

Requesting Organization :	Islamic Relief Worldwide			
Allocation Type :	2018 – SHF 2nd Round Standard Allocation			
Primary Cluster	Sub Cluster	Percentage		
REFUGEE CONSULTATION FORUM		100.00		
		100		
Project Title :	Enhance and support the Health and Protection services for South Sudan refugees and vulnerable Host communities in West Kordofan State-envelop 3(Refugees (out of camp)			
Allocation Type Category :				
OPS Details				
Project Code :		Fund Project Code :	SUD-18/HSD20/SA2/RCF/INGO/8199	
Cluster :		Project Budget in US\$:	330,000.60	
Planned project duration :	12 months	Priority:		
Planned Start Date :	01/04/2018	Planned End Date :	31/03/2019	
Actual Start Date:	01/04/2018	Actual End Date:	31/03/2019	
Project Summary :	<p>This lifesaving project aims to reduce vulnerability, alleviate sufferings of out of camp South Sudan refugees and host community in El Mairam Locality of West Kordofan with special focus on women, girls and children as well as other refugees and host community members.</p> <p>The project intends to deliver integrated health and protection lifesaving interventions to save their lives and maintain human dignity.</p> <p>In regard to health, the project intends to focus on delivering health activities by focusing on out of camp SS refugees and host community through provision of mobile investigation and medical treatment in their settlements inside El Mairam and in adjacent villages where SS refugees have no access to such services. The project aims to conduct mobile clinic on monthly basis and carry out integrated outreach sessions and mobile team for immunization and ANC services covering 6,000 SS refugees and host community in El Mairam with comprehensive health services.</p> <p>The mobile clinic will compose of medical doctors, medical assistants, lab technicians, midwives and trained nurses whom will take care of carrying out the weekly mobile medical services for refugees. The project will train community health promoters to accompany the mobile clinic team to deliver health awareness rising sessions and orient the community on health interventions.</p> <p>The project will establish referral system to deal with complicated cases to refer for further treatment in adjacent towns with high quality services. Within the system, the project will provide referral cost, transportation and medical costs for SS refugees at 100% during project lifetime.</p> <p>Health awareness rising campaigns and orientation sessions will be organized for target community during the mobile clinics and outreach immunization campaigns.</p> <p>The project plan to train vaccinators and community volunteers on basic immunization training, conduct of 60 awareness rising sessions to increase utilization of lifesaving health interventions, train of 100 community health promoters and volunteers on health promotion to contribute in delivering and conduction of 60 awareness and ANC sessions related to STIs, HIV/AIDS.</p> <p>Through this project, support will be given to organize the National Immunization Days (NIDs) and EPI campaign for eradicating Poliomyelitis among children under 5.</p> <p>Indoor spray campaigns will be conducted in coordination with Ministry of Health and El Mairam Locality in refugee's sites and host community locations to contribute in managing of vector control and combat insects breeding and contamination factors. During these campaigns IRW will provide Logistic support, incentive for staff and additional human resource while government will provide equipment, pesticide and trained human resource.</p> <p>For protection activities, the project will focus on provision of protection services for out of camp refugees (Women & Children) through strengthen the existing village profiles to develop and enhance referral pathway through community sensitization forums, printing of service maps, coordination meetings of network members and linking services to beneficiaries.</p> <p>The project also intends to conduct awareness raising forums on community based child protection, HIV transmission and sexually transmitted disease for adolescent girls and women, boys and men including awareness on FGM other GBV issues including referral pathways.</p> <p>The intervention will also focus on PSN and SGBV survivors by supporting them to start up business (IGA). The trained beneficiaries will be given start-p capital and supported to run IGAs in a bid to support their families and increase their income.</p> <p>The project will train CBPNs on case management and link them with the service provide such as MOSW and police (for legal support).</p> <p>Direct support will be considered and given to 100 WAR families of refugee children and their host to cushion them from vulnerability..</p>			
Direct beneficiaries :				
Men	Women	Boys	Girls	Total

2,100	2,400	600	900	6,000
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Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Other	2,100	2,400	600	900	6,000

Indirect Beneficiaries :

Project indirect beneficiaries are identified as South Sudanese refugees, host community individuals and IDPs whom are not directly benefitting from the health treatment and protection activities, but they are to some extent benefitting for attending the health awareness sessions or indirectly benefitting from other protection activities within their families or surroundings.

Catchment Population:

The project catchment population includes all other beneficiaries within El Mairam including neighboring villages whom receive treatment the mobile clinics, the immunization campaigns and even benefit from protection programs. Total estimates for the catchment population may reach 10,000 individuals including the project targets.

Link with allocation strategy :

In line with envelope 3 of the allocation strategy 'South Sudanese refugees (out of camp)' this project will target members of the refugee and host community in El Mairam locality, West Kordofan. The project will address the immediate health and protection needs of the vulnerable population through an integrated lifesaving activities , with the hope of ensuring satisfactory services. We will be building on our previous interventions in the same localities to ensure that we are adopting more efficient and sustainable approaches for out of camp refugees and their host communities in line with the allocation strategy.

The project interventions are closely aligned and linked with the 2018 Humanitarian Response Plan (HRP). This intervention contributes to outcome two of the HRP; displaced populations, refugees, returnees and host communities meet their basic needs and/or access to essential basic services while increasing their self-reliance.

The project is addressing the urgent needs of South Sudan refugees including the daily new arrival in El Mairam which is one of the front reception areas. Project deliverable and activities will ensure provision and delivery of health accessibility as well as protection services. This allocation is developed and closely aligned with the strategic paper that contributes to outcome two of the HRP; displaced populations, refugees, returnees and host communities meet their basic needs and/or access to essential basic services while increasing their self-reliance.

Sub-Grants to Implementing Partners :

Partner Name	Partner Type	Budget in US\$
Global Aid Hand	National NGO	93,336.00
		93,336.00

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

Other Funding Source	Other Funding Amount

Organization focal point :

Name	Title	Email	Phone
Syed Shanawaz Ali	Country Director	SyedShahnawaz.Ali@irworldwide.org	00249123336101
Shihab Mohamed Ali	Acting Head of Program	Shihab.Mohamedali@irworldwide.org	00249123336125
Ilham Mubarak Ahmed	Senior program coordinator	Ilham.Mubarak@islamic-relief.org.sd	00249123336119

BACKGROUND

1. Humanitarian context analysis

The war conflict that broke out in South Sudan has forced thousands of people to flee towards north Sudan seeking refuge and peace. This continuous fleeing of refugees across the border has exacerbated the existing poor conditions and added further burden for host communities in the adjacent border states and localities, with El Mairam in West Kordofan being one of the worst affected due to its proximity to the border.

According to UNHCR reports the number of refugees entering Sudan's borders since the conflict broke are ; total number of refugees up to date 772,715, total registered for 2017 are 195,599 and for December 2017 alone 3,738 refugees were registered. In West Kordofan, the total number reported are 15,867 refugees with El Mairam hosting the majority of these; 10,290 (5,638 female and 4,652 male) according to UNHCR biometric registrations recently completed.

Due to this context, UNHCR conducted global standardized expanded nutrition survey (SENS) which indicates critical GAM rates in West Kordofan, the preliminary findings of the SENS concluded for El Mairam and Kharasana in November 2017 indicate global acute malnutrition (GAM) rates among children 6-59 months of age of 19.6% in Kharasana and 16.8% in El Mairam, which is above the emergency threshold of 15%. High prevalence of anemia among both refugee children and women was also noted for El Mairam. Prevalence of stunting across both settlements remains low. The SENS assessed the general health, nutrition, and mortality indices of refugees and preliminary findings will be used to develop practical and action-oriented recommendations to ensure a targeted response is in place to address the health, nutrition and WASH issues identified by the assessment.

There are few NGOs recently established their offices in West Kordofan, only IRW and GAH established in El Mairam where Concern is delivering their activities from El Muglad. Despite the efforts of these NGOs in delivering some humanitarian assistance to the arrival refugees and host community, still WK State and the target population in El Mairam, remains far below accepted standards in relation to access to basic services.

2. Needs assessment

According to reports from UNHCR, UNICEF and HAC, there is huge gap in terms of health services to target groups. UNHCR field visit report shared in August 2017 presents that, partners presence in West Kordofan are very limited in number and only focused on a few interventions. The report identified that, refugees in El Mairam are living within and in proximity of the town and health care services are provided through the MoH health clinic however space for provision of services is inadequate. The adult male ward is a temporary structure in a poor state, EPI and nutrition programs are confined within one room and there is no Stabilization Centre for treatment malnourished children with medical complications. The staffing capacity is limited (1 Doctor, 1 Med Assistant, 4 Nurses, 4 Midwives, 1 drug dispenser, 1 Lab Technician, 7 Nurse assistants, 7 EPI assistants). Drugs, and medical supplies are in short supply (last supply received was on 19 May 2017 and was consumed within a month), and equipment and refrigerator are needed. An operation theater has been established which is delivering roughly 10 caesarian section operations per month).The UNHCR assessment also indicates that, critical need for personal hygiene kits across South and West Kordofan. At least 20,000 refugee women and girls of reproductive age (13-49 years) living in settlements across both states are in critical need of personal hygiene kits to manage their menstrual health in a safe and dignified manner. Access to menstrual hygiene materials is an essential component of refugee protection by enabling refugee women and girls to participate in daily life, including school attendance and community participation, while also helping to maintain their basic dignity during practicing their routine tasks.

The report also mentioned that, significant proportion of refugees are living outside established settlement locations, and local authorities are demanding for additional support in order to cope with the service delivery challenges. The referral of patients for complicated cases was also observed as a major gap. Unfortunately, West Kordofan will not be benefitting from the recent allocation of ambulances (only five are available and have been allocated as follows: East Darfur-1, South Darfur-1, South Kordofan-1 (covering El-Sarajiya), White Nile-2. For Infection Prevention & Control (IPC) and waste care management, the report also stated that major gaps are observed. In regard to Mortality and Disease surveillance, the EWARN system is in place for notifiable diseases. A gap exists on availability of a proper mortality surveillance system. For epidemic preparedness and response the report distinguished that the level of preparedness and response is rather dismal. Facilities lacked basic stock for medical supplies (ringers lactate, ORS, Personal Protective Equipment-PPE). Additionally, there is no provision for case isolation and management in case of an outbreak (CTC). Also HIV/AIDS/TB and Malaria, the report mentioned that no deliberate interventions (and or activities) aimed at addressing HIV/TB issues. No Long lasting Insecticide Treated Nets (LLITNs) were seen at the field level. There were no RDT (Rapid Diagnostic Test) kits for malaria.

3. Description Of Beneficiaries

The project is targeting 6,000 direct beneficiaries (2,400 women, 2,100 men, 900 girls and 600 boys) from South Sudan refugees and vulnerable host communities in El Mairam locality of West Kordofan State, including IDPs and conflict affected populations whom have been displaced from their villages and settled in El Mairam. A further estimated 1,500 will indirectly benefit from the project interventions especially for awareness rising campaigns, protection activities and medical treatment through mobile clinics, immunization campaigns and orientation sessions during these activities.

In particular, the project will focus on out of camp South Sudanese women, children and elderly people who have arrived from South Sudan and settled in El Mairam and the adjacent villages, besides supporting the resident host community and IDPs. In health and protection interventions the project plans to cover 6,000 individuals comprising of (2,400 women, 2,100 men, 900 girls and 600 boys) including host communities

The project target beneficiaries were identified and selected through the involvement of community organizations, national NGOs and other relevant stakeholders based on the figures of recent biometric registrations conducted by UNHCR in El Mairam., However the project will focus on the neediest groups

4. Grant Request Justification

Building on current interventions in the targeted locality the project aims to improve access to health and protection services for refugees and vulnerable host community members in El Mairam, West Kordofan through a comprehensive health and protection activities, targeting a total of 6,000 (2,100 males, 2,400 women, 600 boys and 900 girls) vulnerable refugee and host community member. This project will enhance and support health basic needs as well as protection to ensure target beneficiaries have access in their settlements to minimum services. The strategy of this intervention is to support and reinforce positive coping and adaptive mechanisms, strengthening resilience and enhancing self-reliance. This project will be implemented in El Mairam which has been classified as high priority for the targeted sectors. The stake holders will be given roles in project planning, implementation, monitoring and evaluation. Through this intervention IRW aims to not only meet the basic needs of the targeted communities but will also introduce new opportunities aimed at increasing the capacity of beneficiaries. All key stakeholders are crucial in our exit strategy to ensure the long term sustainability of the projects for that reason relevant stakeholders including government counterparts were consulted in the design and implementation of the activities. The focus from the beginning of the project is on capacity building of the beneficiaries so that they are able to take over the project activities once the project phases out. Beneficiaries are taught transferable skills that build self-reliance in turn reducing dependency on humanitarian assistance. The skills and capacity built at the local level will help the community to maintain and expand the project activities with the intention of continuing to do so beyond the project cycle. Through the project activities, partnerships and linkages with local government and other organizations will be developed, local organization and human capacity will be built through training and participation in project activities and local and external resources will be mobilized. The exit plan will be communicated to the beneficiaries from the project inception so they are aware of the plans and fully understand and accept the exit strategy.

5. Complementarity

The current project interventions are complementing the ongoing and past delivered activities in El Mairam for both refugees and host community members. IRW is currently implementing WASH and protection activities for target groups and these new interventions will complement these efforts in filling the gaps in terms of health provision activities. The planned mobile clinic intervention and outreach immunization campaigns will cover the refugees in El Mairam and adjacent villages with significant number of refugees whom are not able to get access to health facilities in the town. The project is also complementing the awareness and sanitation sessions as well as building of refugees and host community through training of community mobilizers to conduct awareness rising sessions on health lifesaving interventions.

IRW will continue and strengthen their coordination with Concern and GAH activities in El Mairam for supporting the SS refugees and hosting community.

LOGICAL FRAMEWORK

Overall project objective

Contribute to improvement of an appropriate and reliable health, and Protection services of the target communities through consortia efforts.

REFUGEE CONSULTATION FORUM

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Address the lifesaving assistance and protection needs of South Sudanese refugees.	Outcome 1: LIFESAVING: Populations affected by natural or manmade disasters receive timely assistance during and in the aftermath of the shock	100

Contribution to Cluster/Sector Objectives : This project contributes to outcome two of the HRP; displaced populations, refugees, returnees and host communities meet their basic needs and/or access to essential basic services while increasing their self-reliance

Outcome 1

Displaced populations, refugees, returnees and host communities meet their basic needs and/or access basic services while increasing their self-reliance.

Output 1.1

Description

Health status of 6000 refugees and host community comprising of (2,100 men, 2,400 women and 1500 children) in El Mairam locality of West Kordofan improved.

Assumptions & Risks

reports ,field visits and feedbacks from communities

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	REFUGEE CONSULTATION FORUM	# of refugees with access to primary health care (HRP 2018)					6,000
Means of Verification : reports ,field visits and feedbacks from communities.							
Indicator 1.1.2	REFUGEE CONSULTATION FORUM	number integrated outreach sessions and mobile team for immunization and ANC services					44
Means of Verification : reports ,field visits and feedbacks from communities							
Indicator 1.1.3	REFUGEE CONSULTATION FORUM	number community health promoters and volunteers on health promotion trained					100
Means of Verification : reports ,field visits and feedbacks from communities							
Indicator 1.1.4	REFUGEE CONSULTATION FORUM	Number of indoor spray campaigns for refugees sites and host community conducted					24

Means of Verification : reports ,field visits and feedbacks from communities

Indicator 1.1.5	REFUGEE CONSULTATION FORUM	Number National Immunization Days (NIDs) and EPI campaign for eradicating Poliomyelitis among children under 5 supported						3
Means of Verification : reports ,field visits and feedbacks from communities								
Activities								
Activity 1.1.1								
Standard Activity : Provision of health services for refugees								
Conduct of 44 integrated outreach mobile clinics for treatment of urgent cases								
Activity 1.1.2								
Standard Activity : Provision of health services for refugees								
Establishment and support referring system of most severe cases to big hospitals for treatments(185)								
Activity 1.1.3								
Standard Activity : Provision of health services for refugees								
Conduct of 44 integrated outreach sessions and mobile team for immunization and ANC services								
Activity 1.1.4								
Standard Activity : Provision of health services for refugees								
Train vaccinators and community volunteers on basic immunization training(2training)								
Activity 1.1.5								
Standard Activity : Provision of health services for refugees								
Conduct of 60 awareness rising sessions to increase utilization of lifesaving health interventions								
Activity 1.1.6								
Standard Activity : Provision of health services for refugees								
Train of 100 community health promotors and volunteers on health promotion								
Activity 1.1.7								
Standard Activity : Provision of health services for refugees								
Conduct 60 awareness and ANC sessions related to STIs, HIV/AIDS								
Activity 1.1.8								
Standard Activity : Provision of health services for refugees								
Conduct of 24 indoor spray campaigns for refugees sites and host community								
Activity 1.1.9								
Standard Activity : Provision of health services for refugees								
Support the National Immunization Days (NIDs) and EPI campaign for eradicating Poliomyelitis among children under 5								
Outcome 2								
Enhanced child protection for 5000 vulnerable refugees and 500 host community members including 1500 women, 500 men 1500 girls and 1500 boys in El Mairam								
Output 2.1								
Description								
Improved access to protection services for vulnerable children and their families								
Assumptions & Risks								
Number of children receiving direct support 100 50 girls 50 boys Number of PSNs engaged in livelihood activities - 30								
Indicators								
			End cycle beneficiaries				End cycle	
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target	
Indicator 2.1.1	REFUGEE CONSULTATION FORUM	# of refugees households supported through long-term livelihoods interventions. (HRP 2018)					50	
Means of Verification : Activity completion report, monitoring reports, school stock registers and MoE hand over document, photographs								
Indicator 2.1.2	REFUGEE CONSULTATION FORUM	number of WAR supported					100	
Means of Verification : Activity completion report, monitoring reports, school stock registers and MoE hand over document, photographs								
Indicator 2.1.3	REFUGEE CONSULTATION FORUM	number of UASC supported with cash					100	
Means of Verification : Activity completion report, monitoring reports, school stock registers and MoE hand over document, photographs								
Indicator 2.1.4	REFUGEE CONSULTATION FORUM	number of child group leaders trained					12	
Means of Verification : Activity completion report, monitoring reports, school stock registers and MoE hand over document, photographs								
Activities								

Activity 2.1.1
Standard Activity : Provision of protection services for refugees (Women & Children)
Strengthen existing village profiles to develop and enhance referral pathway through community sensitization forums, printing of service maps, coordination meetings of network members and linking services to beneficiaries
Activity 2.1.2
Standard Activity : Provision of protection services for refugees (Women & Children)
Conduct awareness raising forums on community based child protection, HIV transmission and sexually transmitted disease for adolescent girls and women, boys and men including awareness on FGM other GBV issues including referral pathways.
Activity 2.1.3
Standard Activity : Provision of protection services for refugees (Women & Children)
Support to 30 PSN and SGBV survivors to start up business (IGA), Trained beneficiaries will be given start-p capital and supported to run IGAs in a bid to support their families get income for livelihoods but more so for supporting childrens' education
Activity 2.1.4
Standard Activity : Provision of protection services for refugees (Women & Children)
Train CBPNs on case management and link them with the service provide such as MoSW and police(for legal support)
Activity 2.1.5
Standard Activity : Provision of protection services for refugees (Women & Children)
Direct support to 100 WAR families of refugee children and their host to cushion them from vulnerability and ensure children attend school regularly (covering, food, clothes, medical and transportation costs)
Activity 2.1.6
Standard Activity : Provision of protection services for refugees (Women & Children)
Conduct children group session within the 12 trained child group leaders using games drama, poetry and performances. 12 child groups each conducting a session per month making 144 sessions.
Activity 2.1.7
Standard Activity : Provision of protection services for refugees (Women & Children)
Provide direct support to 100 UASC through a cash transfer system targeting vulnerable school children to help support school retention. Children will be selected from those new enrolled to school and those with CP issues by Social workers teachers and Committee members
Additional Targets :

M & R

Monitoring & Reporting plan

IRS will allocate required resources for the project monitoring and evaluation in order to measure key results, and to document the effectiveness of its programme approach. A detailed Monitoring Framework Matrix will be developed to identify operational indicators, develop data collection instruments, and finalize data collection processes. At the Country office level, the Quality Assurance Manager will support the field staff in developing the Monitoring and Evaluation framework of the project, which will be tracked and updated regularly. The office in El Fulla WK will follow up the implementation of activities at the ground. Project stakeholders such as MOH, Water Authorities and representatives from El Mairam Locality will all effectively participate in the monitoring activity. Refugee's leaders and host community representatives will be involved and participate in the entire monitoring plan of activities. Field visits will be all conducted by joint mission form all project stakeholders and will use indicators to verify the progress of the project as well as learning log to ensure learning practice. Project field officers – WASH, Health and Nutrition officers will be deployed and based in El Mairam to monitor daily implementation and supervise the progress at the ground. Weekly reports and monthly reports will be shared with project coordinator at State level, donor and other stakeholders. Regular financial monitoring will form part of the process including a detailed analysis of budget versus expenditure reports, and a financial audit and inventory check where necessary. Financial reporting & program reporting will be produced and shared with SHF and IRW IHQ using both IRW & SHF format by qualified and authorized personnel. Monitoring tools will include the use of a detailed Implementation Plan, Monitoring Plan, Logical Framework, Beneficiary Interviews, Field Observations and Stakeholders meetings. Household surveys and data from HAC, COR and line ministries will also be considered. The country office staff including the HoP and Programme Development and Quality Department will conduct field visits to ensure that activities are being implemented as planned and at the expected quality, in addition to the country offices planned quarterly reviews of each field offices projects. The monitoring will be done in consultation with ministry of health and WES and HAC whereby a multi-disciplinary team will undertake a joint field assessment to review progress on project activities and provide technical advices and support to beneficiaries, in addition the project will also be monitored by the WASH cluster and OCHA.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Conduct of 44 integrated outreach mobile clinics for treatment of urgent cases	2018					X	X	X	X	X	X	X	X
	2019	X	X										
Activity 1.1.2: Establishment and support referring system of most severe cases to big hospitals for treatments(185)	2018					X	X	X	X	X	X	X	X
	2019	X	X										
Activity 1.1.3: Conduct of 44 integrated outreach sessions and mobile team for immunization and ANC services	2018					X	X	X	X	X	X	X	X
	2019	X	X										

Activity 1.1.4: Train vaccinators and community volunteers on basic immunization training(2training)	2018					X	X	X	X				
	2019												
Activity 1.1.5: Conduct of 60 awareness rising sessions to increase utilization of lifesaving health interventions	2018					X	X	X	X	X	X	X	X
	2019												
Activity 1.1.6: Train of 100 community health promotors and volunteers on health promotion	2018					X	X	X	X	X			
	2019												
Activity 1.1.7: Conduct 60 awareness and ANC sessions related to STIs, HIV/AIDS	2018					X	X	X	X	X	X	X	X
	2019	X	X										
Activity 1.1.8: Conduct of 24 indoor spray campaigns for refugees sites and host community	2018					X	X	X	X	X	X	X	X
	2019	X	X										
Activity 1.1.9: Support the National Immunization Days (NIDs) and EPI campaign for eradicating Poliomyelitis among children under 5	2018					X	X	X	X	X	X	X	X
	2019	X	X										
Activity 2.1.1: Strengthen existing village profiles to develop and enhance referral pathway through community sensitization forums, printing of service maps, coordination meetings of network members and linking services to beneficiaries	2018					X	X	X	X	X	X	X	X
	2019	X	X										
Activity 2.1.2: Conduct awareness raising forums on community based child protection, HIV transmission and sexually transmitted disease for adolescent girls and women, boys and men including awareness on FGM other GBV issues including referral pathways.	2018					X	X	X	X	X	X	X	X
	2019												
Activity 2.1.3: Support to 30 PSN and SGBV survivors to start up business (IGA), Trained beneficiaries will be given start-p capital and supported to run IGAs in a bid to support their families get income for livelihoods but more so for supporting childrens' education	2018					X	X	X	X	X	X	X	X
	2019												
Activity 2.1.4: Train CBPNs on case management and link them with the service provide such as MoSW and police(for legal support)	2018					X	X	X	X	X	X	X	X
	2019												
Activity 2.1.5: Direct support to 100 WAR families of refugee children and their host to cushion them from vulnerability and ensure children attend school regularly (covering, food, clothes, medical and transportation costs)	2018					X	X	X	X	X	X	X	X
	2019												
Activity 2.1.6: Conduct children group session within the 12 trained child group leaders using games drama, poetry and performances. 12 child groups each conducting a session per month making 144 sessions.	2018					X	X	X	X	X	X	X	X
	2019												
Activity 2.1.7: Provide direct support to 100 UASC through a cash transfer system targeting vulnerable school children to help support school retention. Children will be selected from those new enrolled to school and those with CP issues by Social workers teachers and Committee members	2018					X	X	X	X	X	X		
	2019												

OTHER INFO

Accountability to Affected Populations

IR Sudan remains accountable to responding to the needs of those communities we support by providing guidance on the processes and procedures. IRS is consistently accountable to the beneficiaries & conflict affected populations we work with and their needs ensuring our interventions meet international standards. IRS is bound by our code of conduct in every project we implement which places the needs and rights of those we work with at the centre of our planning and strategizing and provision of life saving projects. The involvement of the beneficiaries as key stakeholders in the project design and implementation helps ensure transparency and sustainability of project activities. IRS has organizational and technical capacity that includes qualified staff and well established offices. IRS strategies are to build on the on-going community settings respecting the local authorities and utilising them for community support. All key stakeholders are crucial in our exit strategy to ensure the long term sustainability of the projects for that reason relevant stakeholders including government counterparts were consulted in the design and implementation of the activities. Furthermore all project activities correlate with the priorities and strategic plans of the state departments and line ministries who will be prepared to take over and maintain the services once the project has finished. As an organization thriving to inculcate Common Humanitarian Standards, IRS uses all possible measures to ensure accountability to affected population. IRS will put a complaint and feedback system in place in the targeted communities and will encourage communities and beneficiaries to share their feedback and complaints, ensuring confidentiality and safety of complainants and use the feedback to improve design and delivery of services. All community segments will be encouraged to participate in the project through community mobilization workshops, awareness sessions, cleaning campaigns and water user committees.

IRW values communities' involvement in all interventions. From the inception moment of the project till the end, leaders and community members will be involved through regular meetings, orientation sessions, and specific trainings. Women are also participating either within the community committee or the women committee. Project ideas are usually discussed among the community committee for reaching fair agreement and acceptance by community. These committees are formed and initiated by IRW either for this project or already formed for other ones.

Implementation Plan

IRW will implement this project through its office in West Kordofan in coordination with MOH, WES and State HAC. Detailed implementation plan will be developed shared with donor and other stakeholders for follow up. Project beneficiaries will be part of the implementation process and will be involved in monitoring the activities progress. IRW will deploy three project officers, WASH, Health and Nutrition all based in El Mairam to supervise the implementation on the ground on daily basis and report directly to project coordinator in El Fulla

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
State Ministry of Health, West Kordofan Humanitarian AID Commission, State Ministry of Social Welfare	The project activities will be implemented in collaboration with Ministry of Health in West Kordofan, IRW and GAH will actively participate in the regular coordination meetings chaired by HAC sharing project progress, lessons learnt and recommendations, Islamic relief Worldwide/GAH will work in collaboration with MOH and Social Welfare

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

In order to address gender equality and women's empowerment participation is key. Women and girls struggle to ensure their needs are highlighted and are increasingly marginalized by the overall humanitarian response. This is despite the fact that majority of the displaced people from the area are women and children, and in some sites female-headed households far outnumber male-headed households. Leadership structures remain male dominated so that any of the community consultations on needs identification and program planning that do take place therefore mostly neglect the specific concerns, priorities, and solutions for women and girls. Gender inequality exacerbates this as women and girls bear responsibility for many daily activities. Early marriage is prevalent and as such girls often miss out on basic education opportunities. The project is designed to contribute significantly to gender equality. The project will contribute significantly to gender equality and ensure the meaningful participation of women, men, girls, and boys. The project has considered distinct needs of women, girls, boys and men during the needs assessment exercise by having dedicated FGDs. This has helped to conduct a deeper gender analysis which will inform the design of the activities, outcomes and objectives. The needs of women, girls, men and boys will be considered in all phases of the project cycle. The project outcome and activities have been designed accordingly to meet these needs. As part of these efforts, the project team will consider equal participation and access to all groups to the project activities and services, particularly women, girls, elderly and people with disability who are the most vulnerable. Women and girls will be consulted about the location of services and their accessibility. As per the gender analysis, women are exposed to different forms of abuse, violence, discrimination and marginalization. Women and girls as well as boys are the main water collectors and they are suffering from bringing water from improved water yards located at distant places from their settlements which affect their safety, pose them to risks and increase burden and time consumed for fetching water including the queuing time. The project in this regard will reduce the risk and burden of women and girls through making access to water supply upon establishing water distribution points near their huts and within family control, Women and young girls usually wake up very early or wait for dark times to go for defecations and sometimes hide under bushes which expose them to risks. The construction of new latrines will enable them avoid open defecation and assures privacy of using latrines at house levels. An analysis of the gendered roles and responsibilities will be conducted to understand the context and barriers faced by women, men, girls and boys in the targeted communities and ensure the project intervention includes activities designed to advance gender equality. The school latrines will be constructed in a gender sensitive manner with secure latrines for both girls and boys to ensure safety and dignity for all girls and boys. Special consideration will be given to cultural norms and preferences of girls and boys in the choice of recreational activities. During the teacher trainings there will be awareness and sensitization on the importance of a gender equality in the classroom, in terms of equal support to both boys and girls in their educational development. Health awareness sessions will be conducted in a sensitive and appropriate manner for girls and boys, and where necessary s

Protection Mainstreaming

The project design will ensure promoting the beneficiaries to acknowledge their rights to live with dignity and their rights to protection and security measures. Moreover it will empower communities, as rights-holders rather than being beneficiaries of aid, to exercise their rights and comply with their duties. This will be done through awareness and orientation sessions with full transparency and information sharing that lead to protecting beneficiaries from misuse of their rights and properties delivered by project.

Women and disabled populations

Protection of women and disabled population will be also assured through involving them to play an active role in the decision-making and making them aware of hazards that may encounter during or after activities implementation. Women and children as well as men will be given their chances to report and provide their feedbacks on delivered activities.

Compliant mechanism should be established and kept in safe locations to enable beneficiaries' access it confidentially including gender, elderly aged, disability, literacy and all groups. Frequent meetings will be organized with different project groups to enable them express their rights, drop suggestion and complaints to delivered services by the project especially regarding corruption, misuse of their properties, staff misconduct or sexual exploitation and abuse.

Child Protection and General protection:

Child protection and protection for other vulnerable persons with specific needs (PSN) will be taken into consideration in all the project activities. It is the organization's policy to provide a safe and secure environment in which children can thrive and develop and where all aspects of their welfare are protected. The project activities have been designed to ensure risks of violence, exploitation, neglect and abuse, including GBV and SGBV, are minimized for children, women as well as other vulnerable PSN. For example there has been special consideration given in the project design to the hand pump construction as well as the latrines to ensure that they are secure i.e. well lit, include locks, gender segregated and close by to communities to ensure dignity and safety especially for girls.

IR Sudan staff will ensure all IR representatives involved in the project including staff, volunteers, implementing partners, contractors, donors or guests when visiting are aware of and adhere to IRS Sudan's Code of Conduct. The IRS Code of Conduct sets out all steps that are reasonably possible to protect children, vulnerable women and men that are beneficiaries of the project from violence, exploitation, neglect and abuse perpetrated by employees, partner organizations, contractors, official visitors and their communities.

Communities and children will be sensitized on the rights of children and made aware of the complaints mechanism in place to ensure they feel comfortable to report and concerns of abuse and confident that appropriate action will be taken and will ensure that they are protected from any repercussions. The team will conduct risk assessments for children and other PSN and put in place strategies to mitigate against potential risk of harm. Regular monitoring and auditing of the IR field offices will be carried out by CO technical staff to ensure that policies and procedures are observed, and participation and feedback from the communities is available.

Country Specific Information

Safety and Security

IRW during implementing of project activities will make sure that all project staff have induction sessions on security guidelines and policies especially those guidelines related to working in emergency areas. Project staff should be aware and have well oriented on security manual and contingency plans. Project staff should be cautious enough to deal with and adhere to security reports received from UNDSS and INGO forum and are capable to analyze the situation at very worse emergency cases. All sudden incidents should immediately reported and shared with country office and with other staff working in the area. Adequate safety measurements will be in place during implementing of activities, such as remote phones, thorayia and other communication devices. Technical staff dealing in construction of water yards, latrines and health facilities should wear appropriate protected cloths, helmets, gloves and use suitable tools and equipment whatever the case

Access

Project location and implementing sites of activities are accessible during most periods that ensures properly and timely implementation. IRW has been working in West Kordofan since 2016 and well acknowledged in project area. The staff is already based in project locations and familiar with accessible roads and routes, even during rainy season which always guarantee their accessibility throughout the year.

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	Programme coordinator	D	1	1,000.00	12	50.00	6,000.00
	<i>Only 50% charging and that too for only a period of 12 months to reduce cost and remaining salary costs will be borne by IRW from other sources. The project coordinator will oversee the implementation of WASH activities; coordinate and monitor the quality of service and coordinate with other departments like finance and logistics department. What has been budgeted here is the employee gross salary for 12 months with the usual rate for PC in most of the state as monthly payment. It also includes social insurance 17% and tax.</i>						
1.2	Health officer	D	1	500.00	12	100.00	6,000.00
	<i>The project officer is responsible for health and hygiene component of the project. He will report to the program coordinator. Implementation and monitoring of the constructed facilities. What has been budgeted here is his salary gross salary for 12 months has charged against this project. It also includes social insurance 17% and tax.</i>						
1.3	Program Development and Quality coordinator	D	1	1,000.00	12	20.00	2,400.00
	<i>PDQC will ensure the of the program with the overall objectives, monitor the regular progress and verify the successful completion of the activities. What has been budgeted here is 20% employee gross salary for 12 months with the usual rate for PC in most of the state as monthly payment. It also includes social insurance 17% and tax.</i>						
1.4	MEAL officer	D	1	500.00	12	50.00	3,000.00
	<i>MEAL officer with the overall objectives, monitor the regular progress and verify the successful completion of the activities. What has been budgeted here is 50% employee gross salary for 12 months with the usual rate for PC in most of the state as monthly payment. It also includes social insurance 17% and tax.</i>						
1.5	Community mobilizers	D	2	300.00	12	100.00	7,200.00

	<i>Assistant Project Officer position support the Project Manager in successfully implementation of all project activities. This includes project inception activities such as community mobilization meetings, capacity building of project frontline staff (outreach workers, outreach supervisors and volunteers), data collection and report writing, undertaking monitoring activities and participating in training of project frontline staff members. What has been budgeted here is their full salary for the project period . It also includes social insurance 17% and tax. Only 12 months charged against this project</i>							
1.6	finance Coordinator	S	1	1,000.00	12	15.00	1,800.00	
	<i>The finance coordinator provides support in process ,budget ,expenses and documentation. what has been budgeted here is the employee gross salary with the usual rate for same post in most INGO Organization monthly payment. Only part of his remuneration (15% from his salary for 12 months has charged against this project. It includes health and social insurance 17% and tax.</i>							
1.7	Admin officer	S	1	500.00	12	50.00	3,000.00	
	<i>AO involved in Admin/procurement logistic tasks required to implement the project. What has been budgeted here is their full salary for the project period. What has been budgeted here is 50% from the employee gross salary with the usual rate for same post in most INGO Organization monthly payment. . It includes health and social insurance 17% and tax</i>							
1.8	Finance officer	S	1	500.00	12	50.00	3,000.00	
	<i>The finance Officer provides support in process ,budget ,expenses and documentation. what has been budgeted here is 50% from the employee gross salary with the usual rate for same post in most INGO Organization monthly payment. It includes health and social insurance 17% and tax.</i>							
1.9	Drivers	S	2	250.00	12	50.00	3,000.00	
	<i>To support the operation of projects in an insecure place like Nertiti which requires guards for field visits, stores, office and quest house. What has been budgeted here is the employee gross salary with the usual rate for same post in the state as monthly payment .It includes social insurance 17 % and tax. 50 from the salary for 12 months charged against this project</i>							
1.10	Guards	S	2	200.00	12	50.00	2,400.00	
	<i>To support the operation of projects in an insecure place like Nertiti which requires guards for field visits, stores, office and quest house. What has been budgeted here is the employee gross salary with the usual rate for same post ithe state as monthly payment .It includes social insurance 17 % and tax. 50% from the salary for 12months charged against this project</i>							
1.11	Cleaners	S	2	200.00	12	50.00	2,400.00	
	<i>To support the operation of projects in an insecure place like Nertiti which requires guards for field visits, stores, office and quest house. What has been budgeted here is the employee gross salary with the usual rate for same post ithe state as monthly payment .It includes social insurance 17 % and tax. 50% from the salary for 12months charged against this project</i>							
	Section Total						40,200.00	
2. Supplies, Commodities, Materials								
2.1	Conduct of 24 integrated outreach mobile clinics for treatment of urgent cases	D	44	1,472.74	1	100.00	64,800.56	
	<i>The activity is planned to conduct mobile clinic for treatment of refugees in their settlements and adjacent villages to El Mairam. The mobile team will composed of doctor, medical assistant, lab technician, nurses and midwives and will be equipped with Medicine and equipment. The clinic will be conducted on monthly basis to ensure that health services are stretched to all refugees in their settlements, as most of them have no access to the health unit in El Mairam. Budget breakdown- Medical officer 1* 11 months * 300 USD= 330, 2 Medical assistant * 11 months * 200 per month = 4400, 2 Nurse * 11 months * 100 USD = 2200, 1 Midwife* 11 months * 100 = 100, 1 Lab technician * 11 months* 100=1100. 4 kits of medicine will be provided which will cost 2900 USD, Mobile rent with fuel and driver 13,200 , lab equipment and Furniture for mobile clinic is 10,167 USD.</i>							
2.2	Establishment and support referring system of most severe cases to big hospitals for treatments	D	186	45.00	1	100.00	8,370.00	
	<i>This activity is meant to support the 186 referral of very complicated cases for further treatment in the very hospitals in adjacent towns. The referral cost 45 USD will support cost of transporting patients and cost of drugs and treatment including investigations and related expenses.</i>							
2.3	Conduct of 12 integrated outreach sessions and mobile team for immunization and ANC services	D	12	2,350.00	1	100.00	28,200.00	
	<i>The activity is planned to conduct outreach immunization team and ANC services for vaccination of children and mother care consultations. The activity also includes delivering health sessions and orientations to patients and mothers during the campaigns. the proposed amounts will cover Logistic support, Incentive for staff, stationary, visibility material</i>							
2.4	Train vaccinators and community volunteers on basic immunization training	D	2	1,900.00	1	100.00	3,800.00	
	<i>The activity is planned to train the vaccinators in the Locality to build their capacity on immunization techniques as well as training of community health promoters to practice the immunization techniques. The cost of activity included cost of training materials, facilitation and incentives for trainees.</i>							
2.5	Train of 100 community health promoters and volunteers on health promotion	D	4	1,500.00	1	100.00	6,000.00	
	<i>This activity planned to conduct 4 training workshops each to train 25 participants on health promotion to assist in mobilizing the community to practice proper health promotion. The cost of activity includes training materials and facilitation fees. Will also include stationary and incentives for participants.</i>							
2.6	Conduct of 24 indoor spray campaigns for refugees sites and host community	D	24	95.00	1	100.00	2,280.00	

	<i>This activity planned to conduct 24 indoor spray campaigns in coordination with the Locality. The cost of activity will include rent of spray pumps, cost of pesticides, incentives for health workers and vehicle rent. The activity also includes delivering messages to refugees and community to participate in the campaign.</i>						
2.7	Support the National Immunization Days (NIDs) and EPI campaign for eradicating Poliomyelitis among children under 5	D	3	500.00	1	100.00	1,500.00
	<i>This activity includes cost of vehicle rent for campaigns, incentives for vaccinators, stationary and visibility materials.</i>						
2.8	Conduct of 60 awareness rising sessions to increase utilization of lifesaving health interventions	D	60	65.00	1	100.00	3,900.00
	<i>This activity includes organizing of open awareness sessions for refugees and host community on health interventions and activities. The activity cost includes fees for service provider, stationaries, loud speakers, rent of generator and vehicle rent.</i>						
2.9	Conduct 60 awareness and ANC sessions related to STIs, HIV/AIDS	D	60	65.00	1	100.00	3,900.00
	<i>This activity planned to hire specialized service provider and conduct sessions on related to STLs HIV/AIDS in refugee's settlements and around target villages where refugees are settled. The activity cost includes cost of generator rent, loud speakers and vehicle rent.</i>						
	Section Total						122,750.56
3. Equipment							
3.1	Computer laptop	D	1	1,500.00	1	100.00	1,500.00
	<i>Computer laptop</i>						
3.2	Office furniture	D	1	2,500.00	1	100.00	2,500.00
	<i>Office furniture for Elmmiram</i>						
	Section Total						4,000.00
4. Contractual Services							
NA	NA	NA	0	0.00	0	0	0.00
	<i>NA</i>						
	Section Total						0.00
5. Travel							
5.1	M & E visits	D	6	500.00	6	100.00	18,000.00
	<i>All monitoring and supervision visits and related costs for travel by field and CO staff. Travel cost for project staff only three travels from Khartoum and WK will be charged under this project. HOP two visits. M&E visits by program coordinators ,M&E officer and coordinator and project staff 4 visits and all this travels are between Khartoum , WK and Elmmiram and this also include per-diem for the travelling staff .Unit cost has been estimated according to recent market surveys,similar projects and projection to last year estimation. Mode of travel includes a mix of travel by air and by road.</i>						
	Section Total						18,000.00
6. Transfers and Grants to Counterparts							
6.1	Project Cordinator	D	1	1,240.00	12	20.00	2,976.00
	<i>Project Coordinator, The position is based in Elmeriam 100%. Managing the GAH projects in Elmeriam. He will manage this projects in all it components Education and protection (child protection , GBV and General Protection) for Global Aid Hand. He/She will be reporting to the West Kordofan Manager and responsible for ensuring that the project is implemented as per objectives, he will supervise the whole project team but specifically the community development officers. He/she will be attending cluster coordination meetings at the Locality and State Level. The cost for this position is USD 1240 total and will be charged 7440 per year paid 50% . calculation is 64% as basic salary, 14% medical insurance, 17% social insurance and 5% transportation</i>						
6.2	Community Development Officer	D	1	775.00	12	50.00	4,650.00
	<i>Community Development officer will work as the technical expert to make sure that this project is applying the correct technical aspects to ensure quality of deliverables and services provided and they will supervise Social Workers . They will conduct assessments in community and schools and link project with existing State level mechanisms for future, advocate for refugee children inclusion in host community schools and ensure quality delivery.</i>						
	<i>This positions provide guidance to social workers who conduct vulnerability assessments. It is expected that they also conduct assessments and BIAs and review recommendations and ensure follow up. They provide supervision to social workers and animators</i>						
	<i>Cost is USD 775 total 9300 per year paid 100% calacualted as 64% as basic salary, 14% medical insurance, 17% social inurance and 5% transportation</i>						

6.3	Social Workers	D	1	264.0 0	12	100.00	3,168.00
<p><i>MoE for education. Have sessions with children in schools and support teachers with PSS and case management</i></p> <p><i>Social workers undertake BIAs, vulnerability assessments and provide supervision to animators and volunteers.</i></p> <p><i>They will dedicate 100% of their time to this project</i></p> <p><i>Total cost is 12672 for 4 officer paid 100% calculated as 64% as basic salary, 14% medical insurance, 17% social insurance and 5% transportation</i></p> <p><i>MoE for education. Have sessions with children in schools and support teachers with PSS and case management</i></p> <p><i>Social workers undertake BIAs, vulnerability assessments and provide supervision to animators and volunteers.</i></p> <p><i>They will dedicate 100% of their time to this project</i></p> <p><i>Total cost is 12672 for 4 officer paid 100% calculated as 64% as basic salary, 14% medical insurance, 17% social insurance and 5% transportation</i></p> <p><i>4 social workers 2 for CP, 1 for GBV and one for general protection</i></p> <p><i>They supervise the community animators and make activity plans for the centers(Women Cente, community center and CFS)</i> <i>They also work in close coordination with MoSW for referral of FTR and with MoE for education. Have sessions with children in schools and support teachers with PSS and case management</i></p> <p><i>Social workers undertake BIAs, vulnerability assessments and provide supervision to animators and volunteers.</i></p> <p><i>They will dedicate 100% of their time to this project</i></p> <p><i>Total cost is 12672 for 4 officer paid 100% calculated as 64% as basic salary, 14% medical insurance, 17% social insurance and 5% transportation</i></p>							
6.4	Finance Assistant	S	1	430.0 0	12	30.00	1,548.00
<p><i>Assist finance officer based at the field level in Elmeriam , Duties include, Review and verify the expenditure at field level. Make sure all payments are made to the relevant peoples. Maintain petty cash for CFS a and women center</i></p>							
6.5	Safety and Security officer	S	1	800.0 0	12	15.00	1,440.00
<p><i>Staff safety and Security is responsible for managing the general organization and staff safety and their security . His salary is estimated at \$800 and is charged at 30% effort level. SHF contribution is \$864.calacualted as 64% as basic salary, 14% medical insurance, 17% social insurance and 5% transportation</i></p>							
6.6	Work on the already developed village profiles to develop and enhance referral pathway - Community sensitization forums, printing of service maps, coordination meetings of network members	D	4	300.0 0	1	100.00	1,200.00
<p><i>Work on the already developed village profiles to develop and enhance referral pathway - Community sensitization forums, printing of service maps, coordination meetings of network members</i></p>							
6.7	Incentives for Community change Agents	D	4	100.0 0	12	100.00	4,800.00
<p><i>Their duties include direct activities with children, women and PSN and other community members, working with community based protection networks and other committees in the community, directing PSNs to the social workers for further management, PSS with children, women and other people coming community centers, making home visits and follow-up, Filling in distribution lists, assist facilitators and other project staff during trainings and activities. Ensure participation of all groups especially those with special/Specific needs. Identify and assist CAR, WAR, PSNs to access services available to them, sensitize community on available services at centers and within community including FTR. Conduct home visits to enrol children to schools</i></p>							
6.8	Support to PSN and SGBV survivors to start up business (IGA)	D	30	300.0 0	1	100.00	9,000.00
<p><i>30 mothers of children in schools who economically active but vulnerable from Single headed household heads including women risk of GBV already trained on IGAs business planning selection and management are supported to select/continue businesses and given start-up cash to start small businesses. The cost estimated according to previous activities is USD 300 per business. beneficiary to receive USD 250 and monitoring, coaching and supervision cost at USD 50 beneficiaries will be encouraged to apply in groups to purchase start up kits for small business Cost 100*300 = \$ 30000; 100% SHF</i></p>							
6.9	Train CBPNs on case management and link them with the service provide such as MoSW and police(for legal support)	D	30	17.00	3	100.00	1,530.00
<p><i>Train CBPNs on case management and link them with the service provide such as MoSW and police(for legal support)</i></p>							
6.10	Conduct children group session within the 12 trained child group leaders	D	1	2,000 .00	1	100.00	2,000.00

	<i>Conduct children group session within the 12 trained child group leaders using games drama, poetry and performances. 12 child groups each conducting a session per month making 144 sessions. Costs for purchase of materials/ items (costumes and simple instruments) Lumpsum USD 460, Each session will cost 10 USD Refreshments for children during sessions per month for 12 months Total USD 1440 Total cost for Activity \$2000 100% SHF</i>						
6.11	Conduct 12 awareness raising forums on community based child protection, HIV transmission and sexually transmitted disease	D	12	150.00	1	100.00	1,800.00
	<i>Conduct awareness raising forums on community based child protection, HIV transmission and sexually transmitted disease for adolescent girls and women, boys and men including awareness and other GBV issues including referral pathways. One session cost \$ 30 (5 sessions per month) costing 150 for refreshment \$ 900 and Allownces for community mobilization 189. Total 2*2089 = \$ 4178</i>						
6.12	Provide direct support to 100 UASC	D	100	15.00	9	100.00	13,500.00
	<i>Provide direct support to 100 UASC through a cash transfer system targeting vulnerable school children to help support school retention. Cost per child per month is \$ 15 for 12 months. Total cost is 15*100*9 = 13500 100% SHF</i>						
6.13	Procure and supply handwashing sets and clean drinking water tanks for 2 schools	D	2	700.00	1	100.00	1,400.00
	<i>Procure and supply handwashing sets and clean drinking water tanks for 2 schools Alfarouk and Abubakar . Each tank costs 350 and each hand washing set costs 400. Cost per school 700; 2 schools 1400; 100% paid by project. Water connection to be done by IRW for all schools</i>						
6.14	Conduct 1 day orientation session for headmaster and senior teachers to assist in supporting project outcomes	D	20	25.00	1	100.00	500.00
	<i>Conduct 1 day orientation session for headmaster and senior teachers to assist in supporting project outcomes. 8 H/Ms 8 teachers and 4 MOE staff. Cost for training \$ 25 per participant. Total Cost 25*45*1=765</i>						
6.15	Direct support to 100 WAR families of refugee children	D	100	150.00	1	100.00	15,000.00
	<i>Direct support to 100 WAR families of refugee children and their host to cushion them from vulnerability and hence ensure children attend school regularly (food clothes medical cost, transport,) through a cash transfer estimated cost per person is 150 USD on average but actual costs will be used as per individual needs. Total cost 100*150= \$ 30000; 100% SHF</i>						
6.16	vehicle rent	D	1	1,204.00	12	50.00	7,224.00
	<i>vehicle rent of project implementation</i>						
6.17	office rent	S	2	750.00	12	50.00	9,000.00
	<i>50% of Almirram and Alfula offices for GAH</i>						
6.18	telecommunication	S	1	250.00	12	50.00	1,500.00
	<i>50% from the renting cost of Elmmiram and Khartoum office for 12months(communications ,utilities ,stationary ,printing ,visibility , fuel</i>						
6.19	utilities	s	1	128.00	12	50.00	768.00
	<i>50% from the Electricity, gas, stationary, toner, printing and other day to day costs of office. Project cost charged for 12months</i>						
6.20	Stationary and printing	s	1	200.00	12	100.00	2,400.00
	<i>stationary and printing for project implementation</i>						
6.21	Fuel for implementation purposes	s	1	250.00	12	100.00	3,000.00
	<i>50% from the fuel for Emmiram office generator for 12 months 50% from the total cost charged in this project</i>						
6.22	M&E vsiste	D	3	300.00	3	100.00	2,700.00
	<i>M&E visits by program coordinators ,M&E officer and coordinator and project staff all this travels are between Khartoum , WK and Elmmiram and this also include per-diem for the travelling staff .Unit cost has been estimated according to recent market surveys, similar projects and projection to last year estimation. Mode of travel includes a mix of travel by air and by road.</i>						
6.23	Community Development manager	D	1	1,240.00	12	15.00	2,232.00
	<i>Position Based in Khartoum and is Leading the Protection and Education Sectors within Global Aid Hand. Part of the Senior Leadership Team member Will contribute to overall project leadership and direction by reviewing and supporting the work of project coordinator and project officers to ensure that there is mainstreaming of protection and gender activities in the implementation, standards are maintained and that set objectives are met. Project will be charged 15% SHF cost is 2232 .calacualted as 64% as basic salary, 14% medical insurance, 17% social insurance and 5% transportation</i>						
6.24	7% PST for implementing partner	D	1	6,510.00	1	100.00	6,510.00
	<i>& % PST cost</i>						
	Section Total						99,846.00

7. General Operating and Other Direct Costs							
7.1	Office rent	S	2	500.00	12	50.00	6,000.00
<i>50% from the renting cost of Elmmiram and Khartoum office for 12months</i>							
7.2	Vehicle repairs	S	2	500.00	4	50.00	2,000.00
<i>50% from the Vehicle maintenance and insurance</i>							
7.3	Utilities	S	1	150.00	12	50.00	900.00
<i>50% from the Electricity, gas, stationary, toner, printing and other day to day costs of office. Project cost charged for 12months</i>							
7.4	Statinary and printing	S	1	200.00	12	100.00	2,400.00
<i>stationary and printing for project implementation</i>							
7.5	Telecommunications and internet	S	1	500.00	12	50.00	3,000.00
<i>50% from the Internet costs for the offices charged over a period of 12 months</i>							
7.6	Food and accomodation	S	1	1,000.00	12	50.00	6,000.00
<i>50% from the food for project staff</i>							
7.7	Fuel for implementation purposes	S	1	1,000.00	12	50.00	6,000.00
<i>50% from the fuel for Emmiram office generator for 12 months 50% from the total cost charged in this project</i>							
7.8	Visibility	S	1	2,000.00	1	100.00	2,000.00
<i>asic visibility items as per communications plan such as newsletter, sigh board and activity banners will be charged</i>							
7.9	Financial Charges	S	1	126.61	12	100.00	1,519.32
<i>Transfer of funds to field office expenses will be charged here. IRW transferring funds on monthly basis to the field</i>							
Section Total							29,819.32
SubTotal			749.00				314,615.88
Direct							249,540.56
Support							65,075.32
PSC Cost							
PSC Cost Percent							4.89
PSC Amount							15,384.72
Total Cost							330,000.60

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
West Kordofan -> Abyei - Muglad	100	2,100	2,400	600	900	6,000	Activity 1.1.1: Conduct of 44 integrated outreach mobile clinics for treatment of urgent cases Activity 1.1.2: Establishment and support referring system of most severe cases to big hospitals for treatments(185) Activity 1.1.3: Conduct of 44 integrated outreach sessions and mobile team for immunization and ANC services Activity 1.1.4: Train vaccinators and community volunteers on basic immunization training (2training) Activity 1.1.5: Conduct of 60 awareness rising sessions to increase utilization of lifesaving health interventions Activity 1.1.6: Train of 100 community health promoters and volunteers on health promotion Activity 1.1.7: Conduct 60 awareness and ANC sessions related to STIs, HIV/AIDS Activity 1.1.8: Conduct of 24 indoor spray campaigns for refugees sites and host community Activity 1.1.9: Support the National Immunization Days (NIDs) and EPI campaign for eradicating Poliomyelitis among children under 5 Activity 2.1.1: Strengthen existing village profiles to develop and enhance referral pathway through community sensitization forums, printing of service maps, coor... Activity 2.1.2: Conduct awareness raising forums on community based child protection, HIV transmission and sexually transmitted disease for adolescent girls and wome... Activity 2.1.3: Support to 30 PSN and SGBV survivors to start up business (IGA), Trained beneficiaries will be given start-p capital and supported to run IGAs in a b... Activity 2.1.4: Train CBPNs on case management and link them with the service provide such as MoSW and police(for legal support) Activity 2.1.5: Direct support to 100 WAR families of refugee children and their host to cushion them from vulnerability and ensure children attend school regularl... Activity 2.1.6: Conduct children group session within the 12 trained child group leaders using games drama, poetry and performances. 12 child groups each conducting ... Activity 2.1.7: Provide direct support to 100 UASC through a cash transfer system targeting vulnerable school children to help support school retention. Children wil...

Documents

Category Name	Document Description
Budget Documents	IRW 8199 TRC.1.xlsx
Technical Review	IRW- TRC1_HFU comments.doc
Technical Review	SHF-IRW-HealthProtection-SD-RCFrev.doc