

Requesting Organization: OXFAM GB

Allocation Type: Reserve Allocation 1

Primary Cluster	Sub Cluster	Percentage
WATER, SANITATION AND HYGIENE		100.00
		100

Project Title: Emergency WASH Support to Internally Displaced People (IDPs) and Host Communities in Western Bar el Ghazal

Allocation Type Category : Frontline services

**OPS Details:** 

Project Code :		Fund Project Code :	SSD-16/HSS10/RA1/WASH/INGO/3164
Cluster :		Project Budget in US\$:	\$530,000.00
Planned project duration :	6 months	Priority:	
Planned Start Date :	15/08/2016	Planned End Date :	14/02/2017
Actual Start Date:	15/08/2016	Actual End Date:	14/02/2017

#### **Project Summary:**

Oxfam will provide IDPs fleeing from Wau town with basic WASH services, that will include increasing access to safe water, facilitation of proper sanitation, public health promotion activities and WASH NFIs, with a specialized provision hygiene kits that include menstrual hygiene products, particularly re-usable sanitary pads.. Due to low literacy levels of women, and most men, hygiene messaging and mass information sharing will be undertaken using cartoons/pictorial messaging and mother tongue translations in all intervention areas to promote lifesaving behavior change. Oxfam is prioritizing IDPs taking refuge in PoC 2 and Cathedral sites as the ones with highest needs and where the risk of AWD outbreak is the highest. In these selected sites and those to follow, Oxfam will ensure a protection risk analysis and mitigating measures have been put in place, Through the provision of life saving WASH activities, Oxfam will contribute to mitigate the risk of cholera outbreak but also ensure capacity to respond if an outbreak was to occur. According to a report released on 23rd July by the MoH and WHO South Sudan is now facing a cholera outbreak. The outbreak is mainly impacting Juba where the displacement context and PoC set up are increasing the population vulnerability. Wau is at similar risk and is therefore requiring to mobilize efforts to mitigate potential cholera outbreak. As a next priority, this support will be extended to other areas of need outside town when the security situation and access improves and allow. Protection interventions will be mainstreamed through the programme with WASH interventions designed including training of gender inclusive WASH committees with a 60:30:10 ratio of women, youth and men. All will be trained in construction, maintenance, repair and management of the WASH facilities. Men , boys and youth will be involved in order to mitigate conflict around WASH facilities to actively to reduce SGBV and to mitigate conflicts at Wash facilities ensuring ratios are respected and in coordination with other protection actors. All WASH facilities will be designed taking into account disposal of used menstrual hygiene products, accessible to children and the physically disabled, sex disaggregated, and clearly marked. They will be locale from the inside and well lit especially at night. Lighting will be done in such a way as to reduce gathering of youth and men at WASH facility sites. Staff of Oxfam working on the project, WASH committee members and the general community will be trained on and informed about available referral pathways for confidential handling of SGBV cases, in coordination with the GBV subcluster and other actors.

. The context in Wau has shown to be unstable and requires Oxfam to maintain flexibility to be able to support the most vulnerable population. For now at the priority is to ensure assistance to 40,000 people in Wau town (approximately 20,000 at PoC 2, 10,000 at Cathedral and 10,000 in other sites) but 40,000 people are still displaced outside Wau town and in needs of humanitarian assistance. As the situation in Wau is fluid and might changes rapidly, the project will remain flexible to reach the most vulnerable populations.

## Direct beneficiaries:

Men	Women	Boys	Girls	Total
9,216	20,800	4,792	5,192	40,000

## Other Beneficiaries:

Beneficiary name	Men	Women	Boys	Girls	Total
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# Indirect Beneficiaries :

## **Catchment Population:**

# Link with allocation strategy:

CHF Reserve funding will be used for direct implementation of WASH activities that address life saving needs including access to adequate clean drinking water, access to safe sanitation practices and creating awareness to adapt good hygiene practices. Oxfam's intervention will cover the areas with the highest needs and where the risk of AWD outbreak is the greatest which are the PoC -2 and Cathedral as for now: due to the high concentration of population and poor hygiene practices and which therefore require much attention on improving the hygiene behavior and practices and ensuring access to WASH services with activities that can be implemented directly considering the capacity on the ground; while these activities can also be extended to other areas including St Joseph school, South Sudan Red Cross, Nazareth and Lokoloko and also out site Way town once the access opens up and needs are being assessed. The intervention will be triggered along the project based on the highest need and the response capacity of other WASH partners Internal capacity and close coordination with other clusters will ensure protection and gender are mainstreamed to answer people needs and more specifically women and girls and mitigate risks for the most vulnerable (SGBV, issue of access to facilities, etc.). Providing IDPs and host communities with essential WASH services, encompassing priority activities set by the WASH cluster, which will include the expansion of access to safe water through the operation and maintenance of water supply network and distribution areas, hand pump repair and the construction and rehabilitation of sanitation facilities including their operation and maintenance, assessing options of handing it over to the community. As well as the scale up of hygiene promotion activities, that will actively promote hand washing at critical times, sanitation, promote safe water chain and support safe solid waste disposal. At the same time, it is important to take into account gender and Protection issues arising. This will be done by making awareness raising material accessible to men, women, boys, girls, youth, the aged and persons with physical disability. Taking into consideration low literacy levels, the material will be done in cartoon/pictorial form so that information is available to all. Protection analysis of sites will be done and mitigating factors identified and fed into project and site design. A gender analysis will inform specific design of and identify Sanitation needs of women, girls, men, boys, the disabled and persons with disabilities. All categories of persons will be consulted with regard to design, management and location of WASH facilities, as well as timing and location of awareness raising campaigns.

## **Sub-Grants to Implementing Partners:**

Partner Name	Partner Type	Budget in US\$

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

Other Funding Source	Other Funding Amount
UNICEF	830,796
	830,796

## Organization focal point :

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# **BACKGROUND**

## 1. Humanitarian context analysis

The December 15th 2013 political conflict in Juba affected the security situation in Wau County; this was worsened after armed groups continued to clash with government forces until mid 2016, displacing over 96.000 people (16,000 households) from the three payams Bazia, Bagari and Basselia. Out of these, the majority were women and children. Furthermore, the recent insecurity in Wau town from 24-27 June 2016 displaced many people from several locations and added to the already displaced population following the conflict in March and May 2016.IDPs gathered in several sites in town and sought refuge in the bush outside town. In town, 40,000 IDPs have gathered in 6 sites to seek protection as the security is unstable and targeted attacks are being reported. The 2 main sites are PoC and Cathedral with respectively 20,649 and 13,123 individuals reported in the latest headcount where initial estimates were respectively 19,711 and 10,000 people. Since 24th June, the PoC -2 and Cathedral had the highest number of IDPs and it continued to increase as no humanitarian assistance can access outside Wau town. These displacements have led to increase sanitary risks as no or very limited facilities were available at the different sites. Even with the on-going construction of infrastructures and efforts to reach international standards the new arrivals and limited space are increasing the pressure on the facilities. Organizations on the ground have quickly mobilized resources to support the provision of basic WASH services for life saving and mitigated the risk of outbreaks linked to overcrowded locations. However, the current situation in Wau is still unpredictable and people are scared to go back to their houses; therefore as insecurity continues to prevail it is necessary to ensure that services are maintained in the displacement sites. Much of the infrastructure in PoC -2 and Cathedral were of emergency nature and will require replacement with durable materials that will be able to last much longer. The on-going cholera outbreak in South Sudan with already more than 300 cases reported in Juba and the increase of AWD cases in Wau with 70% for under 5 in the displacement sites are stressing the needs to ensure WASH services are in place and that response capacity is supported in case of cholera outbreak in Wau. This proposed intervention will focus on improvements and long term provision of safe drinking water, adequate sanitation facilities and safe hygiene practices in the two IDPs campsites where the needs are the highest and also other sites outside the PoC-2 and Cathedral.It will directly benefit 40,000 beneficiaries through direct intervention in coordination with the WASH cluster, line ministries and Directorate of Rural Water Supply and Sanitation as well as with other WASH actors mainly IOM and UNICEF. In the increasing peak of the rainy season July-October, there is the high risk of increased cases of diarrhea and Acute Watery Diarrhea outbreak in Wau town as already been reported in other towns around South Sudan. The requested fund will be utilized to put in place all WASH related preventive measures in coordination with other health/public health sectors in Wau town. The WASH sector will develop a comprehensive cholera prevention strategy for the IDPs in camps to be integrated into the National Cholera Prevention Strategy already developed for Wau town. The WASH cholera prevention strategy will focus on risk factors associated with water supply including proper chlorination of drinking water and safety of its transporting/storage. The sanitation factors will be on faeces management including latrine cleaning at the IDPs and households levels. On hygiene the focus will be on food hygiene at household and at public eating places and dissemination of key cholera prevention. Community awareness sessions/campaigns to involve community and religious leaders in coordination with civil authorities, ministry of health, education and local government.

## 2. Needs assessment

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Before the fighting on 24th June that led to more influx of IDPs into the current six locations including PoC -2, Cathedral, South Sudan Red Cross, St Joseph, Nazareth and Lokoloko, there were no or limited sanitation facilities available in each site. The high influx of IDPs in the two different sites has increased pressure on the existing facilities leading to high ratio per facilities and increasing the risk of outbreak of water borne or sanitation related diseases. PoC 2 area had no facilities and has now reached 1 latrine per 46 persons while in Cathedral only 30 stances were available for 10,000 people,now thanks to the construction of additional emergency latrines,the ratio of 1 latrine per 96 people has been reached, No water supply facilities were available at PoC2 not even now though the rapid mobilization to support provision of services through water delivery by water trucking IDPs are receiving an average of 15 liters per day per person. In the Cathedral, there were three hand pumps only one was functional.6 tap stands connected to the urban water network and 1 non-functional water yard supplied from a motorized borehole. Hand pumps have been repaired, fuel supplied and several temporary storages have been installed and are supplied through water trucking to ensure at least 15 liters of water per person per day, while efforts are being made to move away from water trucking and support the water supply of all distribution sites from the urban water network. Chlorination is being implemented but needs to be strictly monitored as to avoid risk of cross contamination in an environment prone to diarrhea outbreak. Limited space available is putting pressure on the newly built facilities stressing the need to constantly maintain them and look for options to increase the coverage as well as to intensify hygiene promotion. The high concentration of population in PoC2 with 20,649 people with less than 1m2 per person and in Cathedral with 13,123 people of which a majority in still sheltering under trees, is increasing the risk of WASH related diseases outbreak among others. WHO has already reported an increase of diarrhea cases in the 2 major sites which emphasizes the underlying risk for outbreak. In the smaller sites, people have started to return home but mainly during day hours, still sheltering inside church compound at night requiring adequate facilities to be accessible. The vast majority of the camp population being women and children(85% according to IOM latest Movement Trend Tracking) is raising further protection concerns and requires to adapt the humanitarian assistance in terms of gender separated facilities and designed to be child friendly, Linked to the general insecurity in Wau town, the intention survey recently conducted by IOM shows that people would like to return to their home but are intending to stay for at least 6 months to one year, therefore maintaining services provision in the displacement sites to acceptable standards for water supply operation and maintenance of the sanitation facilities, waste management and promotion of safe hygiene practices to reduce the risk of outbreak will increase the need of investment to be done to ensure access facilities is sustained while the population is still seeking protection. It is pertinent to engage women, girls and children in design, repair, maintenance, management and location of WASH and sanitation facilities, alongside men and youth. Apart from the disaggregation of toilets and lighting mentioned above Oxfam will liaise with Protection, Health and GBV actors to provide information to men, women, boys, girls youth, elderly persons and persons with disability on SGBV prevention, the need to report and access to confidential referral pathways including availability of PEP kits at health facilities and the training of health workers in Clinical Management of Rape. Women and girls will be consulted on the content of menstrual hygiene kits. Hygiene kits for HH will include children

## 3. Description Of Beneficiaries

Oxfam focuses intervention with direct WASH activities to the two locations with the highest needs which are currently IDPs settled in PoC 2 with 20,649 IDPs, and Cathedral with over 13,123 IDPs. Additional support would be considered along the project to other sites such as St Joseph with 1,200 IDPs, Nazareth 1,000, Lokoloko 1,000 and South Sudan Red Cross with 2,000 and outside Wau town where the IDPs are mainly scattered in the bush if the needs are not covered by other actors. If population returns to their location of origin, Oxfam would look at accompanying them to ensure that WASH minimum services are available as well as forhost populations near the IDPs With sex and age disaggregated data this project will mainly target IDPs in the displacement sites, 40,000 individuals (53% female and 47% male, however a majority of men are staying in the houses making the camp population a majority of women and children representing approximately 85% in the major sites) with an average of 6 persons per household, and will pay specific attention to the people with special needs such as pregnant and lactating women, women head of households, elderly and disabled, people with disabilities and chronic diseases (such as HIV). With regard to HIV AIDS, Oxfam will liaise with partners to advocate for training of family members on Home based care, community awareness on HIV/AIDS and the food security actors for distribution of nutritious foods. Oxfam will ensure that the WASH facilities are physically and sex disaggregated, clearly marked, lockable from the inside and well lit. Equal opportunity will be given for casual worker job and Oxfam will ensure that gender sensitivity is respected as for example having female latrine cleaners for female latrine blocks and male cleaners for male blocks, ensuring the community hygiene promoters are a majority of women taking into consideration the population present in the targeted locations The design will also take into account facilities for disposal of menstrual waste, as well as th

Oxfam will work in coordination with protection cluster to ensure full participation of and involvement of community leaders on protection awarenes activities directed to improve welfare of children (Gils and boys). The team will coordinate with other stakeholders to enhance reunion of separated children and prevention of gender based violence among the IDPs and surrounding communities, while ensuring that all GBV cases are reported and referred for support in available health services.

## 4. Grant Request Justification

It is estimated that 40,000 IDPs from Wau town have moved to the six IDPs camps as preferred safe heaven has overstretched available WASH resources. The most populated IDPs locations areas are the PoC 2 with 20,649 individuals and Cathedra with 13,123 individuals, which have increased needs in consequence; the two sites are over populated to meet needs of the IDPs after host population in villages surrounding Wau town was reduced by more than half during crisis, which forced many people to seek protections/safety at the Cathedral and PoC, St Joseph, South Sudan Red Cross and Lokoloko.

In view of the current ongoing crises, it is more likely that increased armed confrontations between the armed groups and SPLA forces will continue to displace more communities from other villages including those not affected with the resent crises. Furthermore, the ongoing clashes between armed groups in Raja located North West of Wau town may spread southwards displacing more people to move towards Wau town into the current IDPs camps. This will stress the available WASH facilities in these camps and will require additional demand for provision of more WASH and protection support. Furthermore the spaces available to provide access to WASH facilities are already fully utilized, therefore additional space will be required to allow any extension of services.

Oxfam will focus on providing services in the areas with the highest needs and which are more at risk of acute watery diarrhea outbreak. As shown in the last 3 weeks through an increase of diarrhea cases mainly for under five children, those overcrowded sites require to intensify WASH services to mitigate outbreak risk. The project aims at improving the coverage of services and tends toward international standards regarding infrastructures built (1 tap stands for 250 persons, 1 latrine for 20 to 50 persons, 20 liters per per per per day, 250 people per bathing shelter) as much as space is available and when required intensify hygiene promotion and community mobilization to ensure proper use and maintenance including cleaning, desludging and rehabilitation of hundreds of emergency sanitation infrastructures. When access to villages outside Wau improves, full WASH activities would be extended to target villages outside Wau town based on needs and existing infrastructures focusing on maintaining functional hand pumps, promoting safe excreta disposal and ensuring required WASH NFI are available for safe hygiene practices (water container, dignity items, etc.). Increasing access to adequate safe drinking water and improving access to safe sanitation and hygiene practices in the IDPS locations and if possible villages outside Wau town would enable IDPS and host community live with dignity, help mitigate incidents of SGBV as well as prevent water borne/related diseases. However the challenges faced to access outside Wau, is also increasing pressure on existing displacement sites and mainly PoC 2 and Cathedral where more than 1000 people have arrived in the last week mainly from areas outside Wau (Biringi, Tadu, Ngissa) as no humanitarian assistance can reach them. This highlights the need to maintain the capacity to provide full WASH services in the 2 main sites for the moment to ensure that infrastructures and services provided can support those new arrivals.

## 5. Complementarity

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This emergency programme has been designed to fill gaps in the WASH needs in the particular displacement context following the recent fighting in Wau town. Emergency intervention has indeed already partially responded to people's needs however, the nature of the displacement and the general insecurity leading people to seek for refuge in specific sites require to ensure that WASH services are maintained as long as people will require protection. Sites with the highest needs have been prioritised and will be covered in coordination with other WASH actors. Intervention in the displacement sites will be done in strong coordination with other sectors actors such as food security, protection, education, CCCM and GBV subcluster to ensure harmonization in the approaches. The temporary nature of those sites is indeed challenging humanitarian assistance as there is a risk that people would remain in those locations to benefit from services. Oxfam and other actors are therefore coordinating to ensure that basic services are provided and that return will be accompanied once the population feels safe to go back their homes. Emphasis is already being put on supporting activities outside of the displacement sites such as through the repair of water points or the support to health structure to ensure qualified staff is present. If the situation evolves, Oxfam will look at supporting areas with the highest needs whether it is in displacement sites in Wau town or outside town or in the eventually of return.

## LOGICAL FRAMEWORK

## Overall project objective

To increase and sustain access to essential safe water and sanitation services, as well as WASH NFIs and contribute to improve hygiene practices for fleeing IDPs coming from Wau town due to recent fighting.

WATER, SANITATION AND HYGIENE		
Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
CO1: Affected populations have timely access to safe and sufficient quantity of water for drinking, domestic use and hygiene (SPHERE)	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	45
CO2: Affected populations are enabled to practice safe excreta disposal with dignity in a secure environment	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	40
CO3: Affected populations have knowledge and appropriate behaviors to prevent and mitigate WASH related diseases and practice good hygiene	HRP 2016 SO2: Ensure communities are protected, capable and prepared to cope with significant threats	15

<u>Contribution to Cluster/Sector Objectives</u>: Oxfam's intervention will increase the supply of safe drinking water, access to sanitation facilities and knowledge of waterborne diseases in order to help conflict affected populations reduce the risk of disease.

#### **Outcome 1**

IDPs have improved and sustained access to safe water and safe sanitation facilities in the coming six months.

## Output 1.1

## Description

Safe water is provided in sufficient quantity through connection to urban water network, repair or construction of new water points

# **Assumptions & Risks**

## Assumptions:-

IDPs continue to stay in the current locations and not forced out of the current locations to their areas of origin; other host community beneficiaries are supportive of programme design, siting of water points and so on.

Oxfam is and will continue to work closely with the communities and involve local communities in decision making and hold regular consultations and engagement throughout the programme; there is continued accessibility allowing logistics to deliver supplies and activities to be implemented

## Risks

There is stability and the security situation does not deteriorate to affect more villages outside Wau, The peace implementation will proceed as planned and no escalations of tensions and fighting between the government and opposition forces

## **Activities**

## Activity 1.1.1

Provision of safe water to 40,000 direct vulnerable IDPs through direct connection of the temporary storages to urban water network or motorized boreholes and hand pumps

## Activity 1.1.2

Repair and rehabilitation of water points

## Activity 1.1.3

Training of 10 operators and technicians of all gender for operation and maintenance of water supply facilities in priority targeted locations considering population mobility in those sites and could be extended to other areas based on needs assessed along the project

## Activity 1.1.4

Conduct regular water quality testing to ensure provision of safe water

## Indicators

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			End cycle beneficiaries			ies	End cycle
Code	Cluster	Indicator	Men	Women	Boy s	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	Frontline # Number of emergency affected people with access to improved water sources	9,216	20,800	4,79 2	5,19 2	40,000
Means of Verif	Means of Verification: Water points monitoring, base line and end line survey, water quality testing results						
Indicator 1.1.2	WATER, SANITATION AND HYGIENE	% of water tested with 0 CFU/ 100ml or with FRC between 0.2 and 0.4 mg/L along the project					100

Means of Verification: water quality testing results							
Indicator 1.1.3	WATER, SANITATION AND HYGIENE	# of male and female operators and technicians trained for O&M of water supply facilities					10

Means of Verification: Training attendance sheet

## Output 1.2

#### Description

Sanitation facilities are built or rehabilitated and maintained and solid waste are disposed properly

## **Assumptions & Risks**

#### Assumptions:-

Beneficiaries and communities are supportive of programme design, siting of water points and so on.

Oxfam is and will continue to work closely with the communities and involve local communities in decision making and hold regular consultations and engagement throughout the programme

Adequate funds available to complete the activities and logistics conditions enable delivery of supplies and activities to be implemented Risks

There is stability and the security situation does not deteriorate to affect more villages outside Wau, The peace implementation will proceed as planned and no escalations of tensions and fighting between the government and opposition forces

## Activities

## Activity 1.2.1

Construction and rehabilitation of improved gender and age inclusive latrines and bathing shelters

#### Activity 1.2.2

Provision of hand washing facilities to support hygiene practices at latrine facilities

## Activity 1.2.3

Operation and maintenance of sanitation facilities is implemented by male and female members of the community and service providers

#### Activity 1.2.4

Solid waste are collected and disposed in dedicated location

#### Indicators

			End cycle beneficiaries			ies	End cycle
Code	Cluster	Indicator	Men	Women	Boy s	Girls	Target
Indicator 1.2.1	WATER, SANITATION AND HYGIENE	Frontline # of emergency affected people with access to improved sanitation facilities	8,400	10,000	10,4 00	11,2 00	40,000
Means of Verification: field report, base line, end line surveys, field monitoring							
Indicator 1.2.2	WATER, SANITATION AND HYGIENE	# of male and female served by solid waste management					40,000

<u>Means of Verification</u>: field report, base line, end line surveys, field monitoring, volume of disposed waste monitoring, CCCM data on camp population

## Outcome 2

Targeted beneficiaries have improved hygiene knowledge and practice safe hygiene practices

## Output 2.1

## Description

Training will be conducted for male and female Community Hygiene Promoters (CHPs). Oxfam staff, male and female Community Hygiene Promoters will conduct community mobilization to participate in, hygiene awareness and Global events.

## **Assumptions & Risks**

Beneficiaries and communities are supportive of programme design, siting of water points and so on.

Oxfam is and will continue to work closely with the communities and involve local communities in decision making and hold regular consultations and engagement throughout the programme

Adequate funds available to complete the activities and logistics conditions enable delivery of supplies and activities to be implemented Risks

There is stability and the security situation does not deteriorate to affect more villages outside Wau, The peace implementation will proceed as planned and no escalations of tensions and fighting between the government and opposition forces

## Activities

# Activity 2.1.1

80 male and female community hygiene promoters trained and organizing hygiene promotion sessions and campaigns for dissemination of key hygiene messages to male and female IDPs

## Activity 2.1.2

Distribute of Non Food Items with focus on hygiene / menstrual hygiene dignity kits for 6,500 vulnerable households.

## **Indicators**

			End cycle beneficiaries			End cycle	
Code	Cluster	Indicator	Men	Women	Boy s	Girls	Target
Indicator 2.1.1	WATER, SANITATION AND HYGIENE	Frontline # of community based hygiene promoters trained	40	40			80

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	WATER, SANITATION AND HYGIENE	Frontline # of emergency affected people equipped to practice good hygiene behaviors through participatory hygiene promotion	8,400	10,000	10,4	11,2	40,000
Means of Verif	fication: attendance sheet,	FGD report, field report.					
	ing menstrual hygiene kits eficiaries (hhs) receive mens	strual hygiene kits					
Indicator 2.1.3	WATER, SANITATION	# of HH receiving hygiene kits					6,50

# M&R

## Monitoring & Reporting plan

The project's M&E approach will focus on accountability to beneficiaries, and gathering and sharing evidence to inform future programming and compliment and progress initiatives from other humanitarian and resilience actors. Oxfam will have overall responsibility for Monitoring Evaluation Accountability and Learning (MEAL) and will work within a rigorous system that is in line with the overall Oxfam guidelines for MEAL in Emergencies, along with the Common Approach to Monitoring and Social Accountability (CAMSA) as well as contributing and aligning with the WASH cluster monitoring mechanism. Oxfam will support monitoring by the community to contribute to better accountability but also to engage them for improved ownership and explore option of community management of the facilities.

Oxfam will also contribute to the cluster coordination through dedicated resource in order to support the development of strategies among WASH partners and the quality of the intervention in line with the National Cluster recommendations and guidelines.

Building on the rapid needs assessment, a mini baseline and end line survey will be conducted using quantitative and qualitative methodologies to measure impact and change and to set benchmarks against agreed indicators. Conflict, gender, and protection analyses will be updated on a continual basis to inform program implementation. A clear monitoring and evaluation framework will be set up in discussion with women and men separately and in groups, to be monitored by implementing field teams, which will include monthly monitoring reports, and clear action points. Oxfam will ensure that a gender-sensitive community feedback mechanism (for consultation, feedback and complaints) is established to inform and change programming, including the establishment of accountability groups based on community-defined vulnerability criteria. Routine monitoring shall be conducted using a mix of rural participatory appraisal and quantitative methods throughout the duration of the project, engaging primary agents of change, communities, local stakeholders, and project implementing teams.

The team plan to use a web-based survey software which can link PDMs and beneficiary feedback for example, and track responses over time. This will provide valuable lessons and accurate credible data for multiple actors on trends, the quality of current programming, and the potential for impact at scale.

At field level progress toward project objectives will be closely monitored by the Project Manager and MEAL Officer, supported by the Programme Quality Manager and Technical Coordinators. Where possible, beneficiaries and local officials will take the lead on activity monitoring, and report on progress at community learning events. Sex disaggregated data will always be produced to help monitoring support to persons of different genders.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	1:
Activity 1.1.1: Provision of safe water to 40,000 direct vulnerable IDPs through direct connection of the temporary storages to urban water network or motorized boreholes	2016								Х	Х	Х	Χ	X
and hand pumps	2017	Х	Х										Г
Activity 1.1.2: Repair and rehabilitation of water points	2016								Х	X	X	X	X
		Х	Х										
Activity 1.1.3: Training of 10 operators and technicians of all gender for operation and maintenance of water supply facilities in priority targeted locations considering population mobility in those sites and could be extended to other areas based on needs assessed along the project									Х	X	X	Χ	Х
		X	X										
activity 1.1.4: Conduct regular water quality testing to ensure provision of safe water	2016								Х	X	X	X	>
	2017	X	X										Γ
Activity 1.2.1: Construction and rehabilitation of improved gender and age inclusive atrines and bathing shelters	2016								Х	X	X	X	Х
aumes and bauming shellers	2017	Х	Х										Г
Activity 1.2.2: Provision of hand washing facilities to support hygiene practices at latrine acilities	2016								Х	Х	Х		Г
acinics	2017												Г
Activity 1.2.3: Operation and maintenance of sanitation facilities is implemented by male and female members of the community and service providers	2016								Х	Х	Х	X	Х
and remain members of the community and service providers	2017	Х	Х										Г
Activity 1.2.4: Solid waste are collected and disposed in dedicated location	2016	Т	Т						Х	X	Х	Χ	X
	2017	Х	Х							T	T		Г

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Activity 2.1.1: 80 male and female community hygiene promoters trained and organizing hygiene promotion sessions and campaigns for dissemination of key hygiene messages	2016					Χ	Χ	Χ	X	Х
to male and female IDPs	2017	Χ	Х							
Activity 2.1.2: Distribute of Non Food Items with focus on hygiene / menstrual hygiene dignity kits for 6,500 vulnerable households.	2016							Χ		Χ
	2017		Χ							

## OTHER INFO

## **Accountability to Affected Populations**

Women, men, girls, and boys, the aged and persons with Physical disability within target communities will be directly involved at all stages of the program cycle in order to encourage ownership and participation in program activities. Community structures, networks, and support groups are fundamental to building resilience and are at the heart of the Oxfam's programme strategy. Oxfam recognizes that communities are not homogenous, and the gender analysis will enable us to jointly design an appropriate intervention, with the community, looking at the needs of sectors, including all other WASH, Gender/protection, health, FSL and NFI.

It is particularly important to consult with the community on their specific needs. Men, women, boys, girls, youth, the aged and disabled will be consulted on design and location of WASH facilities. They will be included in any training and awareness raising on HIV AIDS and SGBV. Women and girls will be consulted specifically on menstrual hygiene kits.

Oxfam is fundamentally committed to ensuring accountability to communities and installing a rigorous beneficiaries and other stakeholders feedback mechanism, which is part of the program collected through Focus Group Discussion and also linking with other clusters who have set up desks in the biggest sites. Women, men, girls, and boys within target communities will be directly involved at all stages of the program cycle in order to encourage ownership and participation in program activities. Community structures, networks, and support groups are fundamental to building resilience and are at the heart of the Oxfam's programme strategy.

. Where possible, male and female community members will be given the opportunity to evaluate the program on an ongoing basis. Humanitarian accountability mechanisms will be set in place through designated staff members, MEAL and Program Quality Officers. Complaint and feedback mechanisms will be set up to monitor programme implementation and ensure the voices of the beneficiaries are heard. Complaint/suggestion desk will be organized during distributions, exit interviews will be conducted during distributions. Accountability groups will be formed based on community-defined vulnerability criteria, and consulted each month to feedback and influence Oxfam's programming on an ongoing basis.

This will be done in collaboration with the protection cross-cutting themes. These staff will be trained on humanitarian accountability standards and will have knowledge of global initiatives such as Core Humanitarian Standards of Accountability, People in Aid, and ALNAP. In coordination with Oxfams gender unit and other clusters, they will also be trained on gender sensitive WASH programming, SGBV prevention and support, and HIV/AIDS. All activities will be linked with other INGOs, and OCHA, UNICEF, IOM, and UNHCR accountability systems to ensure collaboration and key information is shared to support the overall implementation and protection of beneficiaries. Within Oxfam structures accountability is the responsibility of each staff member, with specific responsibilities lying with the Programme Quality Team.

## Implementation Plan

Oxfam will be directly implementing all activities in this project. All WASH interventions are streamlined and coordinated through the national, state and local WASH cluster meetings. Through these coordination meetings, which are held at least once a week, clear operational areas are designated for all concerned agencies intervening in the sector. There are usually several additional coordination meetings between a selected group of actors in the case of acute necessity such as an increase / sudden displacement of population due to fighting or inter-ethnic conflict. Oxfam collaborates closely with relevant international WASH actors like Unicef, IOM, MEDAIR, IMC and ACTED in camp management organizations.

Representatives from the authorities at community level, including Directorate of Rural Water Supply and Sanitation, Relief and Rehabilitation Commission (RRC) or equivalent, are contacted and informed of any planned Oxfam activity within their community. OXFAM is also part of interagency meeting organized in Wau. Separate meetings are also conducted with key organizations on time to time to discuss emerging issues, support required, information required etc.

Considering the volatile security situation in Wau town and surrounding, Oxfam has already identified and trained key people living in the

Considering the volatile security situation in Wau town and surrounding, Oxfam has already identified and trained key people living in the different targeted sites who are in charge of supervising activities. Contingency stock will be placed in the two main locations to ensure that activities can be maintained in the event of staff not being able to access the sites.

## Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
Oxfam	WASH cluster coordination through the State Focal Point
UNICEF/ IOM/ Solidarites International/Medair	WASH activities in displacement sites
WFP	Food distribution
IOM / Acted	CCM/ NFI
UNHCR/ Non Violent Peace Force	Protection reducing risks linked to WASH facilities
UNICEF/ War child	Education coordination for hygiene promotion in TLC

## **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

Understanding that women, men, boys, and girls are affected differently by disasters and displacement, Oxfam prioritizes gender equity and the promotion of women's rights in all our humanitarian responses. Oxfam policies recognize that SGBV/VAW is a violation of human rights and seeks to mainstream work to reduce SGBV and protection into all programs. Oxfam is a key member of the Inter Agency standing committee, and also has an internal gender policy, a SGBV/VAW policy and has developed minimum standards for gender in emergencies as a tool to measure consistency in promoting gender equality through interventions. Oxfam trains its programme personnel in gender mainstreaming, and has a team of gender and protection advisers based in South Sudan and in our regional centre in Nairobi that work closely together to mainstream gender into programmes and projects. WASH activities will incorporate considerations for gender and different needs of women, men, boys, and girls as well as the aged and persons with disabilities.as The targeted population is composed of 85% of women and children in order to provide opportunities for different groups to feedback and influence programme design. Specifically this will be reflected in stock items held particularly with regards to menstrual hygiene kits to ensure that kits include items that specifically meet women's needs. In addition, women and girls will be trained in design, management, repair and maintenance of WASH facilities alongside men and youth.

## **Protection Mainstreaming**

All activities will be decentralized so that protection concerns voiced by women related to risk of GBV in the displacement sites are taken into consideration. Women, men, girls, boys and persons with specific needs will be consulted at all stages of the WASH intervention. Special consideration will be given to enable access and facilitating water collection for disabled people. Sanitation infrastructure will be sex segregated and clearly marked, and will be equipped to enhance privacy. Hygiene promotion activities will involve women and men; and activities will be timed to fit around women and men's other work schedules. Hygiene promoters will discourage sending children to collect water in large containers and to be on charge of disposing of the solid waste. Gender balance and equal pay and non-traditional work for women and men to challenge gender roles stereotypes will be ensured. Safe programming and mainstreaming gender at all stages will be ensured. Programme staff will be trained on the use of Oxfam standards and indicators for gender and protection. Oxfam will implement and hold itself accountable to Oxfam's Minimum Standards for Gender Equality and Women's Rights in Emergencies. The integration of protection and gender staff in the project team will help ensure the implementation of key activities beyond basic safe programming and Do No Harm approaches. Oxfam newly recruited staffs complete an induction phase, the Code of Conduct is discussed and countersigned. Oxfam has a policy on Protection from Sexual Exploitation and Abuse.

## **Country Specific Information**

## Safety and Security

Oxfam's first priority is the safety and security of its staff. Relationships with local authorities, INGOs, local partners, and communities have been developed to triangulate security information and updates on a continuous basis. Oxfam has security SOPs and evacuation plans for all locations and close coordination with NGO Forum security, Department for Safety and Security (DSS), local authorities, and Oxfam's Roving Security Advisor and Country Security Advisor enables the triangulation of security information.

During the events of 24-26th of June, Oxfam team as others organisations has hibernated inside UNMISS compound, Considering the volatile security situation in Wau town and surrounding, evacuation and communication plans have been redefined internally as well as with other humanitarian agencies. The presence of key staff in the targeted implementation sites will ensure that at least minimum activities are still operational.

#### **Access**

Oxfam has previously worked in Western Bar el Ghazalover the last 10 years and have a full set up of office and guesthouse that Oxfam's current intervention operating from. Passenger flights to Wau operate 5 days a week each where all weather runway allows flights in all weather conditions.

However the recent situation in Wau and further security incident has led to access being challenged by local authorities for the areas outside Wau town. The displacement sites in Wau town are not impacted by the access constraint but Oxfam is engaging with other humanitarian agencies to negotiate access to outside Wau town in order to ensure that population in needs are receiving humanitarian assistance.

## **BUDGET**

Code	Budget Line Description	D/ S	Quantit y	Unit cost	Duration Recurrance	% charged to CHF	Total Cost
Staff and	Other Personnel Costs	·				'	
1.1	PHE roving manager (C2) (Juba based)	D	1	5,00 0.00		5%	1,500.00
	In charge of providing support to or replace the te	chnical PH	E when req	uired (i	R&R, training	.).	
1.2	PHP roving manager (C2)(Juba based)	D	1	5,00 0.00		5%	1,500.00
	In charge of providing support to or replace the tea	chnical PH	P when req	uired (i	R&R, training	.).	
1.3	Electro mechanic (C2) (Juba based)	D	1	5,00 0.00		5%	1,500.00
	In charge of the maintenance/repair of the electron	nic equipm	ent and ma	chines			
1.4	WaSH cluster State focal point (field based)	D	1	5,00 0.00		100%	20,000.00
	Dedicated HR to support the WaSH cluster coordi	ination					
1.5	Programme Manager (C1) (Wau based)	D	1	4,60 0.00		50%	13,800.00
	Has overall responsibility for the management and	d delivery o	f the progra	amme.			
1.6	PHE team leader (C2)(Wau based)	D	1	3,80 0.00		100%	7,600.00
	Technical lead for public health engineering progra	amme and	supervisin	g all off	icers and assis	stants	
1.7	PHP team leader (C2)(Wau based)	D	1	4,10 0.00		100%	8,200.00

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	Technical lead for public health promotion progran	nme and sup	ervising a	ll officers an	d assistant	s	
1.8	PHP team leader (C2)(Wau based)	D	1	3,80 0.00	4	100%	15,200.00
	Technical lead for public health promotion progran	nme and sup	ervising a	ll officers an	d assistant	s	
1.9	PHE officer (D2)(Wau based)	D	2	2,30 0.00	2	100%	9,200.00
	Work with the team in delivering public health engi	ineering activ	∕ities, as w	vell as worki	ng closely v	with communit	ies on
1.10	PHP officer (D2)(Wau based)	D	4	2,30 0.00	4	100%	36,800.00
	Work with the team in delivering public health pron	notion activit	ies, as we	ll as working	g closely wi	th communitie	s on
1.11	programme delivery  PHE assistant (E1)(Wau based)	D	4	1,50 0.00	2	100%	12,000.00
	Work with the team in delivering public health engi	ineering activ	∕ities, as w		ing closely v	with communit	ies on
1.12	PHP assistant (E1)(Wau based)	D	4	1,50 0.00	6	100%	36,000.00
	Work with the team in delivering public health pror programme delivery	motion activit	ies, as we	ll as working	g closely wi	th communitie	s on
1.13	MEAL officer(Wau based)	D	1	2,60 0.00	6	20%	3,120.00
	Leads on monitoring, data collections in field						
1.14	Protection officer (D2)(Wau based)	D	1	1,50 0.00	6	100%	9,000.00
	Works with the team in delivering protection activit	ies, as well a	as working	closely with	n communiti	ies on progran	nme delivery
1.15	Logistics manager (C2)(Wau based)	S	1	4,00 0.00	6	10%	2,400.00
	Procures and arranges transportation of all essent	ial emergend	cy materia	ls and supe	rvise all logi	istics officers a	and assistants
1.16	Finance manager (C2)(Wau based)	S	1	4,00 0.00	6	10%	2,400.00
	Procures and arranges transportation of all essent	ial emergend	cy materia	ls and supe	rvise all logi	istics officers a	and assistants
1.17	Logistics officer (D2)(Wau based)	S	1	2,30 0.00	6	50%	6,900.00
	In charge of all logistical aspect of the project.						
1.18	Warehouse officer (D2)(Wau based)	S	1	2,30 0.00	6	100%	13,800.00
	In charge of stock management						
1.19	Finance officer(Wau based)	S	1	2,60 0.00	6	50%	7,800.00
	Support the team with all financial aspects of the p	orogramme a	t the field	level and su	pervise fina	ance assistant	
1.20	Finance assistant(Wau based)	S	1	1,30 0.00	6	50%	3,900.00
	Ensures all financial procedures are respected						
1.21	Driver(Wau based)	S	3	500. 00	6	50%	4,500.00
	Support transport of field team to implement activity	ties					
1.22	Cleaners(Wau based)	S	2	450. 00	6	50%	2,700.00
	Supporting the staff in the field base.						
1.23	Security guard(Wau based)	S	4	200. 00	6	100%	4,800.00
	Ensure security fo field base						
	Section Total						224,620.00
Supplies, C	Commodities, Materials						
2.1	Provision of safe water (monitoring, operation, repair,etc)	D	1	1,50 0.00	5	100%	7,500.00
	Includes water quality monitoring materials, operations	tion of facilitie	oc (10 ono		00 LICD/ ma	nth) ranair a	ad

	Section Total						30,000.00
	for field team when entering South Sudan						
5.4	Visas	D	2	100. 00	3	100%	600.00
	For field team in the field base,ccommodation cost						
5.3	Perdiem/staff subsistence	D	20	100. 00	6	100%	12,000.00
	R & R	1-					
5.2	Staff flights - International	D	2	1,10 0.00	2	100%	4,400.00
	Support visits to field site, staff from field returning	to Juba & d	deploymen	t flights			
5.1	Staff flights - return 250 usd each way	D	26	500. 00	1	100%	13,000.00
Travel							
	Section Total						199,407.10
	Casual labour/data collectors						
2.13	Baseline and End line Survey	D	1	2,00 7.10	1	100%	2,007.10
	Rental, casual labour loading, off loading, warehou	ıse improve	ement	0.00			
2.12	Warehouse rental and management	D D	1	1,70 0.00	2	100%	3,400.00
	Transportation cost for transporting WASH Items fr Cluster (Logs Cluster proceeds are to be used as le		the field s	site (truck	and charter),	, when not avai	ilable by Logs
2.11	Transportation	D	1	11,0 00.0 0	1	100%	11,000.00
	For drainage work, site improvement						
2.10	Casual labour	D	1	5,50 0.00	1	100%	5,500.00
	Items from the core pipeline, based on identified no new arrival, etc.)	eeds (bucke	et for new	arrival, so	ap 250g/pers	s/month, sanita	ry pads for
2.9	NFI distribution - hygiene items	D	6500	0.00	1	100%	0.00
	CHP paid on a daily basis to conduct hygiene pron	notion (80 C	CHP@ 100	DUSD/mo	nth)		
2.8	CHP incentives	D	1	8,00 0.00	5	100%	40,000.00
	Printing and lamination of IEC flash cards, IEC info boards, tee shirts, etc	rmation bo	oklets, pos	sters of IE	C messages	, construction c	of information
2.7	IEC materials production, visibility	D	1	10,0 00.0 0	1	100%	10,000.00
	Materials used house to house visits, community se	essions, se	ssion with	childrenn	, and CHP s	upplies and ma	terials
2.6	Hygiene promotion activities and materials	D	1	10,0 00.0 0	1	100%	10,000.00
	Includes labour (15 casual @ 100 USD/month), eq	uipement (	@50 USD	/month), i	transport (10	0 trips @ 3450	USD/month)
2.5	Waste disposal	D	1	5,00 0.00	5	100%	25,000.00
	Includes latrine cleaning (80 latrines cleaner @100 USD/ trip)	OUSD/mont	h), cleanin	g materia	ls (@100 US	SD/month), desi	ludging (@50
2.4	Sanitation facilities operation and maintenance	D	1	9,00 0.00	5	100%	45,000.00
	Estimated 100 latrine slabs, 200 plastic sheeting				,		
2.3	Materrials from core pipeline for sanitation facilities		1	0.00	0	100%	0.00
	Includes construction of additional facilities and ref shelter @ 400 USD / 10 laundry area @ 600 USD/	nabilitation ( / rehabilitat	of existing ion @10,0	ones (10 00 USD)	latrines block	k @2000 USD/	10 bathing
Z.Z	Samtation facilities constituction/renabilitation		'	00.0	'	100%	40,000.00
2.2	Sanitation facilities construction/rehabilitation	D	1	40,0	1	100%	40,000.00

General Ope	erating and Other Direct Costs						
7.1	Field Office/Guest House Rent	D	2	2,50 0.00	6	50%	15,000.00
7.2	Office and Guest house running cost	D	2	1,20 0.00	6	50%	7,200.00
7.3	Vehicle and generator Running & Maintenance	D	2	1,00 0.00	6	70%	8,400.00
7.4	Communication (phone, thuraya, VHF, internet)	D	1	800. 00	6	100%	4,800.00
7.5	Stationary	D	1	500. 00	6	50%	1,500.00
7.6	Bank charges	D	1	100. 00	6	100%	600.00
7.7	Laptop	D	2	1,60 0.00	1	100%	3,200.00
	2 laptops are needed to support the team implemen	nt and mo	nitor the pro	oject properl	y.		
7.8	Camera	D	2	300. 00	1	100%	600.00
	Support quality programme implementation and rev	iew					
	Section Total						41,300.00
SubTotal	<u>'</u>		6,614.00				495,327.10
Direct			,				446,127.10
Support							49,200.00
PSC Cost						<u> </u>	
PSC Cost Pe	ercent						7%
PSC Amount	t						34,672.90
Total Cost							530,000.00
Grand Total	CHF Cost						530,000.00

Location	Estimated percentage of budget for each location	ben	Estimated number of neficiaries for each location				Activity Name
		Men	Women	Boy s	Girls	Total	
Western Bahr el Ghazal -> Wau	100	8,40	10,000	10,4	11,2		Activity 1.1.1: Provision of safe water to 40,000 direct vulnerable IDPs through direct connection of the temporary storages to urban water network or motorized boreholes and hand pumps Activity 1.1.2: Repair and rehabilitation of water points Activity 1.1.3: Training of 10 operators and technicians of all gender for operation and maintenance of water supply facilities in priority targeted locations considering population mobility in those sites and could be extended to other areas based on needs assessed along the project Activity 1.1.4: Conduct regular water quality testing to ensure provision of safe water Activity 1.2.1: Construction and rehabilitation of improved gender and age inclusive latrines and bathing shelters Activity 1.2.2: Provision of hand washing facilities to support hygiene practices at latrine facilities Activity 1.2.3: Operation and maintenance of sanitation facilities is implemented by male and female members of the community and service providers Activity 1.2.4: Solid waste are collected and disposed in dedicated location Activity 2.1.1: 80 male and female community hygiene promoters trained and organizing hygiene promotion sessions and campaigns for dissemination of key hygiene messages to male and female IDPs Activity 2.1.2: Distribute of Non Food Items with focus on hygiene / menstrual hygiene dignity kits for 6,500 vulnerable households.
Documents							