

Fund

MPTF_00209: UN COVID-19 MPTF

Title*

Concerted action with forcibly displaced women, girls a

Anticipated Start Date*

Duration (In months)*

Anticipated End Date*

Brief Overview*

This project fosters participatory, collective, and inclusi
Kivu Province. It will involve a diverse array of women a
and other opinion leaders, women's rights advocates, c

North Kivu is the DRC's second most affected province
aggravates already strained state and society relations
weak public service delivery, wide-spread poverty and l

Over 3000 vulnerable women and girls among refugees
those at increased risk, and 1000 male and female-lea
been diverted due to Covid-19 prevention measures. Th
reproductive health care (maternal and reproductive he
the distribution of kits with food and medical items at
preventive measures against SGBV and Covid-19, mobi
cohesion. Communities at large will benefit from the re
social cohesion. Project management will put strong er

The project would greatly benefit from the MPTF's seek
donors to join the efforts in context of the DRC's adopt
and will create links to existing projects.

Comments

Geographical Scope

Geographical Scope

Country

Participating Organizations and their Implementing Partners

Participating Organizations

UNFPA
UNHCR
UNWOMEN

Contacts

Contact Type

Project Manager

Project Manager

Focal Point

Universal Markers

Gender Equality Marker

GEM3 - GEWE is the principal objective of the Key Activity

Fund Specific Markers

Fund Windows

Human Rights Based Approach to COVID19 Response

Primary Socio-Economic Pillars

Concept Note Type

Estimated Budget

Budget

Budget Requested

Other Sources

Total

and host communities against consequences of the COVID-19 crisis

1-Nov-20

12

1-Nov-21

ve actions at the grassroots level in the Democratic Republic of the Congo's North
and girls, men and boys, including those forcibly displaced, as well as traditional
organizations and networks.

by Covid-19, with disproportionate effects for women and girls. The situation
s in a province that is deeply marked by pockets of fragility, forced displacement,
harmful gender norms and practices.

s, IDPs and host communities, with a particular focus on survivors of SGBV and
d households will receive urgent socio-economic and health assistance that has
they will gain rapid and improved access to basic supplies, integrated and quality
ealth), access to protection services to safeguard their rights, cash transfers, and
events that will also be used to sensitize on SGBV and Covid-19. By focusing on
lizing communities through different means, the project also aims to foster social
duction of SGBV cases, improved health services, increased economic activity and
nphasis on a conflict-, gender- and human-rights sensitive project delivery.

d funding to generate quick impact results to convince further bi- and multilateral
ion of the National Strategy against Gender-Based Violence on 27th August 2020

Name of the Region

**Region(s) Country(i
es)**

Africa
 Democratic Republic of the Congo
New Entities
Implementing Partners

NGOs

Name	e-mail	Position	Additional e-mail	Telephone	Skype
Chihiro Mitsuda	chihiro.mitsuda@un.org				
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Risk

OECD-DAC

Medium Risk

Fund Windows

Window 2: Reduce Social Impact and Promote Economic Response

HRBA integrated

Yes

Pillars

Pillar 5: Social Cohesion and Community Resilience

Type

Funding

Amount

\$849,790

\$0

\$849,790

Title

CN_1. What is the specific need/problem the intervention seeks to address? Summarize the problem. Apply a gender lens to the analysis and description of the problem. Be explicit on who has established the need (plans, national authorities, civil society, UN own analysis, or citizens).

CN_II. Results expected to be achieved and a clear explanation of tangible results or changes that will be achieved through this collaborative programme Describe the results expected to be achieved and how it contributes to the Covid-19 response and the SDGs. Describe programme approaches, methods, and theory of change, and explain why they are the appropriate response to the problem. Please highlight a) how the solution(s) is data driven (especially on population being targeted) b) if and how it employs any innovative approaches; c) if and how it applies a human rights-based approach and how is it based on the principle of “recover better together” d) if and how the theory of change reflects the Gender Equality Marker score selected in this solution

CN_III. Catalytic impact and nexus
Describe how the intervention is catalytic by mobilizing or augmenting other financial or non-financial resources including from IFIs, foundations, the private sector. Describe how the proposed intervention supports medium to long-term recovery for example by enabling other actors to engage, generates an enabling environment for longer-term development.

CN_IV. Who will deliver this solution List what Recipient UN Organizations (no less than 2 per concept note) and partners will implement this project and describe their capacities to do so. Include expertise, staff deployed, as well as oversight mechanisms that determine the monitoring and evaluation (M&E) arrangements and responsibilities. Use hyperlinks to relevant sites and the current portfolios of RUNOs so the text is short and to the point.

P_I. Immediate Socio-Economic Response to COVID19 and its impact

P_V. Target population

Text

persons in 2020, 95% of whom live in host families in North Kivu, 56% of whom are women and girls according to UNHCR figures. There are 172,000 refugees mostly from Burundi and Rwanda some of whom are living with IDPs in the host communities.

The COVID-19 crisis in DRC has not spared North Kivu, which is the second most affected province with 706 cases registered. Prevention measures in the face of the pandemic have exacerbated the vulnerability of women and girls, men and boys, with their host communities who live in precarious and dire conditions.

As stipulated by the Secretary General's brief on Gender Equality and the Covid-19 crisis from April 2020, "Across every sphere of social protection, the impacts of COVID-19 are exacerbated for women and girls simply by virtue of their sex." The SG makes it clear that the impacts for women and girls in all their diversity, as well as gender-based violence and risks of diversion of health services create a high risk for newborns."

While gender-disaggregated data generally remains scarce in the DRC also in the province of North Kivu, all existing sources indicate a significant pressure on already strained health services, economic activities and social cohesion with disproportionately negative effects on women and girls. Protection risks for the ones who are forcibly displaced.

The situation has created an urgent need to support health services and to foster trust in them among communities. Women face higher neonatal mortality, sexual and gender-based violence, and exposure to COVID-19 due to social norms which place women in a more vulnerable position. These risks increase disproportionately with the disruption of supply chains for basic necessities including material supplies to health facilities. Women are also more likely to be affected by the COVID-19 pandemic, and the price surge of essential goods, because they have lower levels of purchasing power.

These aggravating factors arrive on top of existing ones, including the weak efforts to prevent sexual and gender-based violence, lack of health service providers, lack of authorities and communities trained in clinical management of rape cases, GBV, lack of mental health and psychosocial services, and poor accessibility to care services. The barriers for the forcibly displaced are even higher for several reasons, including:

Echoing the OHCHR's global brief on COVID-19, sexual and reproductive health services should be seen as a life-saving priority. Key areas of focus include: access to contraception; maternal and newborn care; treatment of sexually transmitted infections; safe abortion care; and e

Outcome 1: Women and girls IDPs and refugees and women from host communities receive urgent support for improved health and reduced spread of COVID-19

Outcome 2: Livelihoods and socio-economic resilience of women and girls IDPs and refugees as well as women from host communities who are at risk of SGBV are strengthened through the development of community-based initiatives

Outcome 3: Prevention, monitoring and accountability measures in the province of North Kivu are reinforced through the promotion of human rights abuses as negative effects of COVID-19

By specifically targeting vulnerable women and girls among IDPs and host communities, with a particular focus on survivors of SGBV, the project encourages participatory, collective and inclusive actions to promote recovery and socio-economic resilience consistent with Do No Harm principles.

The project mainstreams an Age, Gender and Diversity, human rights, conflict-sensitive and community-based protection approach, focusing on the empowerment of women and girls affected by the pandemic and living in highly vulnerable conditions in IDP camps and host communities, and on social cohesion between those in displacement and their host community which is at risk of deterioration due to the strains of economic activities.

Outcome 1: Women and girls IDPs and refugees and women from host communities receive urgent support for improved health and reduced spread of COVID-19

[Linked to SERP Work Plan Output Axis 1, 1.4]

SERP Activity Codes: Act 1.3.6, 1.3.7, 1.3.9, 1.4.9

SDG-Link: 3.1, 3.2, 5.6

upscale interventions that prevent and mitigate the effects of gender-based violence. In the context of COVID-19, the urgency and international stakeholders as demonstrated in part 1. The seed-money that could be provided through the Multi-Partner reinforce important and urgent operations in North Kivu and beyond. It would help to accumulate positive examples of the as a prototype for future gender-responsive recovery efforts from COVID-19 in other provinces and countries. These can provide bilateral and private donors present in DRC to scale up and replicate interventions throughout the DRC.

Indeed, as the number of COVID-19 cases continue to increase throughout the country, long term interventions are necessary for households who are living under very precarious economic conditions in areas affected by insecurity, inter-community conflict, movement of population (refugees, returnees, and IDPs), and in remote and difficult to access areas with needs for multisectoral support. In North Kivu and other potential provinces reinforce health facilities, strengthen economic resilience and protect and improve the lives of members of the population including IDPs, refugees and returnees, additional financial resources are sought after to launch

Based on the gender analysis and participatory evaluations of initial activities, develop a medium-term project which will secure a sustainable impact incorporating the Nexus approach in consultation with other key stakeholders such as women's associations and local governments, UN agencies, donors, academia, etc. ;

Fulfill the significant gap targeting women refugees, IDPs and female communities' members who are most likely to be marginalized during COVID-19 within the other efforts undertaken by other agencies in the province of North Kivu. Most of the projects were carried out, a few of them have just started national wide. In the province of North Kivu, most of the activities have contributed to the implementation of prevention measures but the safety, the protection of human rights as well as the socio economic response to the COVID-19 crisis for IDPs, refugees and female host communities' members have not yet been adequately addressed. Particularly, the UN Response Plan for the UN agencies in May 2020 highlights the huge gap in the areas of capacity of health structures and its logistic systems, live with and build resilience.

Support to establish an electronic management and monitoring system (Digitalization) for access to sexual and reproductive health services for adolescent girls. This will help monitor in real time access to services and information on SRH by all adolescent girls, young students and women using their Kitumaini health card. This is catalytic in terms of an ongoing UNFPA project funded by Sweden and Canada;

Reinforce early warning and community-based alert mechanisms to reduce SGBV incidences with a special focus on intimate partner violence, screenings and community dialogues around the Bongo Te Tika movie;

holistic assistance to GBV survivors. Putting people, including women, at the center of their interventions against GBV-19, in order to strengthen their synergies. UNFPA will also support the strengthening of maternal health structures strongly affected by the pandemic. UNHCR will benefit from the UNHCR's expertise on internally displaced persons and refugees with a comparative advantage to facilitate the response to those who are increasingly vulnerable and highly affected by the COVID-19 crisis. All three partners will actively engage in resource mobilization. A One Gender Team comprised of bilateral donors and UNCT members, to develop a second component of the project that is being implemented in the first phase and in order to increase the number of beneficiaries.

UNFPA as the consortium lead agency with the oversight of ensuring the success of the programme, will take the responsibility for monitoring and evaluation structure that has been incorporated into its COVID-19 response plan as well as in the Programme Partnership Agreement for implementing the activities. A joint Programme specific Monitoring and Evaluation Plan will be developed to cover the consortium's monitoring and evaluation organization. The purpose is to ensure that all lessons learned exercises and after-action reviews include targeted questions. The programme will be guided by the IASC Framework, the GBV Accountability Framework, including GBV risk mitigation measures, and the IASC Guidelines on the International Humanitarian Action. In addition, WHO has published guidance on the prevention of violence against women and girls during the pandemic. The consortium will prove all the reporting requirements collected from the other consortium organizations.

UNFPA is present in the DRC with a Country Office located in Kinshasa and several Field or/and project Offices in Goma (North Kivu), Ituri, Kisangani (Tshopo), Kananga (Kasaï Central), Tshikapa (Kasaï), Mbuji Mayi (Kasaï Oriental) Tanganyika (Kalemie), Haut Katanga. During the pandemic there is a high risk of GBV increased, the organization provide disease control measure that consider the gender-specific needs of young people by bolster violence-related first response systems, collaborate with existing formal and informal social networks, civil society organizations and women's rights organization and make sure that GBV is integrated into the responses to the pandemic, UNFPA developed a guidance note "COVID 19 - Guidance Note for the GBV Sub-Cluster" and the GBV AoR note "COVID-19", in order to adapt the response and planning strategies of the GBV coordination in terms of response and prevention. The response is defined by the government and the humanitarian coordination. The organization is also experienced in providing response to diseases outbreaks and epidemics including the Ebola outbreak in Beni. Recognizing that such epidemics affect women, young people and the population the organization provide effective and fair responses to reduce negative impact on maternal and newborn health. To achieve our mandate, we develop reliable and rapid data collection methods followed by expert analysis and timely reporting. The consortium has a Monitoring and Evaluation Specialist and technical specialist to support project delivery.

The economic downturn linked to the COVID-19 pandemic response related restrictions has severely affected workers who are struggling to find work in a weak economy, lower-paying jobs, and the multitude of micro and small businesses that make it up. Strict enforcement of lockdown measures have to go out every day to earn a living and feed their families at night have exacerbated gender inequality. In fact, the pandemic has perpetuated the cycle of marginalization of women and girls is magnified by the limited access to employment, livelihood and social services. Many households are living with very limited access to basic social services such as health because of very low income. Furthermore, women and youth organizations, which faced weak organizational and operational capacity to respond to the need of the population during the COVID-19 pandemic including a lack of funding, financial, and human resources to carry out their activities. The consortium's intervention strategy will strive to address and promote equal rights and gender representation at each stage of the project (including monitoring and evaluation) and local decision-making for COVID-19 response.

Amongst the over 1.7 million displaced persons in North Kivu, 56% are women and girls. The government's prevention measures exacerbated the vulnerability of women and girls, as well as host communities which have already been stretched by the arrival of the disease. The project therefore targets women and girls affected by displacement in North-Kivu, as well as women and girls in host communities, with the measures imposed to combat the disease.

Not all areas of North-Kivu were equally affected by the disease. Specific areas were targeted by government and non-governmental organizations while in some regions, new COVID-19 clusters have recently appeared. Measures have also affected different rural and urban areas. For this reason, the Health Zones of Rutshuru, Birambizo, Mweso and Kasimbi were selected as main focus of the project.

Apart from directly targeting some of the most vulnerable women, the choice was made to provide support to several critical sectors of the project. First of all, health structures, especially sexual and reproductive health services will be supported to directly strengthen and support pregnant and lactating mothers as well as women who make up the bulk of health personnel who assist them.

Secondly, the project will aim to provide durable support to women's voices within society, fostering self-reliance by targeting advocates and support groups. Amongst these, particular attention will go to village savings and credit associations, to ensure the livelihoods of those whose livelihoods were affected by the pandemic, as well as protection organizations, who deal directly with legal, psychological and social support for women and girls who survived human rights violations.

Thirdly, the project will aim to support essential governmental institutions working on gender equality and SGBV protection which have been most affected by the pandemic, such as police and civil registration offices.

Finally, the project will also aim to target the broader community through awareness-raising on COVID-19 as well as SGBV and

Comments

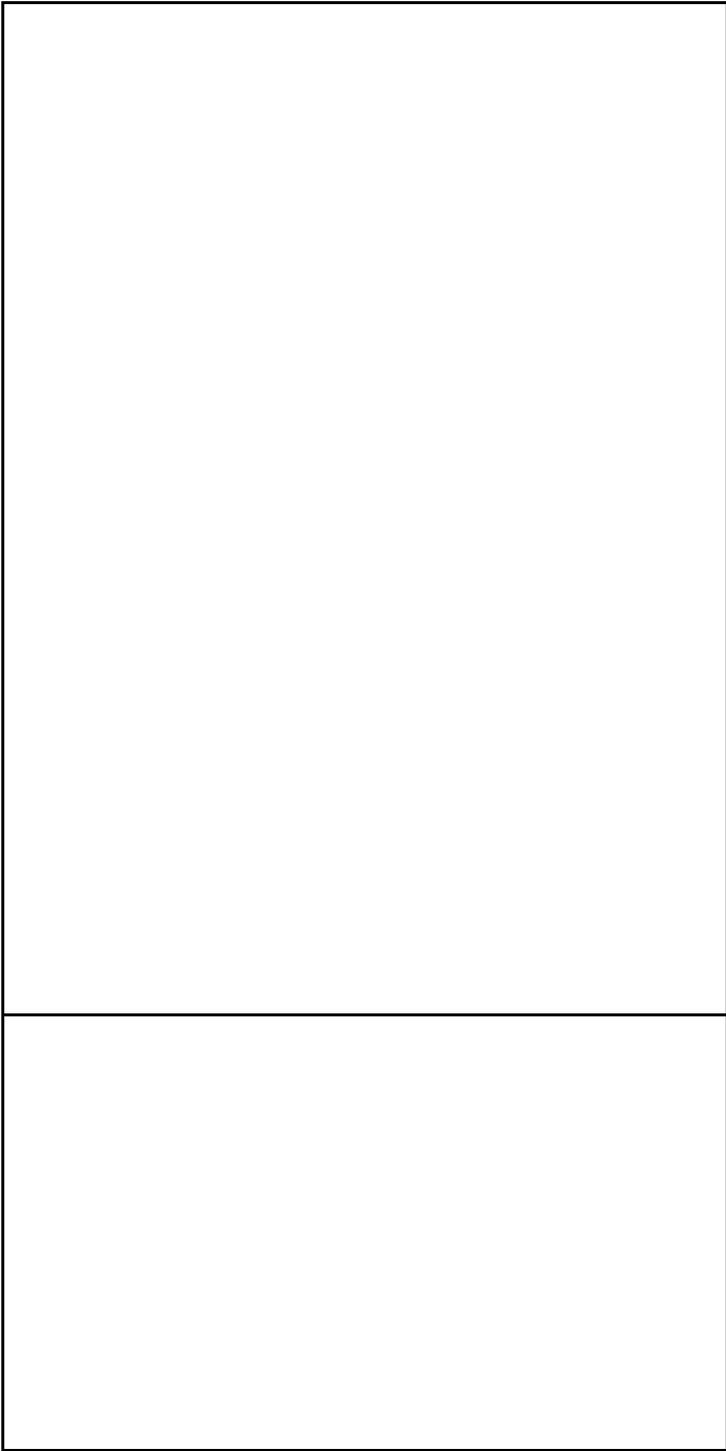
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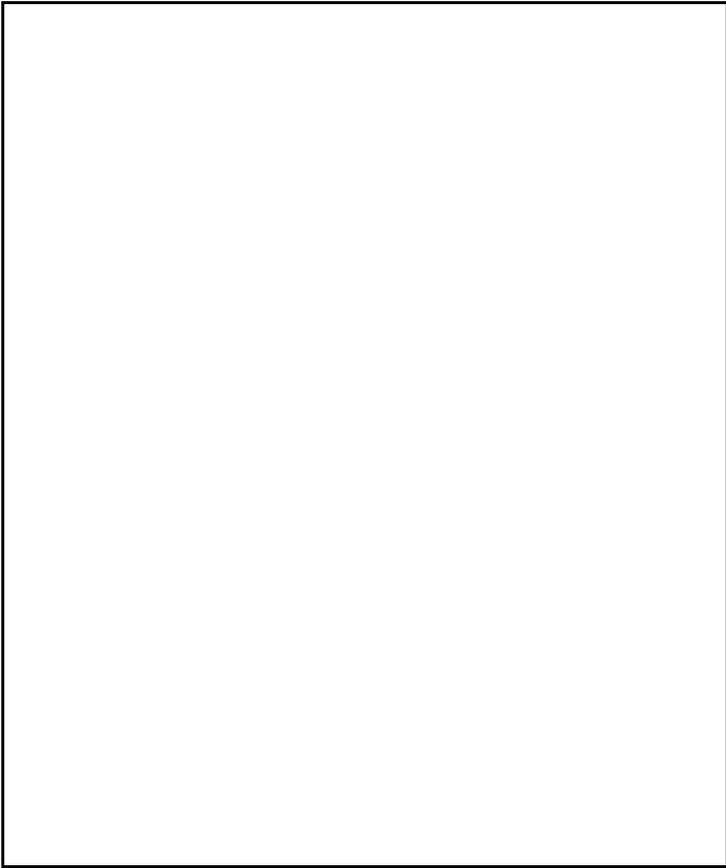
Well written proposal with a compelling narrative for supporting young women and girls. The proposal presents a strong rationale for support in 3 areas: Health, Livelihoods and gender equality. Presents clear results with links to SERP and SDG goals.

Reviewer #2: 20 - Good proposal focused on well targeted support to women and girls in a well defined geographic area. Well focused in interventions proposed and well aligned to the SERP.

Review 3 (S): score: 19

clear need, focus and deliverables (see score sheet for specific comments)





Target

Main Goals

Goal 1. End poverty in
TARGET_
1.4

Goal 3. Ensure health
TARGET_

Goal 5. Achieve gender
TARGET_
TARGET_
5.6

Description

1.4 [Eliminate all forms of discrimination against women and girls](#)

1.4 By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance

3.1 [Ensure healthy lives and promote well-being for all at all ages](#)

3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births

5.2 [Achieve gender equality and empower all women and girls](#)

5.2 Eliminate all forms of violence against all women and girls in the public and private spheres

5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences

Indicator 1

Indicator 2

1.4.1 Proportion of population living in households with access to basic services

1.4.2 Proportion of total adult population with secure tenure rights to land, (a) with legally recognized documentation, and (b) who perceive their rights to land as secure, by sex and type of tenure

3.1.1 Maternal mortality ratio

3.1.2 Proportion of births attended by skilled health personnel

5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical

5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than

5.6.1 Proportion of women aged 15–49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care

Total Estimated % Budget allocated per target

30%

15%

30%

15%

Outcomes		
Outcomes	Output	Description
Outcome 1		Women and girls IDPs and refugees and women from host communities receive urgent support for improved health services to cope with and prevent the spread of COVID-19
	Output 1.1.	Provide 3,000 IPC (Infection Prevention and Control) kits, personal protective equipment and other materials for COVID-19 prevention
	Output 1.1.	Provide 600 dignity kits and other essential RH commodities at all service delivery points are provided in target areas
	Output 1.2	Strengthen technical capacity of service providers, health zone management teams, 15 midwives, 10 nurse supervisors of health zone, 30 community health workers on Emergency Obstetric and Neonatal Care, maternal death surveillance and response, prevention and control of Infection in an obstetrical environment and clinical management of rape including infection prevention and control and COVID-19 detection, response and referral/case management including Mental Health and Psychosocial Support to IDPs/host families to ensure compliance of facilities for the treatment of pregnant women during Covid-19.
	Output 1.3	Strengthen the capacity of community organizations, and women's rights advocates, as well as women's groups to improve the quality of care provided by health facilities so that they respond holistically to needs of GBV survivors (women, girls, youth, men and boys) during and after the COVID-19 pandemic
	Output 1.4	Strengthen and disseminate the GBV/EAS referral pathway and entry point for COVID
	Output 1.5	Promote community engagement and social mobilization at local level to manage rumors, build trust between health facilities, health providers and community members, and reinforce awareness and understanding of the COVID-19 pandemic at the community level, and address the risks of gender-based violence
	Output 1.6	Provide mental and psychosocial support to improve health services response to gender-based violence
Outcome 2		Strengthened livelihoods and socio-economic resilience of displaced women and host communities vulnerable and at risk of SGBV through the development of community initiatives
	Output 2.1	Conduct a rapid gender assessment in the four targeted health zones and identify opportunities for Women's Economic Empowerment
	Output 2.2	Provide cash-transfers to women at high-risk or victims of SGBV to contribute to their socio-economic resilience with post-distribution monitoring and technical support

	Output 2.3	Strengthen the livelihood of vulnerable women-led households including SGBV survivors through the distribution of "resilience kits" followed by post distribution monitoring and technical support
	Output 2.4	Support 30 villages savings and credit associations (VSLAs) and Mutuals Solidarity (MUSO) in target areas
	Output 2.5	Trained selected beneficiaries on the basis of criteria on rapid income-generating activities, savings, life skills and leadership
Outcome 3		Strengthened prevention, monitoring and accountability measures in North Kivu through the mitigation, and protection of human rights violations as negative effects of COVID-19
	Output 3.1	Support the Ministry of Gender and its Provincial Gender Thematic Group for the implementation of the National Strategy against SGBV
	Output 3.2	Provide technical support to civil registry for birth registration
	Output 3.3	Provide material support to the Child and Family Protection Unit of the Congolese National Police to implement its Action Plan against GBV and Strengthen the capacities of 200 members of EPEPVS, prison officers, police etc. on the prevention of violence, particularly GBV due to COVID -19
	Output 3.4	Support the establishment of six "Girl Shine" spaces that aim to strengthen girls' social assets so that they have someone to turn to when experiencing or threatened by GBV. Provide them with life skills that strengthen their social and emotional learning capacities and provide them with information related to Covid 19, adolescent sexual and reproductive health, essential for making healthy decisions
	Output 3.5	Provide direct support, both financial and technical, to local women's organizations, traditional leaders, academia and organizations of people with disabilities, to conduct awareness-raising campaigns on gender-based violence, including dissemination of the film "Bongo Te Tika" in their communities
	Output 3.6	Protection Monitoring: Report and analyse protection incidents against IDPs and host communities, particularly incidents of SGBV; Refer incident survivors to medical and legal structures and psychosocial support
Mana		
Outcomes	Outputs	Description

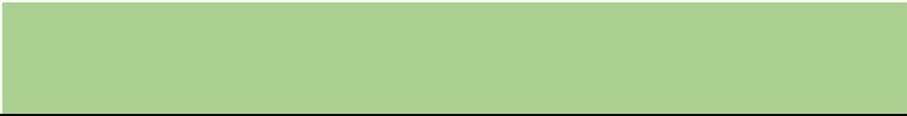
Displaced women, girls and host communities receive urgent support for improved health services to cope with and prevent the spread of Covid-19		
	out put 1.1	Strengthen the institutional capacities of health facilities and service providers with 08 IPC and 04 WGSS(Infection Prevention and Control) kits, personal protective equipment and other materials for COVID-19 prevention 400 dignity kits adapted to the cultural realities of the needs of women and girls in targeted health zones, provision of emergency SR kits (1A, 1B, 2A, 3, 4, 5, 6A, 6B, 11A and 11B) and other essential RH commodities at all service delivery points are provided in target areas
	output 1.2	Training of health personnel on Emergency Obstetric and Neonatal Care, maternal death surveillance and response, prevention and control of Infection in an obstetrical environment and clinical management of rape including infection prevention and control and COVID-19 detection, response and referral/case management including Mental Health and Psychosocial Support to IDPs/host families.
	output 1.3	Capacity of health providers, community organizations, women's rights advocates, and women's groups strengthened to improve the quality of care provided by health facilities so that they respond holistically to needs of GBV survivors (women, girls, youth, men and boys) during and after the COVID-19 pandemic
	Output 1.4	GBV/EAS referral pathways and entry points for COVID

		strengthened and promoted
	Output 1.5	Community engagement and social mobilization promoted at local level to manage rumors, build trust between health facilities, health providers and community members, and reinforce awareness and understanding of the COVID-19 pandemic at the community level, and address the risks of gender-based violence
	Output 1.6	
		Mental health and psychosocial support provided to improve health services response to gender-based violence;



Outcome Name and Indicators	Outputs	Description
Outcome 2: Livelihoods and socio-economic resilience of displaced women and host communities vulnerable and at risk of SGBV strengthened through the development of community initiatives ; Outcome 1 Indicator 1: Number of beneficiaries of socio-economic resilience support; Outcome 1 Indicator 2: Number of beneficiaries using socio-economic resilience support for further economic activities	Output 2.1	Conduct a rapid gender assessment in the four targeted health zones and identify opportunities for Women's Economic Empowerment
	Output 2.2	Provide cash-transfers to women at high-risk or victims of SGBV to contribute to their socio-economic resilience with post-distribution monitoring and technical support
	Output 2.3	Strengthen the livelihood of vulnerable women-led households including SGBV survivors through the distribution of "resilience kits" followed by post distribution monitoring and technical support

	Output 3.4	Support the establishment of 4 “Girl Shine” spaces that aim to strengthen girls' social assets so that they have someone to turn to when experiencing or threatened by
	Output 3.5	Provide direct support, both financial and technical, to local women's organizations, traditional leaders and organizations of people with disabilities, to conduct awareness-raising campaigns on gender-based violence, including dissemination of the film “Bongo Te Tika” in their communities
	Output 3.7	Conduct protection monitoring through the reporting and analysis of protection incidents against IDPs and host communities, particularly incidents of SGBV; Referral of incident survivors to medical and legal structures and psychosocial support



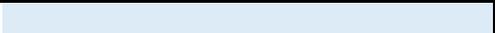
Key Indicators	
Indicator Title	Baseline Value

Number of women and girls who received urgent support during Covid-19.	0
Number of host communities who received urgent support during Covid-19.	0
Output 1.1	
1.1.1 Number of health centres provided with COVID-19 protection material	0
1.1.2 Number of IPC (Infection Prevention and Control) kits, personal protective equipment, essential RH commodities and other materials for COVID-19 during the COVID-19 outbreak	0
1.1.3 Number of women and girls including IDPs, refugees and host communities who received dignity kits, stay-at-home kits and other support material	0
Output 1.2	
midwives, nurse supervisors of health zones and community health workers trained on relevant topics	0
Output 1.3	
Number of community organizations, women's rights advocates and groups supported	0
Output 1.4	
Number of persons informed on referral pathways	0
Number of GBV cases that received legal/judicial support disaggregated by age/gender/disability	0
% of survivors of sexual violence who received medical care at service delivery points by trained staff within 72 hours of the rape incident, disaggregated by age	0

Number of survivors of sexual violence who received medical care disaggregated by age/gender/disability	0
Number of women and girls who participated in psychosocial activities, including survivors who benefited from age-disaggregated/disability case management	0
Output 1.5	
Number of individuals reached with awareness-raising	0
Output 1.6	
Number of service provider strengthened on mental and psychosocial response including the GBV case management	0
Number of Cases of GBV that received psychosocial support, disaggregated by age, gender and disability	0
Indicator Title	Baseline Value
2.1.1 Number of assessments of gender and economic opportunities conducted in targeted areas	0
2.1.2 Report on gender and economic opportunities in targeted areas published	0
2.2.1 Number of beneficiaries having received cash transfers	0
2.2.2 Number of Beneficiaries having invested the cash in socio-economic activities	0
2.3.1 Number of beneficiaries having received resilience kits	0

2.3.2 Number of beneficiaries reporting that they have increased their socio-economic resilience after having received the kits	0
2.4.1 Number of beneficiaries	0
2.4.2 Number of village savings and credit associations created and functional	0
2.5.1 Number of beneficiaries trained in Rapid Income Generating Activities	0
2.5.2 Number of beneficiaries engaged in economic activities after completion of the training	0
Indicator Title	Baseline Value
3.1.1 Number of structures (Provincial, territorial and local Gender Thematic Groups and their sub-groups and the 1325-coordination committee) supported through technical and institutional assistance	4
3.1.2 Number of structures within territorial and local groups supported	3
3.2.1 Number of civil state offices supported in the registration of births	0
3.2.2 Number of persons reached with information campaigns on the registration moratorium	0
3.2.3 Number of children provided with birth certificates with project support	200
3.3.1 Number of police offices supported with material and technical assistance	0
3.3.2 Number of police officers in decentralised territorial entities trained on prevention of violence, particularly SGBV	0

3.4.1 Number of "Girl Shine" safe spaces establishes	0
3.4.2 Number of girls who benefitted from support in safe spaces	0
3.5.1 Number of women's organisations organisations and organisations for persons with disabilities provided with direct, technical and financial support	0
3.5.2 Number of community leaders provided with technical support and communication material	0
3.5.3 Number of persons reached through awareness-raising campaigns	0
3.6.1 Number of community monitoring structures supported	0
3.6.2 Number of periodical and thematic reports published	0
3.6.3 Number of protection incidents and victims of SGBV and other human rights violations identified	0
3.6.4 Percentage of survivors of SGBV referred to medical and legal structures and psychosocial support structures	0



Max Value

1000

8

8

12

400

40

8

4000

30

80%

108

1,800

4,000

40

1085

Max Value

4

1

300

300

600

600
150
16
150
100

Max Value
6
4
4
4000
1200
5
200

4

2880

8

48

13000

4

50

250

80%

Risk Management			
Event	Category	Level	Likelihood
Delays in procurement and distribution as a result of border closures, office closures, transport disruptions, quarantines and administrative delays. This may also include stock shortages on	Operational	High Medium	Likely
Acts of violence or PSEA against women and girls due to them being targeted by specific programming due to their vulnerability.	Social and Environmental	High Medium	Expected
Limited access to targeted areas due to COVID19 response resistance and resumption of hostilities and inaccessibility to follow up on inter-ethnic conflicts.	Political	Very High	Highly Likely

Impact	Mitigating Measures	Risk Owner
Intermediate	In order to ensure a timely reception of goods the project will develop a procurement plan within the first month of the project and initiate all orders with additional	UNFPA
Intermediate	Programs that focus specifically on women in DRC can often result in increases of violence against women for reasons of jealousy and sexual exploitation and abuse. It is	UNFPA
Extensive	major response projects to epidemics have been met by popular resistance due to disease denial and community suspicions about the presence of aid workers.	UNFPA

Budget Lines	Fiscal Year	Description	Agency 1 UNFPA	Agency 2 UNHCR
1. Staff and other personnel			43,440.00	46,200
2. Supplies, Commodities, Materials			97,171.10	
3. Equipment, Vehicles, and Furniture, incl. Depreciatio			3,200.00	33,600
4. Contractual services			0.00	
5. Travel			37,998.00	20,000
6. Transfers and Grants to Counterparts			145,807.00	113,560
7. General Operating and other Direct Costs			10,372.00	
Sub Total Programme Costs			337,988.10	213,360.00
8. Indirect Support Costs * 7% (6.5%-UNHCR)			23,659.17	13868.40
Total			361,647.27	227,228.40

Agency 3 UNWOMEN	Total USD
40,000	129,640
80,021	177,192
1,500	38,300
21,000	21,000
16,874	74,872
80,000	339,367
4,450	14,822
243,845.32	795,193
17,069	54,597
260,914.49	849,790.16

Code	Outcome	Outputs	Budget Line Description	D / S	Quantity
1. Staff and Other Personnel Costs					
			UNV - Specialist program and youth and women developpement	S	1.00
1.2			Logistics Assistant	D	1.00
1.3			Chauffeur (GS2/4)	D	1.00
1.4			Charge de projet:Staff partenaire	D	1.00
1.5			Assistant administratif et financier/staff partenaire	D	1.00
1.6			Chauffeur	D	1.00
Section Total					
2. Supplies, Commodities, Materials					
2.1	Outcome 1	output 1.1	Kits de dignité	D	400.00
2.2			Kit 1A: Préservatifs masculins	D	8.00
2.3			Kit 2A: Accouchement hygiénique, individuel	D	8.00
2.4			Kit 3 : Post viol	D	8.00
2.5			Kit 4 : contractceptifs injectables et orales	D	8.00
2.6			Kit 6A: Accouchement médicalisé - Equipment réutilisable	D	8.00
2.7			Kit 6B: Reusable - médicaments et matériels jetables	D	8.00
2.9			Kit 11A: Niveau de référence en Santé Reproductive - Equipment réutilisable	D	4.00
2.10			Kit 11B: Niveau de référence en Santé Reproductive - médicaments et matériels jetables	D	4.00
2.11			Transport (5% stockage, 35% Denmark-DRC, 10% DRC du cout totale des kits)	D	50%
			IPC material for 08 health facilities	D	100%
Section Total					
3. 3. Equipment, Vehicles, and Furniture, incl. Depreciation					
3.1			Laptop avec sac pour 1 assistant au programme	S	1.00
3.2			Achat 1 imprimante	S	0.00
3.3			Radio Motorola MOTOTRBO DP 4801e pour les staff recrutés (1 assistant au Programme)	S	1.00
3.4			Telephone satellitia	S	0.00
3.5			Credit communication Thuraya	S	1.00
3.5			Mobilier bureau (table bureau : 1x 350 \$, Chaises bureau: 6 X 150)	S	0.00
Section Total					
4. Contractual Services					
NA			NA	NA	0.00
Section Total					
5. Travel					
5.1			Missions mensuelles de suivi du projet par UNFPA (niveau provincial: 2 staff x 3nuitées x4ZSx 3 trimestres) + 6 nuitées niveau central (staff national)	D	78.00
5.4			Mission de suivi du partenaire de mise en œuvre	D	1

5.6		Appuyer la supervision des Equipes Cadre de 4 ZS et la Division GENRE	D	1
Section Total				

6. Transfers and Grants to Counterparts
outcome 1

6.1	output 1.1.3	Distribution of 400 Dignity Kits to the most vulnerable women and girls, for the 4 targeted intervention areas	D	1.00
6.2	output 1.2	Train midwives, nurse supervisors of health zones and community health workers trained on relevant topics per health zone in COVID 19 case management, SR , EAS	D	1.00
6.3	Output 1.4	Conduct session information with communities about the developpement and dissemination of referral pathways (lumpsum for sessions)	D	1.00
6.4	Output 1.4	Strengthen the institutionall and technical capacities of 08 health facilities	D	1.00
6.5	Output 1.5	Organize awareness-raising activities, community dialogues and information about GBV, COVID, community feedback and available services with the key community, the authorities and the population in each health zone.	D	1.00
6.6	Output 1.6	Strengthen the technical and operational capacities of 40 service providers on GBV case management , mental health and pschosocial support.	D	1.00
6.7	Output 1.6	Provide 4,000 survivors and women and girls with individual psychosocial support according to their needs through psychosocial activities, mutual group therapy, community and family support.	D	1.00
6.8	outcome 3 output 3.4.1;2	Set up and support 4 private, secure and confidential spaces (WGSS-Girl shine activities) to provide psychosocial support , life skills, SR modules, informations and case management services, SR and COVID 19.	D	1.00
6.9		Support the training of providers on GBV, RH and COVID documentation and data collection, support GBV data collection .	D	1.00
6.10		Frais de fonctionnement du partenaire de mise en œuvre	D	1
Section Total				

7. General Operating and Other Direct Costs

7.1		Connexion internet	S	1.00
7.2		Contribution à l'achat des Fournitures, produits d'entretien et maintenance du bureau	S	1.00
7.3		Achat carburant 150 litres/mois x 12 mois)	S	1.00
7.4		Entretien et réparations véhicules (1 entretien & réparation/2 mois)	S	1.00
7.5		Credit communication staff	S	3.00
		communication and visibility	S	1.00

Section Total

Sub Total Programme Costs			
8.	Indirect Support Costs * 7%		

Unit cost	Duration Recurrence	% charged to CHF	Total Cost
2000	12.00	52.5	12,600.00
3,000.00	12.00	15.00	5,400.00
1,200.00	12.00	10.00	1,440.00
900.00	12.00	100.00	10,800.00
700.00	12.00	100.00	8,400.00
400.00	12.00	100.00	4,800.00
			43,440.00
27.95	1.00	100.00	11,180.00
528.08	1.00	100.00	4,224.64
713.62	1.00	100.00	5,708.96
1,132.65	1.00	100.00	9,061.20
452.27	1.00	100.00	3,618.16
900.65	1.00	100.00	7,205.20
840.11	1.00	100.00	6,720.88
860.05	1.00	100.00	3,440.20
5,418.01	1.00	100.00	21,672.04
36,415.64	1.00	100.00	18,207.82
6,132.00	1.00	100.00	6,132.00
			97,171.10
1,200.00	1.00	100.00	1,200.00
700.00	1.00	100.00	0.00
800.00	1.00	100.00	800.00
1,200.00	1.00	100.00	0.00
100.00	12.00	100.00	1,200.00
1,250.00	1.00	100.00	0.00
			3,200.00
0.00	0.00	0.00	0.00
			0.00
141.00	1.00	100.00	10,998.00
15000	1	100	15,000.00

12000	1	100	12,000.00
			37,998.00

1,500.00	1.00	100.00	1,500.00
21,430.00	1.00	100.00	21,430.00
1,000.00	1.00	100.00	1,000.00
25,785.00	1.00	100.00	25,785.00
15,565.00	1.00	100.00	15,565.00
21,638.00	1.00	100.00	21,638.00
12,769.00	1.00	100.00	12,769.00
15,540.00	1.00	100.00	15,540.00
10,430.00	1.00	100.00	10,430.00
20150	1	100	20,150.00

			145,807.00
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1,000.00	12.00	25.00	3,000.00
500.00	3.00	100.00	1,500.00
1,800.00	1.00	100.00	1,800.00
1,000.00	3.00	25.00	750.00
50.00	12.00	100.00	1,800.00
1,522.00	1.00	100.00	1,522.00
			10,372.00

			337,988.10
			23659.17

361,647.27

Code	Outcome	Outputs	Budget Line Description	D / S	Quantity	Unit cost
1. Staff and Other Personnel Costs						
			Cout Staff UNHCR			
1.5			Assistant (UNHCR)	S	1.00	1,500.00
1.6			1 Protection Monitoring Officer	S	1.00	1,000.00
1.7			1 Administrative assistant (Partner)	S	1.00	800.00
			Section Total			
2. Supplies, Commodities, Materials						
			Cout UNHCR			
			Section Total			
3. 3. Equipment, Vehicles, and Furniture, incl. Depreciation						
			Cout UNHCR			
3.6			Laptop avec sac pour les staffs dedié au projet	S	7.00	1,200.00
3.7			Achat 2 imprimantes-scanner - Photocopieur	S	2.00	500.00
3.8			smarth phones pour la collecte des incidents	S	24.00	200.00
3.9			Credit communication	S	1.00	150.00
3.10			Achat Motos DT 125	S	4.00	4,400.00
			Section Total			
4. Contractual Services						
NA			NA	NA	0.00	0.00
			Section Total			
5. Travel						
			Cout UNHCR			
			Missions de suivi du projet par UNHCR	S	141.84	141.00
			Section Total			
6. Transfers and Grants to Counterparts						
outcome 1						

6.1	Output 1.4	Ensure the support in justice of 30 cases through legal and judicial advice and technical and operational support for sensitization activities on the legal framework of VBG and international	D	1.00	19,646.00
6.2	Output 1.6	Provide 4,000 survivors and women and girls with individual psychosocial support according to their needs through psychosocial activities, mutual group therapy, community and family support.	D	1.00	19,400.00
Outcome 2					
	output 2.2; 2.3, 2.5	Support the socio-economic reintegration (IGA for 1,000 women and girls, including GBV survivors and people with disabilities including training (cash transfert+ Post distribution monitoring)	D	1.00	85,000.00
outcome 3					
	Output 3.1.3	Support 4 civil state offices in the registration of births	D	1.00	800.00
	Output 3.1.4	Conduct information campaigns on the registration	D	1.00	0.00
	Output 3.1.5	Support to children to obtain birthcertificates	D	1,200.00	7.00
	Output 3.2.1	Support civil state offices in the registration of births		4.00	200.00
	Output 3.2.2	Conduct information campaigns on the registration		4,000.00	1.00

		Output 3.2.3	Support to children to obtain birthcertificates		1,200.00	7.00
		Output 3.5.1	Provide direct technical and financial support to women's organisations and organisations for persons with disabilities	D	1.00	27,300.00
		Output 3.6.1	Capacity bulding (traning and financial support) to community structures involed into the protection monitoring	D	6.00	2,000.00
6.10		Output 3.6.2	Strengthen the capacities of local authorities (administrative and traditional) on the key concepts of GBV, human rights, the legal framework, and their involvement, responsibilities and role in the prevention and protection of women and girls, displaced/returnees and very vulnerable/margin alized people, including the referral circuit, in GBV and COVID 19	D	1.00	5,000.00
		Output 3.6.3	Monitoring of protection identification and registration of protection and SGBV incidents and victims of SGBV and other human rights	D	1.00	100,000.00
			Section Total			
7. General Operating and Other Direct Costs						
Cout UNHCR						
Section Total						

	Sub Total Programme Costs			
8.	Indirect Support Costs * 6.5%			

Duration Recurrence	% charged to CHF	Total Cost
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		46,200.00
14.00	100.00	21,000.00
14.00	100.00	14,000.00
14.00	100.00	11,200.00
		46,200.00

		0.00
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		0.00
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		33,600.00
1.00	100.00	8,400.00
1.00	100.00	1,000.00
1.00	100.00	4,800.00
12.00	100.00	1,800.00
10.00	100.00	17,600.00
		33,600.00

0.00	0.00	0.00
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		20,000.00
1.00	100.00	20,000.00
		20,000.00

17,600.00

1.00	100.00	5,510.00	1,000.00
1.00	100.00	8,000.00	
1.00	100.00	15,000.00	15,000.00
1.00	100.00	800.00	
1.00	100.00	4,000.00	
1.00	100.00	8,400.00	
1.00	100.00	800.00	
1.00	100.00	4,000.00	

1.00	100.00	8,400.00	
1.00	100.00	1,250.00	
1.00	100.00	12,000.00	8,000.00
1.00	100.00	5,000.00	
1.00	100.00	40,400.00	8,400.00
		113,560.00	
		0.00	
		213,360.00	50,000.00
		13868.40	

Detailed Budget and Implementation Plan-MPTF (UN

Budget Lines	Description	Detailed Activity	Anticipated Result	Lead Person	Progress
1. Staff and other personnel	Cost sharing with existing staff and recruitment of consultants	<ul style="list-style-type: none"> Project Management Cost 	<ul style="list-style-type: none"> Continuous monitoring of Project activities within UNWomen Timely procurement of equipment and supplies 	JM/AN	Done
		<ul style="list-style-type: none"> Recruit one national Consultant for Rapid Gender Assessment and Training of Police Forces 	<ul style="list-style-type: none"> Assessment of gender dynamics and economic opportunities for GEWE 	VK	
					Sub-Total Staff and other personnel
	Procurement and distribution of “Resilience Kits”, and Community Sensitization and Mobilisation events [Screenings and discussions with the movie screening of Bongo Te Tika]	<ul style="list-style-type: none"> Buy commodities for 6000 “Protection Kits” 	<ul style="list-style-type: none"> Urgent livelihood support for 600 women and girls 	AN, JCK	
		<ul style="list-style-type: none"> Buy communication material, incl. Posters, Flyers including for sensitization efforts by Community Leaders 	<ul style="list-style-type: none"> Sensitize communities on Covid-19, and GBV, and He for She 	JCK/ AN	
		<ul style="list-style-type: none"> Hygienic supplies for Covid-19 prevention during distribution (Sanitizers, Soap, Hand-Wash Facility) 	<ul style="list-style-type: none"> Covid-19 Preventative measures uphold during events 	JCK/ AN	

2. Supplies, Commodities, Materials	Procurement of supplies and training on SGBV prevention and handling for <i>Police Nationale Congolaise</i> (PNC)	<ul style="list-style-type: none"> Hygienic supplies for Covid-19 prevention during distribution (Sanitizers, Soap, Hand-Wash Facility) 	•	JCK	
		<ul style="list-style-type: none"> Procurement of communication material 	•	JCK	
	Support to the Ministry of Gender, Family and the child to implement the New National Strategy against Gender-Based Violence and support Sub Working Groups	<ul style="list-style-type: none"> SMALL GRANT 	•	AN	
	Cash Transfers to women's organizations and victims of SGBV (incl- 150 women being trained in Economic Empowerment workshops		•	JCK/ AN	
					Sub-Total Supplies, Commodities, Materials

3. Equipment, Vehicles, and Furniture, incl. Depreciation	Procurement and distribution of “Resilience Kits”, and Community Sensitization and Mobilisation events [Screenings and discussions with the movie screening of Bongo Te Tika]	<ul style="list-style-type: none"> Procure a projector and screen 	<ul style="list-style-type: none"> 	JCK/ AN	
					Sub-Total Equipment, Vehicles, and Furniture, incl. Depreciation
4. Contractual services	Conduct of Workshops for Women’s Economic Empowerment (Rapid Income-Generating activities such as soap production, Entrepreneurship , Leadership, Savings Associations Creation etc.)	<ul style="list-style-type: none"> Contract NGO "Community Centre for Soap Production" to provide materials for beneficiaries, rent room and facilitation and provide trainings 	<ul style="list-style-type: none"> 	AN, NW	
	All outputs involved	<ul style="list-style-type: none"> Contract Videographer to do short movies on the project 	<ul style="list-style-type: none"> 	AB	
					Sub-Total Contractual Services
	Procurement and distribution of “Resilience Kits”, and Community Sensitization and Mobilisation events [Screenings and discussions with	<ul style="list-style-type: none"> Daily Substance Allowances and Travel cost for UN Women Staff 	<ul style="list-style-type: none"> 4 staff can travel and conduct activities 	JCK/ AN/NW	

5. Travel	the movie screening of Bongo Te Tika]	<ul style="list-style-type: none"> • Travel expenses for beneficiaries 	<ul style="list-style-type: none"> • 	JCK	
	Conduct of Workshops for Women's Economic Empowerment (Soap production, etc.)	<ul style="list-style-type: none"> • Travel expenses for beneficiaries 	<ul style="list-style-type: none"> • 	JCK/NW	
	Rapid Gender Assessment of economic opportunities	<ul style="list-style-type: none"> • Travel and DSA for C 	<ul style="list-style-type: none"> • Data-driven response 	JCK	
	Procurement of supplies and training on SGBV prevention and handling for <i>Police Nationale Congolaise</i> (PNC) AND Support to the Ministry of Gender, Family and the child to implement the New National Strategy against Gender-Based Violence	<ul style="list-style-type: none"> • Travel and DSA for UNW Staff 	<ul style="list-style-type: none"> • 	JCK/NW	
Sub-Total Travel					
	Cash Transfers to women's organizations and victims of SGBV	<ul style="list-style-type: none"> • Cash-transfers to participants of the Women's Economic Empowerment Workshops 	<ul style="list-style-type: none"> • 150 female participants to WEE-workshops receive a one-time contribution of 200 USD to launch economic activities 	JCK/AN	

6. Transfers and Grants to Counterparts	SGBV (incl- 150 women being trained in Economic Empowerment workshops	<ul style="list-style-type: none"> Cash-transfers to women at high risk or victims of SGBV referred to by project consortium, Implementing Partners and informed by the gender assessment 	<ul style="list-style-type: none"> 150 women and women's rights associations receive cash transfers of 200 USD 	VK/AN	
	Support to the Ministry of Gender, Family and the child to implement the New National Strategy against Gender-Based Violence and support Sub Working Groups	<ul style="list-style-type: none"> Launch the SNVBG at the Provincial Level 	<ul style="list-style-type: none"> 		
					Sub-Total Transfers and Grants to Counterparts
7. General Operating and other Direct Costs	Procurement and distribution of "Resilience Kits", and Community Sensitization and Mobilisation events [Screenings and discussions with the movie	<ul style="list-style-type: none"> Room rent 	<ul style="list-style-type: none"> 	AN/JCK	
	Cash-transfers to women at high risk or victims of SGBV referred to by project consortium, Implementing Partners and informed by the gender assessment	<ul style="list-style-type: none"> Bank fees (*in negotiation to reduce /erase them with the help of signatories of the Women Economic Empowerment Principles) 	<ul style="list-style-type: none"> 		

					Sub-Total General Operating Costs
					Sub-Total Programme Cost
8. Indirect Support Costs * 7%					
Total					

JM-Jules Mulimbi; AN-Anne-Marie Nabintu; NW-Norbert Weze; VK-Valery Kabamb

WOMEN)

Costs		Time Frame						
		<i>N</i>	<i>D</i>	<i>J</i>	<i>F</i>	<i>M</i>	<i>A</i>	<i>M</i>
\$	35,000.00							
\$	5,000.00							
\$	40,000.00							
\$	42,000.00							
\$	10,732.32							
\$	1,500.00							

\$ 8,500.00							
\$ 3,500.00							
\$ 6,500.00							
\$ 7,289.00							
\$ 80,021.32							

\$	1,500.00						
\$	1,500.00						
\$	13,000.00						
\$	8,000.00						
\$	21,000.00						
\$	2,482.00						

\$	8,000.00						
\$	2,000.00						
\$	1,716.00						
\$	2,676.00						
\$	16,874.00						
\$	30,000.00						

\$	30,000.00							
\$	20,000.00							
\$	80,000.00							
\$	2,000.00							
\$	2,450.00							

\$	4,450.00						
\$	243,845.32						
\$	17,069.17						
\$	260,914.49						

*a; HN-Hornella Ndeni; JCK-Jean-Claude Kabongo; C-Consultant*e.*

Blue	Blue	Blue	Blue	Blue	White
Blue	White	White	White	White	White
Green	Green	Green	Green	Green	Green
White	White	White	White	White	White
Blue	Blue	Blue	Blue	Blue	White