

Sierra Leone MDTF

Fund Signature Page

(Note: this page is attached to the programme¹ document)

<p>Participating UN Organisation(s): UNFPA</p>	<p>Priority Area: JV: Local Governance and Decentralisation AFC: Chapter Eighteen –Democracy and Good Governance Chapter Ten- Growing the Private Sector</p>
<p>Programme Manager, Participating UN Organization: UNFPA Name: Isatu Kajue Address: UNFPA,7b Sharon street, Wilberforce Telephone: +232.76805654 E-mail: kajue@unfpa.org</p>	<p>Implementing Partner(s): Ministry of Social Welfare, Gender and Children’s Affairs (MSWGCA), District Health Medical Teams, Community Chiefdom Advocacy Groups Name: N/A (Direct Execution) Address: N/A Telephone: N/A E-mail: N/A</p>
<p>Project Number: Joint Vision Programme Sixteen</p>	<p>Programme Duration: 12 months Estimated Start-Up Date: January-December 2012</p>
<p>Project Title: Community Empowerment to reduce Gender-based Violence and Maternal Health Complication.</p>	<p>Programme Location: Eastern Region (Kenema, Kailahun and Kono)</p>

¹ The term “programme” is used for projects, programmes and joint programmes.

<p>Project Description:</p> <p>Scaling up of Chiefdom Community Wellness Advocacy Groups (CAGs) on advocacy, dialogues, sensitizations and mobilization programs in additional 3 districts (Kenema, Kono and Kailahun). Currently, there are 74 CAGs established and engaged in 6 districts (Bo, Bombali, Koinadugu, Bonthe, Tonkolili and Western Rural Area).</p> <p>The planned intervention would focus on training of 400 community advocate comprising Traditional Births Attendants (TBAs), Soweis- practitioners of Female Genital Cutting (FGC) and young people in the respective localities. The training will focus on understanding Sexual Reproductive Health and Rights (SRHR) and Gender-based Violence Prevention and Response, including the implications of FGC on women’s wellbeing and development.</p> <p>Community Stakeholders’ active involvement in the promotion of maternal health and the prevention of Gender-Based Violence, Family Planning will be supported. This will include capacity development of Fambul Initiative Network for Gender Equality (Male Network) to provide technical support to the CAGs programs and deliverables.</p>	<p>Total Project Cost: \$ 257,250</p> <p>[SL- MDTF]: \$257,250 Government Input: 0 Other: 0</p> <p>GRAND TOTAL: \$ 257,250</p>
<p>Development Goal and Key Outcomes:</p> <p>Developmental Goal: Set up 40 Chiefdom Community Advocacy Groups in the 3 districts of implementation and build the capacity of community stakeholders, particularly TBAs, ‘Sowies’, young people and key male partners in the prevention of GBV and promotion of Sexual Reproductive Health and Rights in the rural communities, and support the provision protective services and legal redress for GBV victims and survivors.</p> <p>Outcome 1: Enhanced reduction in SGBV, FGC and Maternal Health Complications occurrences</p> <p>Outcome 2: Effective and efficient Male involvement in the Prevention and Response of GBV and promotion of Sexual Reproductive Health and Rights enhanced.</p> <p>Outcome 3: Enhanced community knowledge and empowerment on Sexual Reproductive Health and Rights and positive attitude towards accessing and utilization of RH services.</p>	
<p>Deliverables:</p> <ul style="list-style-type: none"> • Traditional Births Attendants, Sowies and young people trained in effective monitoring and sensitization on GBV, human rights, particularly Sexual Reproductive Health and Rights. • 40 additional Community mobilization groups against GBV and Maternal Deaths established. • Established Chiefdom Community Advocacy Groups supported on outreaches, mobilization and sensitizations • Communities capacities enhanced to record and report GBV cases to appropriate authorities • Effective advocacy and dialogues programs facilitated by the male network. 	

Signature

Date

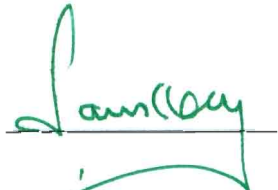
Name/Title

UNFPA


_____ 17/01/12


Ms. Rati Ndhlovu
Country Representative

DEPAC Co-Chair


_____ 24/1/12

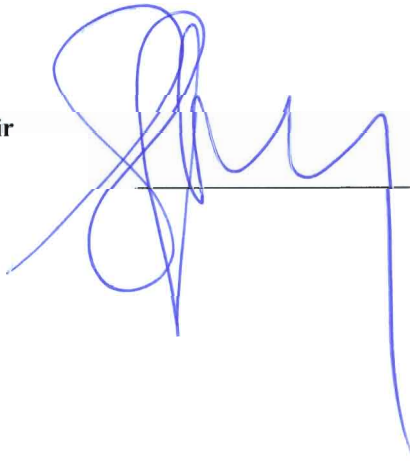
Honorable Dr. Samura Kamara
Minister of Finance and
Economic Development

DEPAC Co-Chair


_____ Jan 18, 2012

Mr. Vijay Pillai
Country Manager
World Bank

DEPAC Co-Chair


_____ 24/01/2012

Mr. Michael von der Schulenburg
Executive Representative
of the Secretary General
of the United Nations

Project Document

Executive Summary:

The Government of Sierra Leone and partners consistently demonstrate their commitment to the promotion of Gender Equality and women's empowerment. The government in 2010 launched the National Gender Strategic Plan and action plan on United Nations Security Council 1325 and 1820.. One of the main priorities of this plan is Rural Community Empowerment, particularly on programmes and initiatives meant to empower rural women. This is based on the realities that rural women and young people remain to be deprived of the basic resources meant for all citizens in their respective localities. The Government's commitment is in line with the Convention on the Elimination of All forms of Discrimination against Women (CEDAW) which is very strong on ensuring that rural women enjoy their basic human rights.

There institutionalization of Local Government through the Local Government Act 2004 in Sierra Leone provides an opportunity for inclusion and participation of the rural communities to take ownership and responsibilities of their development, and empowering the most marginalized groups to be more proactive in the decision making process.

The main aim of UNFPA's contribution to this programme is to support the Government in ensuring rural development and empowerment and building the capacities of the respective community stakeholders involved in the decentralization process.

Situation analysis:

The Health and Social support related services in Sierra Leone are limited in addressing GBV related issues. The Traditional Births Attendants (TBAs) and Soweis have been very active in engaging the communities but limited in technical capacity on how to monitor and support the communities on the prevention and management of GBV and Maternal Mortality related complications. Victims of GBV are traumatized as they live with perpetrators in their communities.

National response

The GoSL has recently launched the National Gender Strategic Plan. There is in existence an active National Gender-based Violence Committee, which provides a coordination role for all GBV related responses in the country. Plans are also place to draft a National Action Plan on the Prevention and Management of GBV. The GBV committees have been established at the regional levels to replicate the work at the central level. The Ministry of Social Welfare Gender and Children's Affairs has established and functioning Regional Gender Desk Officers to coordinate and give over sight of all gender related programme in close collaboration with the local councils.

Geographical coverage: Eastern Region

The project implementation would be in the Eastern Region (Kenema, Kono and Kailahun).

Beneficiaries: Ministry of Social Welfare, Gender and Children's Affairs, Traditional and Community Leaders, and Fambul Initiative Network for Gender Equality, Sierra Leone (FINE-SL).

Institutional Targeting and Selection of Beneficiaries:

TBAs are currently still active in deliveries but with capacities in relating GBV realities to Sexual Reproductive Health and Rights. They would be specifically targeted to support the policy makers and implementer on GBV Prevention and community response. Male involvement is also very crucial in the successes of GBV and Maternal complications Prevention and Response.

Strategies

The Government, development partners and NGOs are currently embarking on community mobilization meant to primarily engage the communities on issues of GBV. The intervention is also meant to enhance community ownership of the interventions related to GBV prevention and management, including supporting legal redress.

Results framework

Joint Vision framework and benchmark

As part of the Joint Vision programme 16, UNFPA will contribute to the strengthening of capacities of the rural communities in the prevention of GBV and Reproductive Health and Rights.

Outcomes

Outcome 1: Enhanced reduction in SGBV, FGC and Maternal Health Complications occurrences

Outcome 2: Effective and efficient Male involvement in the Prevention and Response of GBV and promotion of Sexual Reproductive Health and Rights enhanced.

Outcome 3: Enhanced community knowledge and empowerment on Sexual Reproductive Health and Rights and positive attitude towards accessing and utilization of RH services.

Deliverables (outputs)

- Traditional Births Attendants, Sowies and young people trained in effective monitoring and sensitization on GBV, human rights, particularly Sexual Reproductive Health and Rights.
- 40 additional Community mobilization groups against GBV and Maternal Deaths established.
- Established Chiefdom Community Advocacy Groups supported on outreaches, mobilization and sensitizations
- Communities capacities enhanced to record and report GBV cases to appropriate authorities
- Effective advocacy and dialogues programs facilitated by the male network.

Core activities:

- Training of Community Advocacy Groups, particularly Traditional Births Attendants and Sowies in effective monitoring and sensitization on GBV, Sexual Reproductive Health and Rights.
- Support the established Male Engagement Network on community sensitization of men and other members on the positive implications of their involvement in the community prevention and monitoring of GBV related matters and promoting Sexual Reproductive Health and Rights in the Eastern Region.
- Facilitate community mobilization around GBV and Sexual Reproductive Health and Rights related issues
- Provision of outreach items (megaphones, Music players, radios, touch lights, batteries, rain gear) for community sensitization and mobilization.

Management and coordination arrangement

UNFPA will coordinate, manage and give oversight and technical assistance. MSWGCA and Community Advocacy Groups and FINE-SL will be the recipient of funds responsible for the training and integration of GBV and Sexual Reproductive Health and Rights in the communities.

Fund management arrangements

UNFPA will be the recipient of the funds and will support implementation through the Ministry of Social Welfare, Gender and Children's Affairs and also the District Health Medical Teams.

Monitoring, evaluation and reporting

Project monitoring and reporting will be done as per the UNFPA M&E framework.

The impact of this project will be assessed as part of the Joint Vision programme 16 at the end of the project. However, quarterly reports on the project's delivery will be issued as part of the MDTF reporting requirements.

Elements of the logical framework

Results chain	Performance indicators
Joint Vision Priority Area: Local Governance and Decentralisation	
JOINT VISION BENCHMARK	
OUTCOME	
Outcome 1: Enhanced reduction in SGBV, FGC and Maternal Health Complications occurrences	Percentage Reduction of SGBV Incidences and Maternal Deaths and complications
Outcome 2: Effective and efficient Male involvement in the Prevention and Response of GBV and promotion of Sexual Reproductive Health and Rights enhanced.	No. initiatives led by Men on GBV and MMR Prevention and reporting for action
Outcome 3: Enhanced community knowledge and empowerment on Sexual Reproductive Health and Rights and positive attitude towards accessing and utilization of RH services.	No of community advocates trained and empowered with knowledge on Sexual Reproductive Health and Rights.
DELIVERABLE	
<ul style="list-style-type: none"> • Traditional Births Attendants, Sowies and young people trained in effective monitoring and sensitization on GBV, human rights, particularly Sexual Reproductive Health and Rights. • 40 additional Community mobilization groups against GBV and Maternal Deaths established. • Established Chiefdom Community Advocacy Groups supported on outreaches, mobilization and sensitizations • Communities capacities enhanced to record and report GBV cases to appropriate authorities • Effective advocacy and dialogues programs facilitated by the male network. 	<p>No of TBAs trained and actively engaged in community sensitizations on Sexual Reproductive Health and Rights and mobilization to access and utilise RH services within the communities.</p> <p>No of community outreach programs held and behavioural change enhanced.</p> <p>No of community mobilization and sensitizations held</p> <p>No. GBV cases reported by the communities to the appropriate Authorities</p> <p>No of advocacy and dialogue sessions supported by male network to promote sexual reproductive, health and rights</p>

Legal Context or Basis of Relationship

Signatory to the Joint Vision as the UN's contribution to the GoSL Agenda for Change.

Workplans and budgets

Activity	JUNE 2011- JUNE 2012					Responsible
	Q1	Q2	Q3	Q4		
Train 400 Traditional Births Attendants in effective monitoring and sensitization on GBV, Sexual Reproductive Health and Rights (SRHR)						UNJV Programme Focal Person
Sensitize monthly 1000 men on the positive implications of their involvement in the community response and monitoring of GBV and SRHR related matters						UNJV Programme Focal Person
Support monthly community mobilization around GBV and SRHR related issues						UNJV Programme Focal Person
Provision of community outreach items						UNJV Programme Focal Person
Capacity and systems strengthening of FINE-SL						UNJV Programme Focal Person
Monitoring of project implementation						UNJV Programme Focal Person
Reporting						UNJV Programme Focal Person

Activity Based Budget (USD)

Line #	Line description	Definition of figure to be reflected
1	Train 400 community advocates (TBAs, Soweis and young people) on GBV and SRHR	70,000
2	Provision of community outreach items	19,000
3	Support monthly community sensitization and mobilization	61,421
4	Support advocacy and policy dialogue initiatives of FINE-SL	50,000
5	Monitoring of project implementation (Procurement of monitoring vehicle and support supportive supervision and monitoring)	40,000
6	Indirect Costs (7%)	16,829
7	Total Received Funds (this project)	\$ 257,250

PROJECT BUDGET	
CATEGORY	AMOUNT
1. Supplies, commodities, equipment and transport	60,000.00
2. Personnel (staff, consultants and travel)	20,000.00
3. Training of counterparts	70,000.00
4. Contracts	80,000.00
5. Other direct costs	10,420.56
Total Programme Costs	240,420.56
Indirect Support Costs (7% of total programme cost)	16,829
TOTAL	257,250