

Requesting Organization :	Impact Health Organization				
Allocation Type :	2nd Round Standard Allocation				
Primary Cluster	Sub Cluster	Percentage			
WATER, SANITATION AND HYGIENE		100.00			
		100			
Project Title :	Emergency WASH support to IDPs, returnees and vulnerable host communities in Magwi, Eastern Equatoria State and Terekeka County Central Equatoria State.				
Allocation Type Category :	Frontline services				
OPS Details					
Project Code :	SSD-17/WS/103200	Fund Project Code :	SSD-17/HSS10/SA2/WASH/NGO/6483		
Cluster :	Water, Sanitation and Hygiene (WASH)	Project Budget in US\$:	154,851.00		
Planned project duration :	6 months	Priority:			
Planned Start Date :	15/08/2017	Planned End Date :	15/02/2018		
Actual Start Date:	15/08/2017	Actual End Date:	15/02/2018		
Project Summary :	<p>Project Summary: This \$154,851 Emergency WASH response project for this allocation is planned for a period of 6 months targeting vulnerable communities of IDPs, host communities and returnees in locations of Magwi and Terekeka County with chronic emergency WASH needs. The planned WASH activities will as well support nutrition and health interventions by creating synergies with other health, nutrition and food security cluster partners such so as to prevent WASH related disease aimed at reducing morbidity and mortality through provision of clean, safe and adequate water, dignified sanitation services as well as hygiene promotion messaging among the affected population in Magwi County. The project activities and targets will include 15 hand pump rehabilitation/repair (7 boreholes from Terekeka County benefiting 500 men, 1500 women, 700 boys and 1000 girls) and (8 Boreholes from Magwi County benefiting (500 men, 1700 women 600 boys and 1000 girls) refresher training of 40 hygiene promoters (20 female and 20 male) 20 hygiene will be based in Magwi and 20 hygiene promoters in Terekeka and 6 hygiene campaigns will be conducted Magwi and 6 hygiene campaigns conducted in Terekeka County together with hygiene promoters house to house hygiene promotion will benefit 1000 men, 2000 women, 1500 boys and 2000 girls in Magwi and 1700 men, 3000 women, 1500 boys and 2800 girls from Terekeka County. The training of water management committee members benefiting 25 females and 50 Male (35 from Terekeka county and 40 from Magwi County). Distribution of WASH NFI benefiting will benefit 100 men, 800 women, 300 boys, and 300 girls in Magwi County and 300 men, 1500 women, 400 boys, and 100 girls in Terekeka County and distribute menstruation hygiene benefit 500 girls and women (250 in Magwi and 250 Terekeka County). The project intends to benefit 30515 people (15460 from Magwi County and 15055 from Terekeka) majority of who are women and children who are at risk of malnutrition and cholera. This project comes at a time when Terekeka and Magwi County have not only experiencing high displacements due to the conflict but as well as raising GAM rates due to poor harvest. The situation has impacted greatly on the already limited basic services in the location. Therefore, this project will address the needs of the most vulnerable women, men, boys and girls affected by the conflict, cholera and malnutrition.</p>				
Direct beneficiaries :					
	Men	Women	Boys	Girls	Total
	4,460	12,355	5,800	7,900	30,515
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
Internally Displaced People	2,630	8,700	3,500	4,500	19,330
People in Host Communities	1,830	3,655	2,300	3,400	11,185
Indirect Beneficiaries :					
Catchment Population:					
Link with allocation strategy :					

The project will address critical WASH needs in resource constricted locations of two counties of Terekeka and Magwi aimed at saving lives and alleviating suffering, through safe access to services with dignity making communities more prepared to cope with significant threats. There has been repeated insecurity in Terekeka due to the longstanding tensions between Mundari, Bari and Dinka communities caused by the movement of Mundari pastoralists during the dry season from Terekeka through territory to the south belonging to the Bari community. The administrative changes brought about by the Government of South Sudan in late 2015 with the division of Central Equatoria into three new states, without accompanying documents delineating the borders between those states also gave new impetus to historic land disputes. Following increasing tensions between Murle and Dinka groups in Jonglei State in late 2016, Dinka militia groups began to mobilize in larger numbers a bolstered force in the Jonglei area that became more assertive in peripheral areas to Jonglei state including Mundari territory in Gemeiza. Some members of that militia were alleged to have attacked Mundari villages in the area following the ambush in April 2017.

Intercommunal rivalries in the area are likely to persist in the area in the long term and based on recent incidents, violence related to this rivalry appears cyclical and likelihood of the movement of militia groups during the cattle migration seasons in the second half of the rainy season (inter agency assessment report published by IOM DTM June 2017). Two cholera cases have been confirmed and Ten suspect cholera cases have been reported since 28 June 2017(MOH-WHO Republic of South Sudan cholera response updates as of 30 June). Magwi County targeted for response is experiencing chronic emergency needs due to conflict, economic decline, multiple displacements and hunger that tend to undermine community coping strengths (IHO needs assessment From 16th to 19th May 2017 . The project aims at addressing life threatening needs of the most vulnerable, especially women and children, through provision of WASH services. Impact Health Organization will work in relation with the Nutrition, Education and Health Clusters by ensuring that WASH services provision are improved in nutrition and health centers and well as schools. Strengthening the linkages between the WASH, Nutrition and Health will ensure help to prevent future WASH disease outbreaks and malnutrition in children under five. The project will promote community participation as the Community will be involved in assessments, will work as volunteer and be part of planning and management committees. The community will also provide feedback of the implementation of project activities. IHO has two-year's experience in providing WASH service to vulnerable communities and as a national organization well position us to undertake community programs in a disputed location.

Sub-Grants to Implementing Partners :

Partner Name	Partner Type	Budget in US\$

Other funding secured for the same project (to date) :

Other Funding Source	Other Funding Amount

Organization focal point :

Name	Title	Email	Phone
Mwanje Jolem	Program Coordinator	jolem.mwanje@gmail.com	+211928082382
Sarah Juru	Finance Manager	sarah@ihosavinglives.org	+211955575342

BACKGROUND

1. Humanitarian context analysis

Republic of South Sudan faces considerable humanitarian problems, which have increased substantially since the outbreak of violence across the country in December 2013. The fighting in Eastern Equatorial state have further aggravated the humanitarian situation, producing secondary or third displacement. Among the most affected Counties in Eastern Equatoria is Magwi County having figures way off thresholds in the thematic areas of WASH, nutrition, health and food security. Rising food insecurity is mostly a result of the deepening economic crisis, insecurity, and depleted food stocks from insufficient household production. Although there is no specific data in Magwi County but Eastern Equatoria is 46.9% of Crisis, Emergency & Humanitarian Catastrophe according to Integrated food security phase classification the republic of South Sudan current period classified projection period for most likely scenarios June-July 2017. High levels of acute malnutrition were driven not only by high food insecurity but also sub-optimal child feeding practices and poor water, sanitation and hygiene. People largely dependent on humanitarian support due to poor economic situation and broken down social structures. Recent assessment by IHO from 16th to 19th May 2017 identified significant WASH needs alongside high rates of malnutrition in Magwi County. Inter-communal violence and insecurity in May forced thousands of people to flee their homes in Terekeka, Central Equatoria and seek shelter on the two payams of Gemeiza and Malang. (UN OCHA Humanitarian Bulletin South Sudan Issue 9 | 12 June 2017)

According to the inter agency Terekeka Rapid Assessment Report | 8 - 12 June 2017 published by IOM DTM South Sudan, reported that 27816 people are displaced by the Inter-communal violence in Terekeka is not the first of this kind in the past years, several other displaced have occurred before creating a growing emergency situation in the area. The IDPs have resolved to stay under displacement until the disputes in the home land are resolved but with less hope for quick interventions and continued mobilization of involved parties to solve the issue through fighting the emergency already created seeks emergency response to people who need health and nutrition services. Two cholera cases have been confirmed and Ten suspect cholera cases have been reported since 28 June 2017(MOH-WHO Republic of South Sudan cholera response updates as of 30 June).

Although food security alongside with cholera outbreak presents a primary concern for the affected population, however access to safe drinking water and insufficient safe hygiene practices poses a great risk of WASH related morbidity and mortality. In addition, the dire economic hardships limits communities from accessing basic commodity chains, resulting in lack of much needed WASH NFIs such as soap and purification tablets. The affected populations lack appropriate water containers which limit the volumes that can be collected at a given time, thus increasing the number of trips for collection and elevating risk to those collecting the water (generally women and girls). Lack of containers also results in unsafe water storage, disrupting the safe water chain. The IHO WASH Team aims to provide emergency response to the WASH needs communities residing in the location, in line with the overall strategy of the WASH cluster in South Sudan.

2. Needs assessment

Inter-communal violence and insecurity in May forced thousands of people to flee their homes in Terekeka, Central Equatoria and seek shelter on the two payams of Gemeiza and Malang. (UN OCHA Humanitarian Bulletin South Sudan Issue 9 | 12 June 2017). According to the inter agency Terekeka Rapid Assessment Report | 8 - 12 June 2017 published by IOM DTM South Sudan, reported that the people displaced by the Inter-communal violence in Terekeka is not the first of this kind in the past years, several other displaced have occurred before creating a growing emergency situation in the area.

The host people and IDPs coming in the two payams of Mangala and Gemeiza largely need safe water and WASH NFIs alongside safe sanitation and hygiene practices. The leading Watery Diarrhea among children. According to the inter agency Terekeka Rapid Assessment Report | 8 - 12 June 2017 published by IOM DTM South Sudan, The IDP communities have not received any form of hygiene sensitization activities in the last six months even though they drink water directly from the river Nile while practicing open defecation prevalent across all IDP settlements. As a result, there has been a cholera outbreak in the location. Accordingly, to the WHO-RSSMOH situation Report on Cholera in South Sudan 3 February 2017, 22 cases have been reported in Terekeka County with 8 deaths.

The increased IDP population in Magwi County both static and in transit has exerted pressure to already limited resources among the host communities hence limiting the coping abilities to withstand the shocks. From the Needs assessment conducted by IHO in Recent assessment by IHO from 16th to 19th May 2017 (see attachment) identified significant WASH needs were most communities lack access to safe drinking water as communities depend on stream water due to non-functionality of the boreholes and lack of access to water purifying supplies, inadequate excreta disposal and poor hygiene practices leave had left large portion of displaced populations at persistent risk of preventable water-related diseases. Magwi County previous has been prone to Cholera Outbreak (Situation Report #95 on Cholera in South Sudan as at 23:59 Hours, 17 November 2016) and as ongoing rainy season the risk cannot be ruled out. Existing WASH infrastructure do not have the capacity to provide adequate WASH services. Inadequate WASH services contribute not only to disease outbreak, but also to increased malnutrition. Lack of improved sanitation and limited knowledge of hygiene practices to caretaker mothers contributes to poor feeding habits of children that contribute to malnutrition. Several data from IOM, OCHA and partners revealed there is consistent of displaced persons in Magwi County and these displaced persons are settled in areas without clean water or improved sanitation and the displaced have little opportunity to practice proper hygiene. Therefore this project comes at a critical moment to address some of the priority WASH needs in the county

3. Description Of Beneficiaries

The project intends to reach a total of 30515 beneficiaries. IHO will assist all demographic groups, from all ethnicities and of all ages in the two counties of Magwi and Terekeka. The project major beneficiaries are women and children identified with the greatest need. IHO use its own needs assessments or refer to previous IRNAs and inter agency assessments and County Authorities data to identify and select beneficiaries. The information will be taken into account for the planning and design of interventions which will aim to address the different group's needs with tailored hygiene promotion sessions for women and girls, and men and boys. Further coordination with partners will be made to avoid duplication of responses. IHO estimates that the beneficiaries would have the following percentages according to gender and group age: Women: 40% Men: 10 % Girls: 26% Boys: 19%. Interventions acknowledge the broad needs of all the populations that may be targeted. For example, the elderly and people with disabilities have different physical abilities and their needs must be factored into any forward planning and material transportation. Consultations with beneficiaries are vitally important to activities, and lead to community ownership and sustainability. The community (men, women, boys and girls of all conditions) will have opportunities to engage and have a voice with mission team members and to express their needs through their participation in activities.

4. Grant Request Justification

The allocation prioritizes two counties of Magwi and terekeka as an emergency response location for WASH interventions. The locations have seen constant violence which continue to threaten mostly children, women and elderly. Communities spending more time collecting water from a few functional boreholes and other community members resorted to unclean river water instead. Hand pumps frequently break from overuse and without trained mechanics or access to spare parts to repair the boreholes they fall into disrepair and became non-usable. There is a general lack of WASH NFIs such as jerry cans and buckets that are being used to collect and store water, often unclean and as well as low levels of proper hand washing knowledge and practices are compounded by lack of soap in the target communities. As well as many women and girls are not properly equipped with resources to appropriately manage menstruation effectively and reported that the two counties have less WASH partners compared to other location in South Sudan, the area being prone to cholera outbreak stresses the need for emergency water through safe water sources and household water treatment and as well as hygiene promotion. In South Sudan generally, there is limited access to latrines and other sanitation facilities. However, under this project access to latrines and sanitation will be promoted through hygiene promotion carried by Hygiene promoters during the hygiene promotion at household and community level. Impact Health Organization has studied the humanitarian situation and being a national organization with background experience in implementing WASH interventions in conflict affected areas in South Sudan gives an upper hand on understanding of the local context, local networks as well as the capacity to provide the most critical life services during emergencies.

We intend to maximize the allocated funds through an integrated response plan to tackle WASH related disease burden by scaling-up WASH service in the underserved locations through community participation. We shall complement the existing WASH services by working close with other partner organizations to tackle the highest WASH related causes of morbidity in the areas.

IHO has a well-established team headed by indigenous human resource with local expertise. The organization has full capacity to respond in emergency situation and support the cluster to achieve the goals. IHO is an active actor in various humanitarian forums that include WASH National Forum as well WASH technical working group. IHO will aim to achieve community involvement in all stages of WASH activities, specifically through the dissemination of messages in the hygiene and sanitation promotion campaigns/sessions. This is also important to increase ownership of the interventions and ensure sustainability of the interventions. The needs of different groups and men during the establishment of Water Management Committees and training of hygiene promoters, where appropriate and under the Do No Harm principles. Equally, hygiene promotion awareness campaigns and sessions will be based on successful past campaigns and sessions and address the specific needs of women and girls.

5. Complementarity

IHO received funding from SSHF in April 2017 first allocation which has enable IHO to become a major lead partner in providing WASH services in Magwi County supporting the County Authorities as well as working amongst vulnerable people offering emergency lifesaving WASH services. The County is currently dependent of IHO to strengthen WASH services. This project seeks to leverage on previous gains in these areas, with a likelihood of covering more areas of vulnerability in Magwi County. IHO will continue to expand into remote, rural locations to reach IDP and Host populations in need.

In Terekeka County The project will complement other partner programs in effort to combat cholera outbreak as well reduce mortality and mortality in the target locations. There limited access to WASH services and this project seeks to improve on coverage, reaching more vulnerable communities in the County. IHO will expand into remote, rural locations to reach populations in need. Given that fact that the County is prone to cholera outbreak, the project will address the challenges of lack access to treatment and awareness. The lessons learned from previous interventions will continue to be documented, and used for more effective responses. The project has also been developed in line with the WASH Cluster, and has been developed based on the needs of the most vulnerable populations.

LOGICAL FRAMEWORK

Overall project objective

The main objective of the 6-month project is to reduce morbidity and mortality due to WASH related diseases in two Counties of Magwi and Terekeka by;

- (i) Providing timely access to safe and sufficient quantities of safe drinking water, domestic use and hygiene purposes meeting SPHERE Standards.
- (ii) Providing access to appropriate and inclusive sanitation and hygiene facilities and services to vulnerable populations and,
- (iii) Promoting behavioral change amongst vulnerable population to practice good hygiene and alleviate WASH related diseases.

WATER, SANITATION AND HYGIENE

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Re-establish and improve access to water, sanitation and hygiene promotion services for the vulnerable population affected by conflict, disease outbreaks, acute malnutrition and floods.	SO2: Protect the rights and uphold the dignity of the most vulnerable	40
Sustain access to water, sanitation and hygiene promotion services for vulnerable population affected by conflict, disease outbreaks, acute malnutrition and floods.	SO1: Save lives and alleviate the suffering of those most in need of assistance and protection	60

Contribution to Cluster/Sector Objectives : This project targets to help meet the set strategic objectives and guideline of saving lives and alleviating suffering through multi-sectorial approach in all aspects of community needs for WASH, including improving disaster response panning, protecting rights of the most vulnerable and improving self-reliance and coping capacities by protecting, restoring and promoting livelihoods. The project envisions engaging and consulting the community in planning WASH services to implement acceptable interventions that will be effective, long lasting and sustainable. The project will upgrade WASH infrastructure in the settlement camps to support the already established projects. Populations affected with malnutrition will be targeted with improved WASH services to reduce water contamination resulting to water-related disease, which is an aggravating factor to malnutrition. Through this intervention, the project will directly contribute to the achievement of WASH cluster specific objectives 1, 2 and 3 which include;

- (i) Providing timely access to safe and sufficient quantities of safe drinking water, domestic use and hygiene purposes meeting SPHERE Standards.
- (ii) Providing access to appropriate and inclusive sanitation and hygiene facilities and services to vulnerable populations and,
- (iii) Promoting behavioral change amongst vulnerable population to practice good hygiene and alleviate WASH related diseases.

Outcome 1

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

Output 1.1

Description

15 Water points repaired/rehabilitated to provide clean, safe, adequate and sustainable water access including health facilities and schools.

Assumptions & Risks

Accessibility of targeted locations, timely disbursement of project funds to facilitate the quick-start of the project activities, . The overall security status in country remains calm. Effectiveness of logistics between Juba and locations targeted by intervention.

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of new water points/boreholes constructed					15

Means of Verification : Borehole GPS Data; Borehole rehabilitation report, Community handover report; Photographic and Video proof; Beneficiary feedback forms; Assessment reports.

Indicator 1.1.2	WATER, SANITATION AND HYGIENE	No of Community members trained on management of water, sanitation and hygiene service (40 Male, 35 female)					75
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Means of Verification : Training reports, Photos, Assessment reports.

Indicator 1.1.3	WATER, SANITATION AND HYGIENE	[Frontline] Number of people provided with sustained access to safe water supply [SPHERE Standard]...	1,000	3,200	1,300	2,000	7,500
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Means of Verification : Beneficiary reports, borehole rehabilitation reports

Activities

Activity 1.1.1

Rehabilitation of 15 Broken down hand pumps/boreholes in the target locations (7 boreholes from Terekeka County and 8 Boreholes from Magwi County). Identifying the broken water sources will take into consideration the participation of male and female.

Activity 1.1.2

Train 75 Water management Committee members (50 male 35 female) to support the rehabilitated 20 boreholes

Output 1.2

Description							
700 households supplied with WASH NFIs including soap, Jericans, buckets Purification tablets, filter cloths etc							
Assumptions & Risks							
Accessibility of targeted locations, timely disbursement of project funds to facilitate the quick-start of the project activities. The overall security status in country remains calm. Effectiveness of logistics between Juba and locations targeted by intervention.							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of people reached with WASH NFI distribution	700	2,500	1,500	2,200	6,900
Means of Verification : register, Photographic and Video proof; Beneficiary feedback forms; Assessment reports							
Indicator 1.2.2	WATER, SANITATION AND HYGIENE	# of Community members receiving education on use of PuR sachets /aquatabs					6,900
Means of Verification : Observation of households visited that have received and use distributed supplies session reports supported by photos							
Activities							
Activity 1.2.1							
Distribute WASH NFIs soap, Water treatment households items (PUR and Aqua tabs) buckets and jericans benefiting 4200 people to vulnerable communities in target locations. The distribution will target most households which shall be identified through assessment.							
Activity 1.2.2							
Conduct 700 sensitization household sessions on Point of Use (PoU) water treatment options (PuR sachets and aquatabs).							
Outcome 2							
Communities and populations have reduced risk of WASH-related diseases, or negative impacts on nutritional status, through access to improved hygienic practices as a result of hygiene promotion activities and improved coordination.							
Output 2.1							
Description							
Hygiene promotion messages, sanitation and hygiene initiatives, campaigns organized at county, payam, boma and village level.							
Assumptions & Risks							
Community takes over project ownership and willing to implement project recommendations; Accessibility of targeted locations, timely disbursement of project funds to facilitate the quick-start of the project activities, The overall security status in country remains calm. Effectiveness of logistics between Juba and locations targeted by intervention.							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of people reached through direct and participatory hygiene promotion activities	2,700	5,000	3,000	4,800	15,500
Means of Verification : Photographic and video, assessment reports, Beneficiary log sheets.							
Indicator 2.1.2	WATER, SANITATION AND HYGIENE	[Frontline] Number of community based hygiene promoters trained	10	30			40
Means of Verification : Photographic and video, Training reports.							
Indicator 2.1.3	WATER, SANITATION AND HYGIENE	[Frontline] Number of menstrual hygiene management (MHM)/ dignity kits distributed					500
Means of Verification : Log Sheets; Photographic and Video proof; Beneficiary feedback forms; Assessment reports.							
Activities							
Activity 2.1.1							
Conduct training of 40 hygiene promoters (30 female and 10 male) with equal participation and consultation of women to conduct house to house hygiene promotion.							
Activity 2.1.2							
Social mobilization and awareness session that involve all ages women, men, girls and boys ensuring active participation of everybody(boys men women and girls 12 major hygiene campaign sessions will be conducted							
Activity 2.1.3							
Distribution of emergency Menstruation Management/dignity kits to benefit vulnerable 500 individuals including women and girls. The distribution will target schooling going girls in the IDP population, as well as women with disability.							
Activity 2.1.4							
Regular reporting by Emergency WASH coordinator to Donor and Cluster by submitting monthly, quarterly and final reports or as required i.e submission of monthly 5W reports							
Additional Targets :							

M & R

Monitoring & Reporting plan

IHO will develop a monitoring and Evaluation plan for this project; and will work closely with the cluster M&E team, and the SSHF TS to ensure quality programming is affected. The performance-monitoring plan includes alignments to WASH Cluster M&E standards with standard Cluster tools including goals and objectives, questionnaires, data sheets and analysis mechanisms integrated. Standard Indicators will be used to measure progress at mid and final stages of the project. All activities within the project will be regularly monitored and results against indicators will be collected in monthly reports as well as for each intervention report. A mix of quantitative, qualitative, participatory, and observatory means of data collection shall be employed for collecting data against key indicators and the findings shall be incorporated into the reports.

For the monitoring and reporting progress and achievements of the project activities will be entirely responsibility of the WASH team consisting of the WASH coordinator, WASH technician, WASH officer and hygiene field supervisor. IHO project team will promote reporting by producing activity reports, weekly and Monthly report as well as donor reports. The reports will show progress focusing on the number of people reached, by sex, age and location, which shall be share to the donor and relevant Clusters. The final report will include among others demonstration of the long-term impact.

To avoid duplication of activities IHO will work with other partners (ie. UNICEF, INTERSOS, NRC, NCA) responding in WASH activities in Terekeka and Magwi County to identify who is working where and share experience.

To measure progress, a monitoring matrix will be developed for each activity to track the number people reached by sex, age and location. IHO will coordinate all efforts with Community leaders through coordination meeting to share experience and gaps for scaling up and engaging them in field activity monitoring. During the distribution of WASH NFIs, a distribution list will be produced and after the distribution IHO will collect feedback from beneficiaries on the adequacy and usefulness of the distributed items. At the field level, regular monitoring visits conducted by IHO Juba based staff will use cluster-approved systems to measure progress against the work plan and towards achieving the desired results and project objectives. Data collected from field visits will

be used to report to the cluster on a monthly basis, with additional narrative and financial reports provided to CHF Finance Team as per contractual requirements. Cluster recommended reporting lines will be fully adhered to such as 5W matrices. Community participation in project monitoring and evaluation will be done which will involve utilization of single sex focus groups, same age peer group discussions to obtain accurate feedback from beneficiaries as an accountability mechanisms aimed at implementing lessons learnt and avoid repetition of implementation short falls in coming/ongoing projects. To ensure proper Monitoring and Evaluation of the project finances, the Project coordinator, WASH Technician and WASH Officers shall be in charge of project finances spending and will report to the organization Finance Manager. The Finance Manager will track budget lines and ensure all activities funded are accounted for using the laid down financial regulations. The finance Officer will compile financial reports, which will be shared with the donor. To further complement and strengthen the monitoring and evaluation of activities, IHO will conduct a mid-term review meeting with stakeholders, particularly those from the targeted community, but also including county-level authorities and other agencies operating in the area.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Rehabilitation of 15 Broken down hand pumps/boreholes in the target locations (7 boreholes from Terekeka County and 8 Boreholes from Magwi County). Identifying the broken water sources will take into consideration the participation of male and female.	2017									X	X	X	X
	2018	X	X										
Activity 1.1.2: Train 75 Water management Committee members (50 male 35 female) to support the rehabilitated 20 boreholes	2017								X	X			
	2018												
Activity 1.2.1: Distribute WASH NFIs soap, Water treatment households items (PUR and Aqua tabs) buckets and jericans benefiting 4200 people to vulnerable communities in target locations. The distribution will target most households which shall be identified through assessment.	2017									X	X	X	
	2018												
Activity 1.2.2: Conduct 700 sensitization household sessions on Point of Use (PoU) water treatment options (PuR sachets and aquatabs).	2017									X	X	X	X
	2018	X											
Activity 2.1.1: Conduct training of 40 hygiene promoters (30 female and 10 male) with equal participation and consultation of women to conduct house to house hygiene promotion.	2017								X				
	2018												
Activity 2.1.2: Social mobilization and awareness session that involve all ages women, men,girls and boys ensuring active participation of everybody(boys men women and girls 12 major hygiene campaign sessions will be conducted	2017									X	X	X	X
	2018	X											
Activity 2.1.3: Distribution of emergency Menstruation Management/dignity kits to benefit vulnerable 500 individuals including women and girls. The distribution will target schooling going girls in the IDP population, as well as women with disability.	2017									X	X	X	
	2018												
Activity 2.1.4: Regular reporting by Emergency WASH coordinator to Donor and Cluster by submitting monthly,quarterly and final reports or as required i.e submission of monthly 5W reports	2017								X	X	X	X	X
	2018	X	X										

OTHER INFO

Accountability to Affected Populations

IHO will promote transparency during the project implementation by directly involving the community in every stage of the project to ensure clear understanding of objectives of the project, expectations and stakeholders. IHO has incorporated the Commitments on Accountability to Affected Populations (CAAP) into all relevant statements, policies and operational guidelines including incorporating them in staff inductions. IHO ensures facilitation of the provision of feedback from affected people on the services. All project activities will engage local authorities to oversee their implementation. IHO will also conduct evaluation exercises involving men, women, girls and boys. The feedback Information will be available to local communities in local languages; During implementation, teams are recruited with attention to a balance of women and men, cultural diversity and age.

Implementation Plan

The project is the result a result the humanitarian response plan, specially this projects follows within the WASH Cluster priorities. Therefore during implementation IHO will work closely with the WASH and Other relevant clusters. In the same regard, IHO will work closely with other relevant WASH partners by strengthening the coordination mechanism with government and other relevant partners. The community capacity will be strengthen at process of the project implementation by ensuring community members participate in the planning, delivery and sustainability of the activities. The project will be carried out through the direct engagement of key project staff, such as the WASH Coordinator, WASH Technician, Hygiene supervisor and WASH Officers.

To ensure the maximum impact of the intervention, IHO will strengthen existing structures and on-going WASH activities. Project implementation will cut across other thematic areas such as Health and Nutrition with activities such as health and nutrition messaging incorporated into activities. IHO will implement each stage of the project in collaboration with these stakeholders and aim to include representatives from all stakeholders in training and capacity building components.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
NRC	Coordination, needs identification and reporting

Environment Marker Of The Project

A+: Neutral Impact on environment with mitigation or enhancement

Gender Marker Of The Project

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

Justify Chosen Gender Marker Code

IHO mainstreams gender into WASH programming by assessing gender-specific needs and identifying appropriate responses to address the particular concerns of women, men, girls and boys during the assessment of WASH needs in the project locations. Sex and Age disaggregated data is recorded; Among the ways IHO under takes to promote gender includes holding a series of key informant interviews, focus group discussions (FGDs) with the intervention communities. The result is a strategy that incorporates the view, opinions and needs of all men, women, boys and girls and seeks to address existing gaps. It is through this process that IHO identifies the WASH priorities for both men and women in terms of needs. At all stages in programme planning and design, gender mainstreaming is a key priority. IHO aims to improve the wellbeing of women, girls, boys and men through prevention and control of WASH related disease. These data collection methods will aim to collect information about the perceived risks in accessing WASH services in order to identify solutions to mitigate these risks. Female community members will be sought out for behavior change communication, distribution and training on water filtration systems and sanitation sensitization. In order to incorporate the elderly into beneficiary numbers, IHO will work with local community leaders to identify this group, using IASC guidelines and manuals from partners such as HelpAge International. In the process IHO will ensure that analyze and take into consideration-gendered division of tasks within households and communities and the different needs of women, men, girls and boys in water provision, sanitation and hygiene. In the same regard, encourage an equal representation of women and men in the committees and in training so that all users have an equal mastery of WASH facilities. Involve boys and men in hygiene maintenance and in hygiene programs, as well as construction of community latrines and shelters will take consideration of gender. Lastly Respond to the specific hygiene needs of menstruating girls and women with the construction of special washing facilities and through provision of female hygiene kits.

Protection Mainstreaming

Protection mainstreaming into the project has been integrated into the entire programmatic cycle from the needs assessment, to the implementation and subsequent winding up. Firstly the "Do No Harm" principle has been factored. From the initial stages of conceptualizing a project, to hiring staff, acquiring materials, implementation, IHO will examine the potential negative and positive impact of programming decisions on the conflict context; while ensuring expectations are not overly raised and considering who conducts the project activities with ethnic safety in mind. Some of the concepts will need to be introduced carefully or be addressed in smaller groups or individually. Tools and inputs that could later be used as weapons such as pangas and knives will not be provided to the communities. Safety and dignity of beneficiaries will be prioritised; female beneficiaries will be provided with appropriate hygiene and dignity kits. WASH infrastructure will be gender and protectively appropriate; lockable and fitted with lights. The project will seek to strengthen and support self protection and will work in collaboration with other protection actors. The project will seek to analyze dividers and sources of tensions between groups; analyze connectors between groups and across groups and consider implicit ethical messages associated with the project. In working with the local authorities, IHO has analyzed the risks and opportunities linked to engaging with government dynamically, in view of the conflict analysis and regular informal monitoring of the context.

Country Specific Information

Safety and Security

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

Access

Magwi and Terekeka County are accessible by road and some locations in Terekeka are accessible by water. Although some locations are of the county are hard to reach during the rainy seasons. However the presence of the field office makes logistical preparation and operation easy.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
1. Staff and Other Personnel Costs							
1.1	WASH Coordinator	D	1	2,500.00	6	80.00	12,000.00
	<i>The WASH coordinator will spend 80% of the time supporting this project</i>						
1.2	WASH Technician	D	1	1,500.00	6	100.00	9,000.00
	<i>The WASH Technician will spend 100% of the time implementing project activities</i>						
1.3	WASH Officer	D	1	1,000.00	6	100.00	6,000.00
	<i>The WASH Officer will spend 100% of the time implementing project activities</i>						
1.4	Hygiene Supervisor	D	2	700.00	6	100.00	8,400.00
	<i>The Hygiene Supervisor will spend 100% of the time implementing project activities</i>						
1.5	Hygiene promoters	D	40	50.00	6	100.00	12,000.00
	<i>The Hygiene Promoters will spend 100% of the time implementing project activities</i>						
1.6	Finance Manager	D	1	1,500.00	6	50.00	4,500.00
	<i>The Finance Manager will spend 50% of the time supporting this project</i>						
1.7	Procurement officer	D	1	1,000.00	6	50.00	3,000.00
	<i>The Procurement officer will spend 50% of the time supporting this project</i>						
1.8	Office support staff	S	3	400.00	6	50.00	3,600.00
	<i>(cleaner, office assistant, guard) and will spend 50% of the time supporting this project</i>						
	Section Total						58,500.00
2. Supplies, Commodities, Materials							
2.1	Repair/Rehabilitation of boreholes	D	15	700.00	1	100.00	10,500.00
	<i>15 boreholes will rehabilitated @\$700 each, the fee will cover Materials as well as social mobilization</i>						
2.2	Water management committees trainings	D	15	200.00	1	100.00	3,000.00
	<i>Each Borehole committee members will be trained at rate \$200 per borehole</i>						
2.3	Refresher training of hygiene promoters	D	2	2,000.00	1	100.00	4,000.00
	<i>2 training (Magwi and Terekeka will be conducted @ \$2000 to cover training stationary, transport refund, accommodation for far people, hall hire as well feeding and refreshments.</i>						
2.4	Hygiene promotion mobilization for campaigns and sessions	D	12	200.00	1	100.00	2,400.00
	<i>Each campaign will conducted at cost of \$200, focusing emergence water treatment, sanitation and hygiene as well diarrhea disease prevention. The cost will include hiring public speakers and facilitate attendance of government authorities</i>						
2.5	Car hire for field transport and Truck for logistics movement	D	1	41,000.00	1	100.00	41,000.00
	<i>The project will hire a car to support daily field work activities at rate \$200 for 25 days a month for 6 months=\$30000 and hire a truck to transport WASH supplies from Juba core pipeline to Magwi and Terekeka at \$11000 hence overall total cost =\$410000</i>						
2.6	Project Visibility	D	1	4,000.00	1	100.00	4,000.00
	<i>15 sign posts @\$100=\$1500 to placed next to the rehabilitated boreholes, T-shirts for Hygiene promoters and staff pieces @ \$20 x 100 pcs =\$2000, Banners 5 @ \$100=500, Total visibility cost =\$4000, The IEC materials will carry messages promoting hygiene promotion and will increase project visibility</i>						
2.7	Distribution of WASH NFIs	D	1	1,000.00	1	100.00	1,000.00

	<i>Lump sum of 1000 will go towards distribution of WASH NFI. The cost will support County Authorities and community leaders allowances and well as refreshments</i>						
	Section Total						65,900.00
3. Equipment							
3.1	Laptop	D	2	800.00	1	100.00	1,600.00
	<i>Laptops for WASH project officer @\$800 x2pcs=\$1600</i>						
	Section Total						1,600.00
4. Contractual Services							
NA	NA	NA	0	0.00	0	0	0.00
	<i>NA</i>						
	Section Total						0.00
5. Travel							
5.1	Field staff per diem	D	4	100.00	6	100.00	2,400.00
	<i>Cost will cover field allowance (feeding and accommodation) for staff based in the field @\$100 per month per staff for 4 staff</i>						
5.2	Juba based field travel for support supervision	D	2	100.00	3	100.00	600.00
	<i>Juba based staff travel to field to conduct support supervision, 1 supervision per month @\$100</i>						
	Section Total						3,000.00
6. Transfers and Grants to Counterparts							
NA	NA	NA	0	0.00	0	0	0.00
	<i>NA</i>						
	Section Total						0.00
7. General Operating and Other Direct Costs							
7.1	Rent Juba Office	S	1	1,000.00	6	50.00	3,000.00
	<i>SSHf will contribute 50% towards juba office rent cost</i>						
7.2	Juba office internet	S	1	1,000.00	6	50.00	3,000.00
	<i>SSHf will contribute 50% towards Juba office internet cost</i>						
7.3	Rent Field office	S	2	600.00	6	50.00	3,600.00
	<i>SSHf will contribute 50% towards field office rent cost</i>						
7.4	Internet Field Office	S	2	300.00	6	100.00	3,600.00
	<i>SSHf will contribute 100% to ward field office internet cost</i>						
7.5	Office Supplies and Maintenance	S	1	700.00	6	25.00	1,050.00
	<i>SSHf will contribute 50% toward office supplies cost</i>						
7.6	Bank Charge	S	1	2,150.00	1	100.00	2,150.00

	SSHf contribute 100% for the bank charges						
	Section Total						16,400.00
SubTotal		113.00				145,400.00	
Direct						125,400.00	
Support						20,000.00	
PSC Cost							
PSC Cost Percent						6.50	
PSC Amount						9,451.00	
Total Cost						154,851.00	
Project Locations							
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Eastern Equatoria -> Magwi	51	2,330	6,430	2,400	4,300	15,460	<p>Activity 1.1.1 : Rehabilitation of 15 Broken down hand pumps/boreholes in the target locations (7 boreholes from Terekeka County and 8 Boreholes from Magwi County). Identifying the broken water sources will take into consideration the participation of male and female.</p> <p>Activity 1.1.2 : Train 75 Water management Committee members (50 male 35 female) to support the rehabilitated 20 boreholes</p> <p>Activity 1.2.1 : Distribute WASH NFIs soap, Water treatment households items (PUR and Aqua tabs) buckets and jericans benefiting 4200 people to vulnerable communities in target locations. The distribution will target most households which shall be identified through assessment.</p> <p>Activity 1.2.2 : Conduct 700 sensitization household sessions on Point of Use (PoU) water treatment options (PuR sachets and aquatabs).</p> <p>Activity 2.1.1 : Conduct training of 40 hygiene promoters (30 female and 10 male) with equal participation and consultation of women to conduct house to house hygiene promotion.</p> <p>Activity 2.1.2 : Social mobilization and awareness session that involve all ages women, men, girls and boys ensuring active participation of everybody(boys men women and girls 12 major hygiene campaign sessions will be conducted</p> <p>Activity 2.1.3 : Distribution of emergency Menstruation Management/dignity kits to benefit vulnerable 500 individuals including women and girls. The distribution will target schooling going girls in the IDP population, as well as women with disability.</p> <p>Activity 2.1.4 : Regular reporting by Emergency WASH coordinator to Donor and Cluster by submitting monthly, quarterly and final reports or as required i.e submission of monthly 5W reports</p>

Central Equatoria -> Terekeka	49	1,825	6,030	2,900	4,300	15,055	<p>Activity 1.1.1 : Rehabilitation of 15 Broken down hand pumps/boreholes in the target locations (7 boreholes from Terekeka County and 8 Boreholes from Magwi County). Identifying the broken water sources will take into consideration the participation of male and female.</p> <p>Activity 1.1.2 : Train 75 Water management Committee members (50 male 35 female) to support the rehabilitated 20 boreholes</p> <p>Activity 1.2.1 : Distribute WASH NFIs soap, Water treatment households items (PUR and Aqua tabs) buckets and jericans benefiting 4200 people to vulnerable communities in target locations. The distribution will target most households which shall be identified through assessment.</p> <p>Activity 1.2.2 : Conduct 700 sensitization household sessions on Point of Use (PoU) water treatment options (PuR sachets and aquatabs).</p> <p>Activity 2.1.1 : Conduct training of 40 hygiene promoters (30 female and 10 male) with equal participation and consultation of women to conduct house to house hygiene promotion.</p> <p>Activity 2.1.2 : Social mobilization and awareness session that involve all ages women, men,girls and boys ensuring active participation of everybody(boys men women and girls 12 major hygiene campaign sessions will be conducted</p> <p>Activity 2.1.3 : Distribution of emergency Menstruation Management/dignity kits to benefit vulnerable 500 individuals including women and girls. The distribution will target schooling going girls in the IDP population, as well as women with disability.</p> <p>Activity 2.1.4 : Regular reporting by Emergency WASH coordinator to Donor and Cluster by submitting monthly,quarterly and final reports or as required i.e submission of monthly 5W reports</p>
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Documents	
Category Name	Document Description
Project Supporting Documents	20170622Terekeka Assessment Report.pdf
Project Supporting Documents	IHO WASH NEEDS ASSESSMENT REPORT MAGWI COUNTY MAY 2017.pdf