

Humanitarian Aid for Change an	d Transformation	
2nd Round Standard Allocation		
Sub Cluster		Percentage
		100.00
		100
Integrated emergency WASH ar	nd Nutrition response in Aw	eil North county in North Bahr El Ghazal
Frontline services		
SSD-17/WS/103973	Fund Project Code :	SSD-17/HSS10/SA2/WASH/NGO/6593
Water, Sanitation and Hygiene (WASH)	Project Budget in US\$:	50,003.24
6 months	Priority:	Not Applicable
01/08/2017	Planned End Date :	31/01/2018
01/08/2017	Actual End Date:	31/01/2018
influx in displaced and host popul cholera response. Aweil North county is faced with currently at IPC4 leading to high in high settlement areas. In light of this and in accordance integrated manner that combines HACT will also carry out nutrition nutrition partners. Cholera cases that are identified	ulations while integrating the adverse WASH needs whil malnutrition at above 20% to SSHF HRP guideline, H s WASH and nutrition. Whil n response activities especi will be referred to health p	e intervention with critical nutrition and e food insecurity is worsening in the area GAM. Cholera has been identified especially IACT is proposing to respond in an e the former is the main area of response, ally screening, messaging and referral to artners in the area. Significantly high
	2nd Round Standard Allocation Sub Cluster Integrated emergency WASH ar Frontline services SSD-17/WS/103973 Water, Sanitation and Hygiene (WASH) 6 months 01/08/2017 O1/08/2017 This program will build the capadin full and host population of the capadin full and host population of the capadin full and host population of the capadin full as and in accordance of the capadin full also carry out nutrition	Sub Cluster Integrated emergency WASH and Nutrition response in Aw Frontline services SSD-17/WS/103973 Fund Project Code : Water, Sanitation and Hygiene (WASH) Project Budget in US\$: 6 months Priority: 01/08/2017 Planned End Date : 01/08/2017 Actual End Date : This program will build the capacity of communities in response influx in displaced and host populations while integrating the cholera response. Aweil North county is faced with adverse WASH needs whil currently at IPC4 leading to high malnutrition at above 20% in high settlement areas. In light of this and in accordance to SSHF HRP guideline, H integrated manner that combines WASH and nutrition. Whil HACT will also carry out nutrition response activities especi nutrition partners. Cholera cases that are identified will be referred to health p numbers of displaced persons mean that these protection compared to the set of the

Direct beneficiaries :

Men	Women	Boys	Girls	Total
2,340	3,760	1,507	1,046	8,653

Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Internally Displaced People	819	1,209	367	274	2,669
People in Host Communities	1,121	2,011	980	644	4,756
Refugee Returnees	388	528	156	128	1,200
Trainers, Promoters, Caretakers, committee members, etc.	12	12	0	0	24

Catchment Population:

Link with allocation strategy :

The project is responding to the cholera outbreak in partnership with health partners in all its planned activities through disease surveillance and referral.

In terms of protection mainstreaming, this project will target identified vulnerable members of the community i.e. IDPs, returnees, femaleheaded households, elderly.

Sub-Grants to Implementing Partners :

Partner Name	Partner Type	Budget in US\$

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

Other Funding Source	Other Funding Amount

Organization focal point :

Name	Title	Email	Phone
Grace Atieno Wagutu	Programs Manager	po@hactsouthsudan.org	+211955936983
Fred Oneko	Finance Manager	fredoneko@gmail.com	0955569716

BACKGROUND

1. Humanitarian context analysis

Aweil North is among the 5 counties that constitute Northern Bahr El Ghazal (NBeG). Being one of the poorest States in South Sudan with 75.6% of the population living below poverty lines compared to the National figure of 50.6% and the community have minimal capacity to provide even basic of needs. Almost 84% live in rural areas as Agro pastrolists and over 9% of the population are food insecure due to frequent violent conflicts leading to displacements making it difficult for access to essential services like WASH, nutrition, education, health and agricultural activities. Due to its proximity to the almost 3 decades of civil war with Sudan. Northern Bahr El Ghazal has suffered chronic under development with its infrastructure, human resources and therefore left the community and households in a dilapidated state. Aweil North is predominantly inhabited by the Dinka Jurchol, Jurchol (Luo) and the Luo. Aweil North is estimated to cover an area of 6.338.11 km2 with an estimated total population of 247.511 (IOM Village Assessment Survey 2013).

From April 2017, fighting between two rival government factions broke out and quickly spread across the county, primarily on ethnic lines and especially focused on Western Bhar el ghazal states of Wau forcing displacements into neighbouring states, There is also a strain on existing WASH facilities.

2. Needs assessment

The populations in Aweil North is facing glaring gaps in WASH especially lack of awareness on hygiene, insufficient sanitation facilities both at public and household levels, non-working hand pumps leaving some to use unsafe drinking water, The situation is compounded by the reports of cases of cholera and acute malnutrition as reported by the Health and Nutrition clusters as well as in FSL Cluster's IPC report. The needs assessment was also informed by the April 2017 SMART Survey.

The initial needs assessment is also relying on accounts from actors in the area especially the county health coordinator and SSRRC representative who report that many households lack sufficient WASH kits and some bomas have low numbers of operational boreholes. Schools do not have hand wash facilities thus exposing children to WASH-related illnesses.

In developing the number of beneficiaries in the county, HACT relied on IOM Village Assessment Survey conducted in 2013 which is the most recent village assessment available. The data was adjusted to include recent but unverified population information from county SSRRC office.

3. Description Of Beneficiaries

This project is targeting communities most affected by lack of sufficient emergency WASH response systems and at risk of contracting hygiene and water-related illnesses like cholera and diarrhea. Specifically, the project is targeting host community, IDPs, returnees, females heading households and the elderly.

4. Grant Request Justification

From July 2016, fighting between two rival government factions broke out and guickly spread across the county, primarily on ethnic lines and especially focused on Western Bhar el ghazal states of wau forcing displacements into neighboring states, these displacements have led to increase in number and influx of IDPs into NBeG some moving as far as Awiel North. The area is also characterized by lack of development, poor physical infrastructure, low levels of education, poor access to quality water in some areas, and periodic low level conflict from cattle raiding or militia activity. The HACT Aweil West and North team identified water supply situation to be below standards in quality and quantity of 500 people per borehole to 1,000 people served by one hand pump, resulting in a limited amount of boreholes and water supply schemes. This also results in overuse, which contributes to breakdown of the pumps and reduction in water availability. This leads not only to low water consumption (under 10 L/person/day) but also increases the burden of women and girls caretakers who are solely walk for more than five km fetching water exposing them to some form of GBV namely abduction of young girls and boys, forceful marriages, killing and rape of young girls. The latrines are not adequate according to Sphere standards leaving both boys and girls vulnerable to communicable diseases caused by poor hygiene as there were no provisions for hand washing facilities at the schools. Aweil North County is paramount due to the fact that the population using water points are more than the standard required because the water points are few. The overuse contributes to breakdown of the pumps and reduction in water availability. Before and after the violence there was no system of excreta disposal in Aweil County and people practiced open defecation with no marked or dedicated areas. In spite of the rare presence of latrines, some of household latrines were burned down. The populations in the towns are spread over a large catchment area so the open defecation practice is an extreme public health risk which needs to be addressed. Most of the schools and health centers have no functional and the infrastructure is only being used by a few vulnerable families. Some other IDPs, who have no relatives within the host community, are reported to be settling in public areas and have no access to sanitation facilities at all and therefore practice open defecation. HACT believes that hygiene and sanitation awareness coupled with the installation of improved water facilities can trigger an improvement in attitudes towards hygiene and sanitation among the communities of Aweil North

5. Complementarity

The implementing partner shall work in close coordination and with guidance from OCHA-led clusters and specifically WASH cluster at Juba level and the WG at NBG state level.

By working closely with health partner in the area for guidance on how to complement hygiene activities already being undertaken, HACT will avoid duplication and channel resources to priority areas. HACT is also planning to target CHWs already existing so as to integrate hygiene messaging and ensure most at-risk populations are reached. HACT hygiene promoters will be trained to, whenever possible, work hand in hand with CHWs attached to health partner in the county.

HACT will also collaborate with Aweil North county health coordinator.

LOGICAL FRAMEWORK

Improving community's access to clean water, sanitation and strengthening response to cholera and malnutrition.

WATER, SANITATION AND HYGIENE		
Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Re-establish and improve access to water, sanitation and hygiene promotion services for the vulnerable population affected by conflict, disease outbreaks, acute malnutrition and floods.	SO1: Save lives and alleviate the suffering of those most in need of assistance and protection	80
Enhance emergency WASH capacities of local communities, authorities and partners.	SO3: Support at-risk communities to sustain their capacity to cope with significant threats	20

<u>Contribution to Cluster/Sector Objectives :</u> By improving access and quality of clean drinking water and sanitation facilities to women, men, boys and girls, the project will help reduce mortality currently originating from water borne diseases like cholera. Integration with nutrition will address GAM cases and bring them down to minimum levels.

Outcome 1

Improved hygiene practices among women, men, girls and boys before, during and after emergencies in Aweil North county

Output 1.1

Description

Targeted hygiene awareness messaging in schools, institutions like churches and community forums in Malual East and Malual North payams in Aweil North county.

Assumptions & Risks

Accessibility of every boma is good

Indicators

			End	End cycle beneficiaries			
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of people reached through direct and participatory hygiene promotion activities	2,340	3,760	1,50 7	1,04 6	8,653
Means of Verif	ication : Number of hygiene p	promotion events and locations					
Indicator 1.1.2	WATER, SANITATION AND HYGIENE	[Frontline] Number of community based hygiene promoters trained	9	9			18
Maana of Varif	ication : Number of bygiene r	romotore trained					

Means of Verification : Number of hygiene promoters trained

Activities

Activity 1.1.1

Hand wash campaigns in schools using visual aids like puppetry

Activity 1.1.2

Systematically provide information on hygiene-related risks and preventive actions using appropriate channels of mass communication

Activity 1.1.3

Identify specific social, cultural or religious factors that will motivate different social groups in the community and use them as the basis for a hygiene promotion communication strategy

Activity 1.1.4

Use interactive hygiene communication methods wherever feasible in order to ensure ongoing dialogue and discussions with those affected

Activity 1.1.5

In partnership with the affected community, regularly monitor key hygiene practices and the use of facilities provided

Output 1.2

Description

Improved access to clean water and efficient water management practices

Assumptions & Risks

Community has access to some amount of water though not clean

Indicators

			End cycle beneficiaries			End cycle	
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target
Indicator 1.2.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of water points/boreholes rehabilitated					12
Moone of Vorif	ication : Number of broken b	and numps repaired					

Means of Verification : Number of broken hand pumps repaired

Activities

Activity 1.2.1

Repair of broken boreholes using local community borehole mechanics
Activity 1.2.2
Establishment of borehole management committees
Outcome 2
Improved access to clean and reliable sanitation facilities for the community
Output 2.1
Description
Rehabilitation of community sanitation facilities
Assumptions & Risks
Sufficient sanitation facilities exist

Indicators

		End	End cycle beneficiaries			
Cluster	Indicator	Men	Women	Boys	Girls	Target
WATER, SANITATION AND HYGIENE	[Frontline] Number of new latrines constructed/rehabilitated					76
cation : Number of latrines c	onstructed or rehabilitated and being properly used	and mana	aged			
WATER, SANITATION AND HYGIENE	[Frontline] Number of hand washing facilities constructed/rehabilitated					76
cation : Number of hand was	h facilities supplied, installed and being properly us	ed				
WATER, SANITATION AND HYGIENE	[Frontline] Number of people with access to improved sanitation facilities	2,340	3,760	1,50 7	1,04 6	8,653
	WATER, SANITATION AND HYGIENE cation : Number of latrines ca WATER, SANITATION AND HYGIENE cation : Number of hand was WATER, SANITATION	WATER, SANITATION AND HYGIENE [Frontline] Number of new latrines constructed/rehabilitated cation : Number of latrines constructed or rehabilitated and being properly used WATER, SANITATION AND HYGIENE [Frontline] Number of hand washing facilities constructed/rehabilitated cation : Number of hand wash facilities supplied, installed and being properly used WATER, SANITATION AND HYGIENE [Frontline] Number of hand washing facilities constructed/rehabilitated WATER, SANITATION [Frontline] Number of people with access to	Cluster Indicator Men WATER, SANITATION AND HYGIENE [Frontline] Number of new latrines constructed/rehabilitated Image: Constructed/rehabilitated water, Sanitation [Frontline] Number of hand washing facilities and HyGIENE Image: Constructed/rehabilitated water, Sanitation [Frontline] Number of hand washing facilities constructed/rehabilitated Image: Constructed/rehabilitated water, Sanitation [Frontline] Number of hand washing facilities constructed/rehabilitated Image: Constructed/rehabilitated water, Sanitation [Frontline] Number of people with access to 2,340	ClusterIndicatorMenWomenWATER, SANITATION AND HYGIENE[Frontline] Number of new latrines constructed/rehabilitatedImage: Constructed or rehabilitatedImage: Constructed or rehabilitatedWATER, SANITATION AND HYGIENE[Frontline] Number of hand washing facilities constructed/rehabilitatedImage: Constructed or rehabilitatedWATER, SANITATION AND HYGIENE[Frontline] Number of hand washing facilities constructed/rehabilitatedImage: Constructed or rehabilitatedWATER, SANITATION AND HYGIENE[Frontline] Number of hand washing facilities constructed/rehabilitatedImage: Constructed or rehabilitatedWATER, SANITATION AND HYGIENE[Frontline] Number of people with access to2,3403,760	ClusterIndicatorMenWomenBoysWATER, SANITATION AND HYGIENE[Frontline] Number of new latrines constructed/rehabilitatedImage: Constructed on the co	ClusterIndicatorMenWomenBoysGirlsWATER, SANITATION AND HYGIENE[Frontline] Number of new latrines constructed/rehabilitatedImage: Constructed/rehabilitatedImage: Constructed/rehabilitatedImage: Constructed/rehabilitatedWATER, SANITATION AND HYGIENE[Frontline] Number of hand washing facilities constructed/rehabilitatedImage: Constructed/rehabilitatedImage: Constructed/rehabilitatedWATER, SANITATION AND HYGIENE[Frontline] Number of hand washing facilities constructed/rehabilitatedImage: Constructed/rehabilitatedImage: Constructed/rehabilitatedWATER, SANITATION AND HYGIENE[Frontline] Number of people with access to2,3403,7601,501,04

Means of Verification : Number of people accessing sanitation facilities

Activities

Activity 2.1.1

Consult and secure the approval of all users (especially women and people with limited mobility) on the siting, design and appropriateness of sanitation facilities

Activity 2.1.2

Provide the affected people with the means, tools and materials to construct, maintain and clean their toilet facilities. Sixteen (16) public toilets will be constructed and 60 latrine squatting slabs distributed to 15 primary schools with each school getting 4 slab.

Activity 2.1.3

Provide an adequate supply of water for hand washing and for toilets with flush and/or hygienic seal mechanisms, and appropriate anal cleansing material for use in conventional pit latrines. Sixteen (16) hand wash facilities will be provided for the 16 public toilets and 60 HWF to the 15 schools with each getting 4 HWFs.

Additional Targets :

M & R

Monitoring & Reporting plan

Routine monitoring of the core WASH indicators shall be started immediately during the emergency phase and continued through the post emergency phase. The initial rapid and comprehensive WASH assessment at project inception will serve as the start of the initial baseline data collection process and facilitate the initial collection of the core WASH indicators. The implementing partner will also track and report the indicators' rate of change over time. Key monitoring approaches to be used to measure the indicators are:

i) Monitoring of WASH infrastructure condition through sanitary surveys

ii) Monitoring of WASH service provision through rapid household surveys

iii) Monitoring of WASH service provision through KAP surveys

The implementing partner will regularly report to the WASH cluster on progress of the program.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
	2017								х	х	х	х	х
	2018	Х											
Activity 1.1.2: Systematically provide information on hygiene-related risks and preventive actions using appropriate channels of mass communication	2017								х	х	х	х	х
	2018	Х											
Activity 1.1.3: Identify specific social, cultural or religious factors that will motivate									х				
different social groups in the community and use them as the basis for a hygiene promotion communication strategy	2018												
Activity 1.1.4: Use interactive hygiene communication methods wherever feasible	2017								х	х	х	х	х
n order to ensure ongoing dialogue and discussions with those affected	2018	х											

Activity 1.1.5: In partnership with the affected community, regularly monitor key hygiene practices and the use of facilities provided					Х	Х	Х	Х	Х
		Х							Γ
Activity 1.2.1: Repair of broken boreholes using local community borehole mechanics	2017				Х	х			Γ
Activity 1.2.2: Establishment of borehole management committees	2017						Х		
	2018								
Activity 2.1.1: Consult and secure the approval of all users (especially women and people with limited mobility) on the siting, design and appropriateness of sanitation					Х				
facilities	2018								
Activity 2.1.2: Provide the affected people with the means, tools and materials to construct, maintain and clean their toilet facilities. Sixteen (16) public toilets will be constructed and 60 latrine squatting slabs distributed to 15 primary schools with each school getting 4 slab.					Х	х			
Activity 2.1.3: Provide an adequate supply of water for hand washing and for toilets with flush and/or hygienic seal mechanisms, and appropriate anal cleansing	2017				Х	х	Х	Х	х
material for use in conventional pit latrines. Sixteen (16) hand wash facilities will be provided for the 16 public toilets and 60 HWF to the 15 schools with each getting 4 HWFs.	2018	X							
OTHER INFO									
Accountability to Affected Populations									
The implementing partner shall always consult the beneficiaries including special grand UASCs in design of programs affecting them. Program plans shall be shared to account on a regular basis.								IDS	

The beneficiary population shall also be regularly informed on how the resources are being used and encouraged to share feedback information.

Mass communication of program updates through community forums shall be done on a regular basis.

Implementation Plan

The project activities will be carried out by HACT and it's staff. Where local staff are hired, this will be guided by gender parity and meritocracy.

Local labor will be hired and local suppliers contracted in the execution of specific activities like construction of latrines and repair of boreholes as well as supply of food for participants and staff.

HACT shall work in close collaboration and guidance from health and nutrition partners in cholera and nutrition response respectively. In addition, HACT shall coordinate with education partners to ensure smooth implementation of school-based WASH activities targeting school-going children.

Coordination with other Organizations in project area

Name of t	he organ	ization
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Areas/activities of collaboration and rationale

Environment Marker Of The Project

Gender Marker Of The Project

2a-The project is designed to contribute significantly to gender equality

Justify Chosen Gender Marker Code

By deliberately putting women in all decision-making processes, leadership positions alongside men and ensuring their voices are heard and opinion taken into account, this project will change current attitudes that greatly dis-empower women in the community.

Protection Mainstreaming

HACT will be guided by the Protection Principles and Core Standards during the program implementation. Vulnerable people groups being targeted in this project include IDPs, disabled, female-headed households and UASCs.

Country Specific Information

Safety and Security

HACT shall liaise with OCHA and get regular security updates to help it design security plan for staff and assets.

<u>Access</u>

BUDGET

BUDGE							
Code	Budget Line Description	D/S	Quantity	Unit cost	Duration Recurran ce	% charged to CHF	Total Cost
1. Staff	and Other Personnel Costs						
1.1	Executive director	D	1	1,500		30.00	2,700.00
	Overall project guidance, support and coordination betwee	en programs	and donor	.00			
1.2	WASH programs officer	D	1		6	100.00	7,200.00
	Programs officer in charge of direct implementation			.00			
1.3	Community hygiene promoters	D	18	80.00	6	100.00	8,640.00
	Conducting community mobilization, sensitization and awa	areness cam	paigns in s	chools a	and commu	nity	
1.4	M&E Officer	D	1		6	30.00	1,440.00
	Project monitoring and evaluation			0			
1.5	Finance Officer	D	1	800.0	6	30.00	1,440.00
	Project financial management and accounting			0			
	Section Total						21,420.00
2 Sunn	blies, Commodities, Materials						21,420.00
2.1	Tarpaulins	D	45	15.00	1	100.00	675.00
2.1			40	15.00		100.00	675.00
0.0	For repair of public toilets	D		000.0		100.00	4 000 00
2.2	Warehouse rent	D	1	200.0 0	5	100.00	1,000.00
	Renting space for storage of WASH supplies before distri	bution					
2.3	Hiring local truck	D	2	150.0 0	3	100.00	900.00
	For movement of WASH materials (latrine slabs, tarpulins	etc) from wa	arehouse to	distribu	ition points		
2.4	IEC material	D	100	10.00	1	100.00	1,000.00
	Assortment of Communication/publicity materials and t sh	nirts					
2.5	Training hygiene promoters	D	18	12.00	7	100.00	1,512.00
	Training 18 hygiene promoters; cost of hall hiring and train	ning material	s and incer	ntive for	7 days	1	
2.6	Plastic latrine squatting slabs	D	76	0.00	6	100.00	0.00
	76 slabs for 16 public toilets to be rehabilitated and 60 for	[.] 15 primary s	chools			1	
2.7	Hand wash facilities	D	76	0.00	6	100.00	0.00
	HWF for each of the 76 constructed/rehabilitated toilets						
	Section Total						5,087.00
3. Equij	pment					1	
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total						0.00
4. Cont	tractual Services						
4.1	Hiring loaders and off loaders	D	1	500.0 0	1	100.00	500.00
	Carrying of supplies in the field from warehouse to benefic	ciary househo	olds by loca		rs		

	Hiring local labor						
4.3	Repair of hand pumps	D	12	700.0 0	1	100.00	8,400.00
	Repair of hand pumps using local trained labor						
4.4	Hygiene promotion awareness activities	D	3	200.0 0	6	100.00	3,600.00
	Meetings venues, hall hiring and public communication	ation at 3 meetings	per month				
	Section Total						14,420.00
5. Trav	vel						
5.1	UNHAS for six staff return travel to field	D	3	275.0 0	2	100.00	1,650.00
	Section Total						1,650.00
6. Trar	sfers and Grants to Counterparts						
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total		0.00				
7. Gen	eral Operating and Other Direct Costs						
7.1	Communication	D	1	250.0 0	6	100.00	1,500.00
	Airtime/units						
7.2	Camera	D	1	155.0 0	1	100.00	155.00
			500	5.00		100.00	0.500.00
7.3	Stationary	D	500	5.00	1	100.00	2,500.00
	Training and public awareness meetings						
	Section Total		877.00				4,155.00
SubTo	tal		46,732.00				
Direct							46,732.00
Suppor							
PSC C	ost						
	ost Percent						7.00
PSC A	mount						3,271.24
Total C	Cost						50,003.24

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location				iaries	Activity Name
		Men	Women	Boys	Girls	Total	
Northern Bahr el Ghazal -> Aweil North	100	2,340	3,760	1,507	1,046	8,653	Activity 1.1.1 : Hand wash campaigns in schools using visual aids like puppetry Activity 1.1.2 : Systematically provide information on hygiene-related risks and preventive actions using appropriate channels of mass communication Activity 1.1.3 : Identify specific social, cultural or religious factors that will motivate different social groups in the community and use them as the basis for a hygiene promotion communication strategy Activity 1.1.4 : Use interactive hygiene communication methods wherever feasible in order to ensure ongoing dialogue and discussions with those affected Activity 1.1.5 : In partnership with the affected community, regularly monitor key hygiene practices and the use of facilities provided Activity 1.2.1 : Repair of broken boreholes using local community borehole mechanics Activity 1.2.2 : Establishment of borehole management committees Activity 2.1.1 : Consult and secure the approval of all users (especially women and people with limited mobility) on the siting, design and appropriateness of sanitation facilities Activity 2.1.2 : Provide the affected people with the means, tools and materials to construct, maintain and clean their toilet facilities. Sixteen (16) public toilets will be constructed and 60 latrine squatting slabs distributed to 15 primary schools with each school getting 4 slab. Activity 2.1.3 : Provide an adequate supply of water for hand washing and for toilets with flush and/or hygienic seal mechanisms, and appropriate anal cleansing material for use in conventional pit latrines. Sixteen (16) hand wash facilities will be provided for the 16 public toilets and 60 HWF to the 15 schools with each getting 4 HWFs.

Documents

Category Name

Document Description