

Requesting Organization :	United Nations Children's Fund				
Allocation Type :	1st Round Standard Allocation				
Primary Cluster	Sub Cluster	Percentage			
WATER, SANITATION AND HYGIENE		100.00			
		100			
Project Title :	Emergency WASH response for the population affected by nutrition crises and conflict in 3 priority counties of Northern Bahr El Ghazel and Western Equatoria				
Allocation Type Category :	Frontline services				
OPS Details					
Project Code :	SSD-17/WS/102678	Fund Project Code :	SSD-17/HSS10/SA1/WASH/UN/5196		
Cluster :	Water, Sanitation and Hygiene (WASH)	Project Budget in US\$:	400,000.45		
Planned project duration :	6 months	Priority:			
Planned Start Date :	10/04/2017	Planned End Date :	10/10/2017		
Actual Start Date:	10/04/2017	Actual End Date:	10/10/2017		
Project Summary :	The project will focus on Aweil South and Aweil West counties in Northern Bahir el Gazal and Mundri West county in Western Equatoria state to provide WASH services at health and nutrition facilities, rehabilitating existing water facilities, construction of emergency sanitation facilities (only for IDPs), emergency hygiene promotion and strengthening community structures for operation and maintenance of WASH facilities. A total of 25,000 people will be benefited from different WASH interventions with over 77% of them will be women and children.				
Direct beneficiaries :					
	Men	Women	Boys	Girls	Total
	5,400	6,800	6,000	6,800	25,000
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
People in Host Communities	4,700	5,500	5,000	5,500	20,700
Internally Displaced People	700	1,300	1,000	1,300	4,300
Indirect Beneficiaries :					
Over 100,000 people living in the project target areas who will be indirectly benefited from the institutional latrines as well water supply interventions which will relive the pressure on existing functional facilities.					
Catchment Population:					
The project is targeting three counties (Aweil South, Aweil West and Mundri West) all the people in these counties is the catchment population of the project					
Link with allocation strategy :					
This project is aligned with the second WASH cluster objectives of the South Sudan Humanitarian Response Plan (HRP) – 2017 which is 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. It is also designed to fill the key gaps identified by the WASH cluster allocation strategy which are the need for increased WASH interventions in areas with severe malnutrition in Aweil south and Aweil West counties of Northern Bahir el Ghazel state and the need to maintain adequate WASH service delivery in areas of high and prolonged displacement in Mundri West county of Western Equatoria state. The main objective is immediate provision of safe access to WASH services focusing on the communities and health and nutrition facilities in targeted locations through construction, rehabilitation and upgrading of WASH facilities and community based hygiene promotion interventions.					
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
Lillian Okwirry	Chief of WASH	lokwirry@unicef.org	+211954578417

BACKGROUND**1. Humanitarian context analysis**

Despite having enjoyed relative peace and stability throughout the post-2013 conflict, NBeG is the most impoverished state in the country according to the National Bureau of Statistics, with 76% of the population living below the poverty line (key indicators on Southern Sudan, Southern Sudan centre for census, statistics and evaluation/National Bureau of Statistics, 2010). According to the January IPC report areas in the Greater Bahr el Ghazal show higher than usual levels of acute malnutrition expected for the post-harvest season, indicating a worsening situation. Extreme poverty, poor access to services, extremely poor diet (in terms of both quality and quantity), low coverage of water and sanitation facilities and deplorable hygiene practices are underlying causes of the high levels of acute malnutrition.

The Greater Equatoria Region now ranks 2nd in South Sudan in terms of the number of people in need of humanitarian assistance (1.9million) with an estimated 427,000 people have been displaced with approximately 144,000 (CES), 158,000 (EES) and 124,000 (WES). This represents about 22% of the national IDP population out of the estimated 1.9million IDPS in the country. The volatile political and security situation is compounded by a collapsing economy and a massive devaluation of the South Sudanese Pound (SSP) critically affected the water and sanitation services in the Equatoria region. The capacity of local structures to provide access to WASH services is severely limited and humanitarian partners need to provide services directly at the early stages, especially in the most remote areas.

In Easter Equatoria, Central Equatoria and Western Equatoria, respectively, only 63per cent, 51 per cent and 40 per cent of the population currently has access to improved sources of drinking water. In addition most of the existing facilities are not functioning properly due to very poor operation and maintenance and disintegrated government structures which left the communities and IDPs without proper support for sustaining water and sanitation facilities. Therefore this project is targeting vulnerable communities and IDPs in Aweil South and Aweil West of NBeG state and Mundri West of Western equatorial state to provide emergency lifesaving WASH interventions which include rehabilitation and upgrading of water supply facilities, constructing institutional latrines and construction of emergency latrines.

Therefore, for the WASH sector to contribute to quick reduction of morbidity and improvement of health status of the vulnerable population affected by the nutrition crisis and conflict in the targeted five counties, prioritising provision of WASH services in Health and Nutrition facilities, supporting maintenance of non-functional water points, improving sanitation and hygiene promotion will be critical activities in need of priority attention.

2. Needs assessment

In NBeG UNICEF already conducted WASH status of Primary Health Care Centers (PHCC) including the PHCC in Aweil South and Aweil West in November 2016 in which most of the health centers need either rehabilitation of existing facilities or construction of new facilities. The 2016 2nd Allocation CHF funding for NBeG helped to rehabilitate/reconstruct WASH facilities in 10 PHCC but still a number of PHCCs are without properly functional WASH facilities need rehabilitation or new construction. Poor operation and maintenance on community water points is another area identified as a gap in Aweil South, Aweil West and Mundri West areas mainly due to the financial crises which critically affected existing community structures on operation and maintenance and lack of any budget allocation by the Government to support communities and local WASH structures on operation and maintenance.

In Mundri West currently there are 3,772 IDPs within Mundri West town. Most of the IDPs are in the host community and others in the school. In terms of Water Supply in Mundri West there are 122 boreholes from these only 64 are functional and 58 boreholes are currently non-functional. Sanitation coverage for IDPs in Mundri West is very low with only few emergency latrines and some unimproved household latrines for IDPs as well as host communities. Therefore urgent support of rehabilitating the existing boreholes and construction of shared emergency family latrines together with hygiene promotion is critical.

3. Description Of Beneficiaries

The beneficiaries targeted will be vulnerable communities affected by food and nutrition crises in Aweil South and Aweil east counties of Northern Bahir el Ghazel stste and IDPs and vulnerable communities affected by recent conflicts in Magwi county of Eastern Equatoria state and Mundri East and Mundri West counties of Western Equatoria state.

4. Grant Request Justification

In response to the grave and deteriorating nutrition situation in NBeG, UNICEF South Sudan launched a scale-up strategy in July 2016. The strategy aimed to ensure an integrated and scaled response from all five UNICEF sectors of health, nutrition, education, child protection, and WASH. UNICEF and partners' response, which started in July and was fully consolidated in September, was effective in averting the crisis. Despite the progresses made in reducing Global Acute Malnutrition and Malaria outbreak during the scale-up response from July to Dec 2016, UNICEF and partners need to consolidate the emergency WASH response and reach the areas which were not covered by the 2016 WASH interventions. In addition based on the malnutrition and disease outbreak trend analysis of last four years, it is understood that scale-up interventions are highly required from March to July. Therefore building on the interventions implemented in 2016, this project aims to strengthen current WASH programme responses and help possibly avert similar crisis. The project looks for immediate and medium term solutions for the WASH issues that are aggravating the malnutrition crises in the area. Therefore the key WASH activities planned in this project are targeting the OTPs, TSFPs, Stabilization centers and communities highly affected by the food security and nutrition crises in Aweil South and Aweil west counties of Northern Bahir el Ghazel state. The WASH component will provide access to safe water supply, sanitation and hygiene services for malnourished children and their families, pregnant women and lactating mothers visiting the health and nutrition centers. The community water interventions will also support the communities by providing refresher training and fast moving spare parts and tools for WASH committees and pump attendants and will be implemented by engaging local pump mechanic associations to ensure their continuous presence and support to communities.

In Mundri West currently there are 3,772 IDPs within Mundri West town. Most of the IDPs are in the host community and others in the school. In terms of Water Supply in Mundri West there are 122 boreholes from these only 64 are functional and 58 boreholes are currently non-functional. In Mundri East currently there are 11,779 IDPs within Mundri East town, in Lui Payam and Lui Boma. In terms of water supply Mundri East has very low water supply coverage with only 41 water points from which only 26 are functional and 15 non-functional. Sanitation coverage for IDPs in both Mundri East and Mundri West is very low with only few emergency latrines and some unimproved household latrines for IDPs as well as host communities. Therefore urgent support of rehabilitating the existing boreholes and construction of shared emergency family latrines together with hygiene promotion is critical.

5. Complementarity

The overall WASH situation is magnified by the endemic nature of waterborne diseases like diarrhea and acute intestinal infection which disproportionately affect children under 5. High malnutrition rates are strongly linked to poor WASH conditions exemplified in the diarrhea-malnutrition cycle which is prevalent in vulnerable populations. As a result emergency WASH response will complement the health and nutrition interventions in target locations and help on reduction of morbidity and mortality.

LOGICAL FRAMEWORK

Overall project objective

To provide safe water supply, sanitation and hygiene promotion services for 25,000 vulnerable host communities and IDPs affected by food and nutrition crises and conflicts in Aweil West and Aweil South counties of NBGL State and Mundri West county of Western Equatoria state.

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.		SO1: Save lives and alleviate the suffering of those most in need of assistance and protection	100				
Contribution to Cluster/Sector Objectives : The project will directly contribute to the WASH cluster objective two, which is re-establish and improve access to water, sanitation and hygiene promotion services for the vulnerable population affected by conflict, disease outbreak, acute malnutrition and floods.							
Outcome 1							
Increased access to water, sanitation and hygiene services for 25,000 vulnerable people in three target counties of NBGL and WES to complement health and nutrition Interventions to reduce morbidity and mortality.							
Output 1.1							
Description							
25,000 vulnerable people in 3 target counties benefited from access to safe water supply							
Assumptions & Risks							
No major outbreak of conflict that restrict access to the target locations							
Indicators							
			End cycle beneficiaries				End cycle
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of people provided with sustained access to safe water supply [SPHERE Standard]...	5,400	6,700	6,200	6,700	25,000
Means of Verification : Project progress reports, Field Mission reports							
Indicator 1.1.2	WATER, SANITATION AND HYGIENE	[Frontline] Number of water points/boreholes rehabilitated					50
Means of Verification : Field Mission Reports, project Monitoring reports							
Activities							
Activity 1.1.1							
Rehabilitation of 50 Hand pumps							
Activity 1.1.2							
Training of 50 WASHCOMs on operation and maintenance of water points							
Output 1.2							
Description							
12,000 vulnerable people in 3 target counties benefited from access to improved sanitation facilities at home and in health and nutrition facilities							
Assumptions & Risks							
No major conflict outbreak in target locations restricted access to project sites							
Indicators							
			End cycle beneficiaries				End cycle
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target
Indicator 1.2.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of people with access to improved sanitation facilities	2,000	3,500	3,000	3,500	12,000
Means of Verification : Field Monitoring Reports, Project progress Reports							
Indicator 1.2.2	WATER, SANITATION AND HYGIENE	[Frontline] Number of new latrines constructed/rehabilitated					20
Means of Verification :							
Activities							
Activity 1.2.1							
Construction of 20 emergency Latrines							
Activity 1.2.2							
Construction of 8 sanitation facilities in health/Nutrition Centers							
Activity 1.2.3							
Rehabilitation of 3 existing sanitation facilities in health/nutrition centers							
Output 1.3							
Description							

25,000 vulnerable people in 3 target counties provided with hygiene messages focusing on hand washing with soap, latrine use and household safe water handling

Assumptions & Risks

No major outbreak of conflict that restrict access to target counties

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.3.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of people reached through direct and participatory hygiene promotion activities	5,400	6,700	6,200	6,700	25,000

Means of Verification : Field Monitoring reports, Hygiene promoters weekly Reports, Project progress Reports

Indicator 1.3.2	WATER, SANITATION AND HYGIENE	[Frontline] Number of community based hygiene promoters trained					60
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Means of Verification :

Activities

Activity 1.3.1

Training of 60 Hygiene promoters from 3 target counties

Activity 1.3.2

Hygiene promotion in 3 target locations

Additional Targets :

M & R

Monitoring & Reporting plan

Field Monitoring (Programmatic visit) is a core pillar of the Harmonized Approach to Cash Transfers (HACT) which has been adopted by UNICEF to mitigate risk of failure by obtaining evidence on the utilization of resources for programme implementation and progress towards achievement of planned results. It also includes focus on seeking inputs from beneficiaries for identifying gaps and bottlenecks. The proposed field monitoring system for this project will focus on validating progress reported by contractors, capturing the voice of community and improving the quality of response by covering issues related to access, quality, supplies, equity and do no harm and at the same time will also feed the project management team with an overview of field monitoring findings issues for improved decision making and achievement of results

UNICEF will have three staff monitoring the project, one international WASH Specialist and two national WASH Officers(One in NBeG and One in WES), who will be regularly visiting the project sites and overseeing the implementation of the WASH services planned by this project. In addition, UNICEF will coordinate with other WASH partners working in target locations to ensure no duplication of efforts and overlapping of activities in the same area. The project will be reporting mid-term progress as well as a final narrative and financial reports through the GMS system as per the requirements of SSHF after the report compiled by the project staff has been reviewed and cleared at different levels within UNICEF WASH section and the Deputy Representative's office.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Rehabilitation of 50 Hand pumps	2017				X	X	X	X	X	X			
Activity 1.1.2: Training of 50 WASHCOMs on operation and maintenance of water points	2017					X		X					
Activity 1.2.1: Construction of 20 emergency Latrines	2017					X	X	X					
Activity 1.2.2: Construction of 8 sanitation facilities in health/Nutrition Centers	2017				X	X	X	X	X	X			
Activity 1.2.3: Rehabilitation of 3 existing sanitation facilities in health/nutrition centers	2017				X	X	X						
Activity 1.3.1: Training of 60 Hygiene promoters from 3 target counties	2017					X	X						
Activity 1.3.2: Hygiene promotion in 3 target locations	2017				X	X	X	X	X	X			

OTHER INFO

Accountability to Affected Populations

Beneficiaries are consulted and engaged in monitoring of the project activities in the communities, participating in the management of water points, sanitation facilities, and hygiene promotion activities. In addition, UNICEF, through and its partners in the project area, will conduct regular meetings with community representatives where partners regularly inform and update community representatives on the planned project activities.

Implementation Plan

Activities will be implemented as per the work plan outlined above. All UNICEF's humanitarian principles (Humanitarian Imperatives, Neutrality, Impartiality, Do no/less harm, Accountability, Participation and Respect for culture and custom) will be strictly adhered to during the implementation. UNICEF in coordination with Health and Nutrition implementing partners will aim to meet the objective of reducing morbidity and improving health status of target populations in the project area. Regular monitoring of the intervention (financial and programmatic) will be carried out and the affected communities will be consulted for feedback. Arrangements will be made to avoid any kind of exclusion. Accountability will be fixed at all levels to ensure affected communities get effective and efficient services of adequate quantity and acceptable quality.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
IAS	Coordinate on all project activities in selected locations to avoid overlap of activities as well as to ensure complementarity of the two projects for better impact
CEDS	Coordinate on all project activities in selected locations to avoid overlap of activities as well as to ensure complementarity of the two projects for better impact

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

According to Food Security and Nutrition Monitoring System Report of WFP and its Partners in January 2017, 65% of the families in NBGL state are female headed families. In addition the large number of IDPs in Mundri East, Mundri West and Magwi are mainly women and children. Therefore the planned project activities will be implemented through gender lenses; segregated designs for latrines and planned engagement of women at all levels make this project contribute significantly for gender equality

Protection Mainstreaming

Consideration will be taken to ensure there is no gender based violence arising as a result of the WASH services being provided in the targeted areas. Dignity of women and girls will be maintained by providing secure and appropriately located gender segregated sanitation facilities in the targeted health and nutrition facilities as well as the emergency latrines targeting the IDPs.

Country Specific Information

Safety and Security

UNICEF as part of United Nations Security System follows the UNDSS security measures in project locations to ensure its staff safety and security while implementing project activities. Currently, most parts of NBeG and Mundri West are safe and no major security challenges are expected on implementation of the project activities. In addition, UNICEF contractors, service providers, and their staff are briefed on any possible security and safety issues that they may face during provision of services including reporting mechanisms and mitigation measures

Access

Currently there is no any access problem to the target project area

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
Staff and Other Personnel Costs							
1.1	WASH Specialist - International -25%	D	1	18,794.00	6	30.00	33,829.20
1.2	WASH Officers - 2 National officers - 50 %	D	2	7,186.00	6	50.00	43,116.00
1.3	WASH programme Assistant - National - 50%	S	1	3,666.00	6	50.00	10,998.00
	Section Total						87,943.20
Contractual Services							
4.1	Rehabilitation of hand pumps	D	50	1,200.00	1	100.00	60,000.00
4.2	Construction of WASH facilities in health and nutrition centers	D	8	6,000.00	1	100.00	48,000.00
4.3	Rehabilitation of WASH facilities in health and nutrition centers	D	3	3,000.00	1	100.00	9,000.00
4.4	Construction of emergency latrines for IDPs	D	20	500.00	1	100.00	10,000.00
4.5	Training of WASHCOMs	D	50	300.00	1	100.00	15,000.00
4.6	Hygiene promotion through community hygiene promoters (each county 20 hygiene promoters*150 days*4 USD/day = 12000USD/County)	D	3	12,000.00	1	100.00	36,000.00
4.7	Training of hygiene promoters	D	60	300.00	1	100.00	18,000.00
4.8	Transportation of project supplies (3 trips one in each county)	D	3	11,000.00	1	100.00	33,000.00
	Section Total						229,000.00

Travel								
5.1	Domestic Travel costs (Flight costs @ \$400 return for Juba CO office staff travelling to Target locations to support FO staff) and DSA (91 USD*7 days each trip =637 USD). Total 1037 per trip	D	3	1,037.00	1	100.00	3,111.00	
5.2	Road travel cost (fuel, vehicle maintenance etc.) for supervision and monitoring field trips to projects sites in target locations @ \$400 per trip.	D	10	400.00	1	100.00	4,000.00	
Section Total							7,111.00	
General Operating and Other Direct Costs								
7.1	Cross sectoral operating costs (15% of the total Programme cost)	S	1	49,778.00	1	100.00	49,778.00	
Section Total							49,778.00	
SubTotal			215.00				373,832.20	
Direct								313,056.20
Support								60,776.00
PSC Cost								
PSC Cost Percent								7.00
PSC Amount								26,168.25
Total Cost								400,000.45
Project Locations								
Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name	
		Men	Women	Boys	Girls	Total		
Northern Bahr el Ghazal -> Aweil South	50	2,700	3,350	3,100	3,350	12,500		
Northern Bahr el Ghazal -> Aweil West	30	1,620	2,010	1,860	2,010	7,500		
Western Equatoria -> Mundri West	20	1,080	1,340	1,240	1,340	5,000		
Documents								
Category Name				Document Description				