl safe spaces per month | | 500 | | 100 | 600 |
| Means of Verification : Photos and number of women and girls accessing the Women Friendly Space | | | | | | | |
| Activities | | | | | | | |
| Activity 1.1.1 | | | | | | | |
| Provide psychosocial support to GBV survivors using appropriate case management tools and make appropriate referrals. | | | | | | | |
| Activity 1.1.2 | | | | | | | |
| conduct monthly safety audits(inside and outside pocs) and share the reports | | | | | | | |
| Activity 1.1.3 | | | | | | | |
| Construct and equip 1 women friendly centre | | | | | | | |
| Activity 1.1.4 | | | | | | | |
| Engage GBV survivor and other vulnerable women and girls in weekly group on PSS activities. | | | | | | | |
| Outcome 2 | | | | | | | |
| Communities and local authorities capacity will be enhanced to promote resilience from all types of threats. | | | | | | | |
| Output 2.1 | | | | | | | |
| Description | | | | | | | |
| Strengthened capacities of communities and local authorities to assist women and children in resilience to all types of threats will be established. | | | | | | | |
| Assumptions & Risks | | | | | | | |

Timely availability of funds to execute timely interventions, ensured safety and accessibility to the available services , availability of competent staff to provide services, improved reporting and service seeking behaviors of GBV survivors, Prevailing peace and harmony to prevent multiple displacements, insecurity , willingness of beneficiaries, Cultural beliefs and practices on issues related to SGBV, Depending on other partners service delivery especially health for quality and efficient response to survivors compromise the response when they don't deliver.

Indicators

| Code | Cluster | Indicator | End cycle beneficiaries | | | | End cycle |
|--|------------|---|-------------------------|-------|------|-------|-----------|
| | | | Men | Women | Boys | Girls | Target |
| Indicator 2.1.1 | PROTECTION | Number of frontline psycho -social service providers trained on GBV response in crisis settings | | | | | 300 |
| Means of Verification : Training lists and photos | | | | | | | |
| Indicator 2.1.2 | PROTECTION | Number of frontline response actors trained on GBV/PFA counseling | | | | | 10 |
| Means of Verification : Training lists and photos | | | | | | | |
| Indicator 2.1.3 | PROTECTION | Number of new or updated referral pathways | | | | | 2 |
| Means of Verification : Number of referral pathway documented and shared, | | | | | | | |
| Indicator 2.1.4 | PROTECTION | Number of community members engaged in community dialogue activities | 5 | 10 | | | 15 |

Means of Verification : Reports, photos,

Activities

Activity 2.1.1

Strengthen the capacity of frontline service providers (case managers, police and community leaders) on GBV/PFA in crisis settings

Activity 2.1.2

Train health providers on CMR- Clinical Management of Rape

Activity 2.1.3

Develop and update 1 referral pathway

Activity 2.1.4

Conduct 5 community dialogue sessions of 15 women and men

Additional Targets :

M & R

Monitoring & Reporting plan

Nile Hope will ensure that there is continuous collection and analysis of programmatic data to monitor and evaluate progress of the project as designed. The project team, together with partners shall use Protection mechanisms and structures (GBV sub Cluster) including local actors like Volunteers and community support groups to realize the set indicators and targets. Tools and methodologies employed (including interviews with key persons, case study profiling of beneficiaries, observations, focus group discussions on key program aspects and topics, documentations) during the monitoring and evaluation exercise will help to inform learning and the extent to which project objective is realized. We also shall use the organization's M&E tools and guidelines for routine implementation progress tracking (courtesy of the Gender and Protection specialist and the MEAL Officer). Nile Hope shall work to ensure accountability to the affected population (AAP) especially through participatory approaches and routinely consult and engage with the communities, the set activities has been conducted with quality results. Whilst monitoring will be progressive, evaluation will be mid-term / final and accountability reports (both financial and narrative) will be generated on monthly, mid and final term, progress report shall be shared with the relevant GBV clusters. Nile Hope shall work to strengthen the monitoring and evaluation competencies of local institutions and structures like the community Support Groups and the County-level Protection coordination (whilst also coordinating and working with other sectors.

Workplan

| Activitydescription | Year | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|--|------|---|---|---|---|---|---|---|---|---|----|----|----|
| Activity 1.1.1: Provide psychosocial support to GBV survivors using appropriate case management tools and make appropriate referrals. | 2017 | | | | X | X | X | X | X | X | | | |
| Activity 1.1.2: conduct monthly safety audits(inside and outside pocs) and share the reports | 2017 | | | | X | X | X | X | X | X | | | |
| Activity 1.1.3: Construct and equip 1 women friendly centre | 2017 | | | | | X | | | | | | | |
| Activity 1.1.4: Engage GBV survivor and other vulnerable women and girls in weekly group on PSS activities. | 2017 | | | | | X | X | X | X | X | | | |
| Activity 2.1.1: Strengthen the capacity of frontline service providers (case managers, police and community leaders) on GBV/PFA in crisis settings | 2017 | | | | | X | X | | | | | | |
| Activity 2.1.2: Train health providers on CMR- Clinical Management of Rape | 2017 | | | | | X | X | | | | | | |
| Activity 2.1.3: Develop and update 1 referral pathway | 2017 | | | | | X | | | | | | | |
| Activity 2.1.4: Conduct 5 community dialogue sessions of 15 women and men | 2017 | | | | | X | X | X | X | X | | | |

OTHER INFO

Accountability to Affected Populations

Nile Hope will work to ensure accountability of the affected population will be observed through the participatory approaches, routinely consultation and engage with communities through interview on the project activities. Monitoring will be progressive by the field officers, Programme coordinator and the Gender and Protection Specialist to ensure all beneficiaries targeted are benefiting from the various activities within the community. Midterm evaluations will be done, final and accountability reports (both financial and Narrative) will be generated and shared.

The implementation process and monitoring shall include the following:

- i) Consultation, and participation of, beneficiaries during needs assessments (including, for example, the baseline surveys);
- ii) Pre-implementation stakeholder workshops and county-level cluster meetings;
- iii) Case study profiling and documentation of learning themes;
- iv) Use of community-based structures e.g. Self Help Groups, Youth and Women Associations, School Clubs, and Peer Groups....;
- v) Active collaboration with local authorities especially County Gender Departments (e.g. on selection of case managers, volunteers, community based psychosocial group's staff selection for competency strengthening...);
- vi) Community-based complaints mechanisms such as use of local leaders like chiefs, county authorities, etc..;
- vii) Community-led campaigns and advocacy initiatives;
- viii) Use of dedicated local staff (knowledge of cultures, local contexts and operational environment, cost-effectiveness, sustainability...);
- ix) Collaboration with State/County and Payam authorities and partnerships with local actors.

Implementation Plan

Nile Hope will solely implement the project and work closely with the County Local Authorities and local structures like the women group and community based protection teams to ensure joint field monitoring/visits to the projects sites by ensuring that the project is running smoothly according to the Log-frame developed. The M&E officer will use the Nile Hope and Gender Ministry tools to capture the data in the field and analyze data so as to come up with concrete report of project implementation. Field reports will be sent to the cluster on monthly and Quarterly basis, share information on emergency trends in the implementation areas. Nile Hope management with leadership from the Director's office will oversee and referee the implementation of the project in line with cluster priorities and mandate. Supportive technical review and evaluation of the reports will be conducted by the Protection Coordinator on a weekly/ monthly basis .The Gender and Protection Program will receive technical and monitoring support from Nile Hope Programs Office. The finance office will provide financial accountability tools and reports, and steward the project resourcing process.

Coordination with other Organizations in project area

| Name of the organization | Areas/activities of collaboration and rationale |
|--------------------------|---|
| UNIDO/ | Nile Hope will work closely with other partners to ensure there is a multi-sectorial response for GBV survivors. Coordination meetings will be held with partners on a monthly basis to enhance the referral process to GBV casesand identifying gaps in services thus having in place well-coordinated services. |

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

Nile Hope shall provide prevention and access to services without any discrimination of sex and age. we shall ensure that most vulnerable groups and other persons with special concerns are all reached and assisted putting into consideration the guiding principles and survivor centered skills. Nile hope has plans to engage all women, men, boys and girls during the project implementation cycle. whose activities include; PSS at both women and girls friendly space.

Protection Mainstreaming

This project will provide access to assistance and services without discrimination of sex, age or diversity and ensure that most vulnerable groups and Persons with special needs are reached/supported with appropriate confidentiality. This project through advocacy, empowerment of targeted groups as well as use of community based committees to enhance population's ability to reclaim their rights. Increased awareness on consequences of GBV and enhanced utilization of available services for women, girls and boys affected by conflict. The community based support teams will support the GBV to re-integrate back in the community and reduce stigma attached to violence. To build resilience in communities by enhancing the capacity of service providers to support women, men, girls and boys affected by conflict.

Country Specific Information

Safety and Security

The security context of Leer area remains in flux and unpredictable. Nile Hope is aware of the fragile security situation in most of its proposed project locations and will put in place measures to ensure implementation is fairly calm with a conducive environment for local staff and other staff from different regions of South Sudan to work with limited challenges. Continuous monitoring and engagement with the local security agents will also be enhanced to keep the organization updated about the day to day changes in security situation in areas of project implementation. Staff will be required to have their work IDs and other visibility materials such as organization apparel for identification and connected security purposes. All organization staff in the project sites will fill in movement sheets so that all the field coordinators are aware of staff movement at any particular time. Where possible, the organization will impose curfews to control movement especially at night and in volatile areas in the project locations.

Access

In Leer, Nile Hope will continue to monitor the situation and assess the possibility of having a vehicle in Leer but will in the meantime use motorbikes to move around in the project sites to monitor and coordinate activities. Nile Hope will use the local staff to implement the project activities and the staff will serve the population regard less of the situation at hand however staff safety is apriority. Nile Hope has been using air transport, boat and motorbikes and when it comes to un accessible Payam we use human transport to reach out to the beneficiaries wherever they are settled for example in swampy areas. Regular monitoring field visits will be conducted by direct program persons in times of inaccessibility our field staff gather the data of implementation through photo sharing, beneficiary interviews and observations and share hard copy of reports.

BUDGET

| Code | Budget Line Description | D / S | Quantity | Unit cost | Duration Recurran ce | % charged to CHF | Total Cost |
|------|---|-------|----------|-----------|----------------------|------------------|------------|
| 1.1 | Field Protection Officer | D | 1 | 1,000.00 | 6 | 100.00 | 6,000.00 |
| | <i>1 field protection officers will be paid to support and coordinate the activities in the field in Leer . He will be working closely with the Case managers to ensure the needs of GBV survivors are met on time. They are responsible to report to he reports with protection department in Juba.run the activities in the field</i> | | | | | | |
| 1.2 | Case Managers | D | 3 | 500.00 | 6 | 100.00 | 9,000.00 |
| | <i>3 Case Managers 1. Rubchai Payam, 2. Thonyor Payam- 3. Pilieny, Leer County . We will engage our team who are currently volunteering in offering services in the community.</i> | | | | | | |
| 1.3 | Protection Coordinator | D | 1 | 5,500.00 | 6 | 27.28 | 9,002.40 |
| | <i>1 Gender and protection Coordinator will be based in Juba to oversee running of activities and coordination at the national level. The costs afforded for this project is 27.28%</i> | | | | | | |
| 1.4 | GBV Specialist | D | 1 | 5,000.00 | 6 | 47.00 | 14,100.00 |
| | <i>1 GBV Specialist will support the field team, compiling the reports and managing the data. The costs afforded for this project is 47%</i> | | | | | | |
| 1.5 | M & E Officer | S | 1 | 3,500.00 | 6 | 39.28 | 8,248.80 |

| | | | | | | | | |
|---|---|---|----|----------|----|--------|--|------------------|
| | 1 M & E Officer @\$3500 per month for 5 months 39.28% charged to CHF Locations: Juba with frequent travel to the field and oversee project implementation and share the information with the management and donors. Ensure there is value for funds to the beneficiaries. | | | | | | | |
| | Section Total | | | | | | | 46,351.20 |
| Supplies, Commodities, Materials | | | | | | | | |
| 2.1 | Training supplies for Health care providers | D | 15 | 40.00 | 2 | 100.00 | | 1,200.00 |
| | <i>Purchase stationery to be used during training of the health care providers</i> | | | | | | | |
| 2.2 | Establishment of Women Centers | D | 1 | 2,000.00 | 1 | 100.00 | | 2,000.00 |
| | <i>Nile Hope to establish women friendly centers in Thonyor Payams where women weekly activities will be conducted and provision of psychosocial support. The amount revised, to use local materials such as poles, rafts, strings, labour for mudding, thatches etc</i> | | | | | | | |
| 2.3 | Strengthen the capacity of the existing community based protection network | D | 30 | 40.00 | 2 | 100.00 | | 2,400.00 |
| | <i>Train of community based protection networks on GBV,(PSS, case management and sensitize them on referral pathway).</i> | | | | | | | |
| 2.4 | Training of frontline service providers on GBV case management | D | 30 | 40.00 | 3 | 100.00 | | 3,600.00 |
| | <i>Train service providers who are directly in contact with the GBV Survivors on PSS, case management and sensitize them on referral pathway.</i> | | | | | | | |
| 2.5 | Conduct monthly visits to the availability of CMR supplies in health facilities in New Fangak- using the CMR checklist. Based on findings, liaise with partners such as UNFPA to ensure steady supply of CMR drugs | D | 1 | 600.00 | 2 | 100.00 | | 1,200.00 |
| | <i>Monthly visits to the different health facilities within Leer to ensure the availability of PEP Kits and Health Care Workers to administer treatment to SGBV survivors</i> | | | | | | | |
| 2.6 | Community mobilization | D | 6 | 30.00 | 15 | 100.00 | | 2,700.00 |
| | <i>women and girls mobilization during the registration, and following up GBV Cases.</i> | | | | | | | |
| 2.7 | Women Dialogue | D | 30 | 50.00 | 5 | 100.00 | | 7,500.00 |
| | <i>Monthly dialogues will be conducted at the women friendly space to reduce Gender Based Violence. In the Women Centre, Nile Hope will procure Beads, bed sheets for embroidery activities, threads and needles.</i> | | | | | | | |
| 2.8 | Printing materials for safety Audit | D | 20 | 10.00 | 5 | 100.00 | | 1,000.00 |
| | <i>Print forms for Monthly Safety Audit assessments</i> | | | | | | | |
| | Section Total | | | | | | | 21,600.00 |
| Travel | | | | | | | | |
| 5.1 | Staff Flights | D | 4 | 550.00 | 2 | 100.00 | | 4,400.00 |
| | <i>This is the Staff Flights to the field through UNHAS, 5 Staff Members to transported to the implementation sites</i> | | | | | | | |
| 5.2 | Local Field Transport | D | 1 | 2,000.00 | 2 | 100.00 | | 4,000.00 |
| | <i>This is local transportation cost for staff implementing activities, they will use the amount for Monthly coordination purposes from Leer & Thonyor back, facilitate the SGBV survivors who are in need to access health care services in Leer.</i> | | | | | | | |
| 5.3 | Per diem SDA | D | 4 | 100.00 | 2 | 100.00 | | 800.00 |
| | <i>Per Diem for 5 staff who will go to the implementation site for GBV implementation</i> | | | | | | | |
| 5.4 | Boat Hire | D | 1 | 400.00 | 4 | 100.00 | | 1,600.00 |
| | <i>Hire of Boat for Mobile PSS</i> | | | | | | | |
| 5.5 | Boat Fuel | D | 1 | 500.00 | 2 | 100.00 | | 1,000.00 |

| | | | | | | | |
|---|--|---|--------|----------|---|--------|------------------|
| | <i>Fuel the hired boat for Mobile PSS</i> | | | | | | |
| | Section Total | | | | | | 11,800.00 |
| General Operating and Other Direct Costs | | | | | | | |
| 7.1 | Field Supplies | S | 1 | 1,000.00 | 2 | 100.00 | 2,000.00 |
| | <i>Purchase of food and non food item for the field staff staying in Nile Hope compound in (Leer County)</i> | | | | | | |
| 7.2 | Bank Charges | S | 1 | 280.50 | 2 | 100.00 | 561.00 |
| | <i>Bank Charges , this are the ledger fees and the costs incurred for transfer of funds , the total afforded for this project is</i> | | | | | | |
| 7.3 | Communication | S | 1 | 300.00 | 6 | 100.00 | 1,800.00 |
| | <i>Thuraya Airtime to the field office, the total afforded for this project</i> | | | | | | |
| | Section Total | | | | | | 4,361.00 |
| SubTotal | | | 154.00 | | | | 84,112.20 |
| Direct | | | | | | | 71,502.40 |
| Support | | | | | | | 12,609.80 |
| PSC Cost | | | | | | | |
| PSC Cost Percent | | | | | | | 7.00 |
| PSC Amount | | | | | | | 5,887.85 |
| Total Cost | | | | | | | 90,000.05 |

Project Locations

| Location | Estimated percentage of budget for each location | Estimated number of beneficiaries for each location | | | | | Activity Name |
|---------------|--|---|-------|------|-------|-------|--|
| | | Men | Women | Boys | Girls | Total | |
| Unity -> Leer | 100 | 1,350 | 1,870 | 350 | 450 | 4,020 | Activity 1.1.1 : Provide psychosocial support to GBV survivors using appropriate case management tools and make appropriate referrals. Activity 1.1.2 : conduct monthly safety audits(inside and outside pocs) and share the reports Activity 1.1.3 : Construct and equip 1 women friendly centre Activity 2.1.1 : Strengthen the capacity of frontline service providers (case managers, police and community leaders) on GBV/PFA in crisis settings Activity 2.1.2 : Train health providers on CMR- Clinical Management of Rape |

Documents

| Category Name | Document Description |
|---------------|----------------------|
| | |