

Requesting Organization :	LiveWell South Sudan				
Allocation Type :	2nd Round Standard Allocation				
Primary Cluster	Sub Cluster	Percentage			
WATER, SANITATION AND HYGIENE		100.00			
		100			
Project Title :	Provision of Emergency Lifesaving WASH interventions focusing on Prevention of Cholera Outbreak in Yirol East county of Lake States, South Sudan				
Allocation Type Category :	Frontline services				
OPS Details					
Project Code :	SSD-17/WS/103448	Fund Project Code :	SSD-17/HSS10/SA2/WASH/NGO/6545		
Cluster :	Water, Sanitation and Hygiene (WASH)	Project Budget in US\$:	50,000.12		
Planned project duration :	6 months	Priority:	Not Applicable		
Planned Start Date :	01/08/2017	Planned End Date :	30/01/2018		
Actual Start Date:	01/08/2017	Actual End Date:	30/01/2018		
Project Summary :	<p>Cholera outbreaks struck Yirol East county at a point when the county was witnessing unprecedented heavy rainfall where over 2,864 cholera cases and 69 cumulative deaths (CFR-2.4%) were reported at week 24 of 2017. There are mounting fears that the outbreak could strike in different parts of Yirol East,</p> <p>The aim of this project is to reduce morbidity and mortality from Cholera Outbreak by providing essential Lifesaving WASH interventions to vulnerable people living in Machar-Achiek, Shambe Port ,and Mamer area of Yirol East.</p> <p>LiveWell will improve access and scale up WASH activities that reach out to the 25,000 vulnerable and conflict-affected populations with:</p> <ul style="list-style-type: none"> • Hygiene promotions and educations activities to 13,500 households (reaching out to at least 25,000 conflict-affected people). • Cholera Awareness campaigns at community level reaching out to over 25,000 people. • Demonstrate and distribute the WASH supplies to the households and the public settings reaching out to 25,000 people, • Conduct community meeting to strengthen and build the capacity of 24 local community leaders as Cholera Focal Persons. • Rehabilitate or construct 2 toilets and 2 hand-washing facilities at the 2 ORPs that LiveWell will establish in Yirol East county. 				
Direct beneficiaries :					
	Men	Women	Boys	Girls	Total
	5,000	7,000	6,000	7,000	25,000
Other Beneficiaries :					
Beneficiary name	Men	Women	Boys	Girls	Total
Internally Displaced People	4,000	5,000	4,000	5,000	18,000
People in Host Communities	1,000	2,000	2,000	2,000	7,000
Indirect Beneficiaries :					
Approximately 67,402 people (80% of the total population in the catchment area, including IDPs, returnees and refugees). Within the direct and indirect project beneficiaries, vulnerable group that was affected by the impact of inter-tribal and inter-clan raiding of cows/civil war which, includes pregnant IDPs, returnees, newborn women, children and, elderly will benefit from this project.					
Catchment Population:					
Lakes State has an estimated population of over 700,000 people according to 2008 Sudan National Census conducted in 2008 (males form 52.6% and female 47.4%), approximately 68,000 lives in Yirol East, and 25,000 IDPs/returnees that comprise of 3 payams namely; Nyang, Malek, and Adior.					
Link with allocation strategy :					

The WASH Cluster objectives for 2017 include sustaining access to WASH services,. LiveWell's project is closely related to WASH cluster objectives for 2017 and is meant to supplement the gains obtained from previous interventions. LiveWell will work to ensure these objectives are achieved by the end of the project. The response will ensure that the IDPs and other vulnerable populations have access to lifesaving WASH services. Our responses will collaborate with community key leaders to ensure that the identification of vulnerable populations among the communities where greater emphasis shall be made. LiveWell's priority in this SSHF round will be to increase access to lifesaving WASH interventions that will strengthen the operational capacity of cholera response team to respond effectively to the cholera epidemic through disease surveillance intensification, hygiene promotion, early detection, identification and referral of cholera cases in the three locations where LiveWell Health project is planning to established 2 ORPs in Yirol East county.

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
Dr. Thon P. Agok	Program Director	livewellsouthsudan@gmail.com	+211955921762
Dr. Paul Kon Alier	Executive Director	info@livewellsouthsudan.org	+211956243535

BACKGROUND

1. Humanitarian context analysis

Yirol East in Lakes State has an estimated population of 67,402 people according to 2008 Sudan National Census and over 25,000 IDPs from neighboring Jonglei State. Generally; the protracted war in the country has destroyed the existing health infrastructures and social services for the general population. Due to economic crisis, the cost for accessing safe clean water and good sanitation facilities has been very difficult. The county has been characterized by rampant insecurity and the Cholera outbreak due to heavy rainfall and poor sanitation practices have been the major cause of morbidities and mortalities in the area.

According to EWARS/IDSR Report for week 24 (July, 2017), there is still an active transmission of cholera outbreak in Yirol East's payam of Yali, Shambe, Adior, and Nyang, a total cumulative of 2,864 cholera cases and 69 cumulative deaths (CFR-2.4%) in Yirol East of Lakes State have been reported at week 24 and there are mounting fears that the outbreak could strike other payams like Pagerou, Lakakudu etc. Cholera, Malaria, other Acute Watery/bloody Diarrheal, Acute respiratory infections, malnutrition and typhoids are the major cause of admissions and mortality in Adior Payam Hospital and other major PHCUs/PHCCs, yet maternal mortality rate (MMR), Neonatal Mortality Rate (NMR) and under-five mortality rate (U5MR) are still high according to mid 2017 IDSR's weekly report by WHO.

A recent rapid assessment by LiveWell team at the above sites showed that many communities in Yirol East revealed that the people population within Yirol East county are vulnerable and may be prone to cholera outbreaks due to poor knowledge on personal hygiene, poor sanitation and use of dirty water for drinking. Open defecation is evident among households and solid waste is also poorly disposed. There are growing evidences of failure to address sanitation crisis in the IDPs sites as the sanitary facilities aren't enough to meet the needs of the concentrated IDPs population, a fact which is most likely responsible for the recurrent outbreak of cholera in Yirol East.

Yet in the whole of Greater Yirol, CCM, HELP and CUAMM are two main international NGOs running the frontline healthcare services and the emergency health response by IOM, WHO and UNICEF which, phased out of Yirol East due to ongoing insecurity between Yirol West and Yirol East that lead to the death of IOM staffs. The State Ministry of Health's County Health Department (CHD) in Yirol East suffers serious gaps in human resources for health, medical supplies and equipment. There are evidences on the decreased utilization of the existing Primary Health Care units and Centers' services due to poor road network and long distance to access the facilities. The only Adior Hospital (at Payam level) is not fully functional due to inadequate skilled staffing and drugs supply.

According to Health Cluster, there is still an existing need to have rapid health response partners to address the cholera outbreak in Yirol East as the case fatality rate (CFR) was greater than 1% (69 deaths, CFR-2.4% at week 24, 2017). As an active Health cluster member, and RRM member, LiveWell expressed its interest to respond to this call in order to scale up the lifesaving activities to contain the worrying situation in payams, bomas and villages of Yirol East County in Lakes State.

2. Needs assessment

- Lakes State has a total population of over 700,000 people, 67,402 of which are in Yirol East county according to 2008 Sudan National Census and over 25,000 IDPs from neighbouring Jonglei State crossed the Nile River to Yirol East through the Shambe port or Mingkaman IDPs camp in search for food, shelter and security and are currently staying with the host communities of Nyang, Malek and Adior payams.
- Generally; the protracted war in the country has destroyed the existing health infrastructures and social services for the general population in the whole country, and Yirol East's CHD have inadequate health staff and drugs supplies.
- Due to high inflation, the cost for accessing lifesaving essential healthcare services, safe clean drinking water and good sanitary facilities have been very high in Yirol East.
- The county has been characterized by the mounting insecurity, increased food insecurity and the recurrent of cholera outbreaks due to heavy rainfall and poor sanitation practices.
- According to EWARS/IDSR Report for week 24 (July, 2017), there is still an active transmission of cholera outbreak in Yirol East's payam of Malek, Shambe, Adior, and Nyang. A total cumulative of 2,864 cholera cases and 69 cumulative deaths (CFR-2.4%) in Yirol East have been reported and there are mounting fears that the outbreak could strike other payams like Pagerou, Lakakudu etc.
- In Adior Hospital, the major cause of morbidities and mortalities includes Cholera outbreak, Malaria, other Acute Watery diarrheal (AWDs), Acute respiratory infections (ARI) malnutrition and typhoids are the major cause of admissions and mortality in Adior Payam Hospital and other major PHCUs/PHCCs, yet maternal mortality rate (MMR), Neonatal Mortality Rate (NMR) and under-five mortality rate (U5MR) are still high according to mid 2017 IDSR's weekly report by WHO.
- A recent rapid assessment by LiveWell team at the above sites showed that many communities in Yirol East revealed that the people population within Yirol East county are vulnerable and may be prone to cholera outbreaks due to poor knowledge on personal hygiene, poor sanitation and use of dirty water for drinking. Open defecation is evident among households and solid waste is also poorly disposed. There are growing evidences of failure to address sanitation crisis in the IDPs sites as the sanitary facilities aren't enough to meet the needs of the concentrated IDPs population, a fact which is most likely responsible for the recurrent outbreak of cholera in Yirol East.
- In Greater Yirol, CCM, and CUAMM are two main international NGOs running the frontline healthcare services and the emergency health response was done by IOM, WHO and UNICEF which later phased out of Yirol East due to ongoing insecurity between Yirol West and Yirol East that lead to the death of IOM staffs.
- The State Ministry of Health's County Health Department (CHD) in Yirol East suffers serious gaps in human resources for health, medical supplies and equipment. There are evidences on the decreased utilization of the existing Primary Health Care units and Centers' services due to poor road network and long distance to access the facilities. The only Adior Hospital (at Payam level) is not fully functional due to inadequate skilled staffing and drugs supply.
- According to Health Cluster, there is still an existing need to have rapid health response partners to address the cholera outbreak in Yirol East as the case fatality rate (CFR) was greater than 1% (69 deaths, CFR-2.4% at week 24, 2017).
- As an active Health cluster member, and RRM member, LiveWell expressed it interest to response to this call in order to scale up the lifesaving cholera response activities to contain the worrying situation in Adior, Malek, and Nyang payams.

3. Description Of Beneficiaries

The project will target 25,000 IDPs living with the 10,000 host communities of Adior, Nyang and Malek Payams. The project will focus on the vulnerable groups such as under-five year, pregnant women, and the elderly. The indirect beneficiaries are the host communities that approximate populations of 67,402 people.

The direct beneficiaries will come from Yirol East, namely; Adior bomas and villages, targeting 13,500 households, reaching out to over 25,000 vulnerable people and 10,000 host community members as described below:-

1. SHAMBE PORT: to support the 4,500 households ,
2. MAMER: to support host 4,500 households
3. ACUIEDIT: to support 4,500 households

LiveWell will implement the cholera response and prevention activities in the IDPs setting and the host communities in the affected areas;
 Men: 5,000 beneficiaries
 Women: 7,000 beneficiaries
 Boys: 6,000 beneficiaries
 Girls 7,000 beneficiaries
 TOTAL: 25,000

4. Grant Request Justification

Active surge and transmission of cholera outbreak in Yirol East has increasingly been ongoing in the local bomas and villages of Nyang, Malek and Adior, yet the response and prevention activities by the two existing primary healthcare partners like CUAMM and CCM has been inadequate due to highest population within the catchment areas and the long distances between the payams of the affected counties. The response by the Emergency Response Team (ERT) like WHO, UNICEF and IOM has not been covering the whole populations and the duration of the activities were short-termed (4-6 weeks). The Health cluster has expressed the needs to increased the number of partners implementing and mobilized support in the area to contain the situations. CHF funding will enable LiveWell's rapid response team to response in the area.

In this July till the end of the 2017, it is predicted that the cholera epidemics will be difficult to eradicate or control due to unprecedented heavy rainfall, food insecurity, rampant insecurities and resultant economic crisis would directly or indirectly lead to the failure to address sanitation crisis a fact which is most likely responsible for the recurrent or increased outbreak of cholera in Shambe payam. It has also been difficulty to raised funds to start the response in June this year yet the cholera cases are still being reported, and the demand for essential lifesaving integrated cholera interventions is high. If anything is not done about the situation, it will continue to deteriorate and we may unfortunately loose big number of vulnerable people to the epidemics.

This project will target 3 main payams of Nyang to support the affected people of Pulwiny; Cuiedit; and Panhom-Dhak boma, Adior to support host community from Machar-Aciek; Mamer; and Shambe port boma and Malek payam to support three bomas of Tian; Amer-achier; and Lang-Matot boma. The existing partners have tried to reached the locations but their hands are overstretched to reach the most vulnerable people with cholera case management at the facility and households level.

The SSHF funding will enable LiveWell start-up the much needed Cholera Outbreak Response and Prevention activities such as; refreshers training of 27 health/hygiene promoters to conduct social mobilization/hygiene promotion at household and community level, early detect and manage cholera cases; Conduct cholera prevention awareness, pay wages for 27 hygiene promoeters, was officer; and conduct community meeting to establish cholera focal persons teams in each payam, surveillance support; and monitoring, supervision and evaluation. This will help reduce the morbidity and mortality from preventable and treatable cholera-related death and other acute watery diarrhoea. LiveWell South Sudan will deploy skilled and dedicated WASH staff who will be able to provide cholera case management at community level and conduct cholera awareness in the proposed location for quality and timely services. The community health workers team, hygiene promotion team, and ORP support staffs such as sprayers, cleaners and watchmen will play an active role in controlling infections at household level where active transmission has been identified

5. Complementarity

Added values of this proposed project:

- Building the capacity of the County Health department and communities of 3 payams of Yirol East to widened the response in the far catchment areas.
- Integrated with WASH, protection and Nutrition programs at the ORP facilities.
- Performing essential lifesaving cholera intervention activities through WASH interventions
- Improved the Case management, admission and referral pathways to the ORPs, CTCs, and CTUs.
- Strengthened and enhanced support supervision, monitoring, and evaluation tools.

LiveWell's added values in this proposal:

- Past Cholera Response and Prevention project in IDPs camp setting in Lakes, Central Equatoria and Jonglei State through a partnership with UNICEF, WHO, IOM, MOH and local authorities within the areas of intervention.
- Group of medical and public health experts in South Sudan, and the team have dynamic and broader understanding of integrated emergency health cholera case management with nutrition and WASH in South Sudan at large.
- The human resources for health that LiveWell proposed in this project have an expertise knowledge in responding to health emergencies like cholera outbreak.
- Workings in hard to reach areas and have developed a good relationship with local authorities as well as community members both in IDP camps and host communities.
- Required system, policies, guidelines, procedures, strategies and protocols booklets/documents in place to ensure timely response to emergency health care programming like this project.
- Ensures responsiveness to address the emergency needs of the vulnerable communities.
- LiveWell continues to participate in key policy, program, and coordination at both National, State Cluster and Working Group forums like Cholera Taskforce Meeting at Juba Teaching Hospital, EPR Meeting, Health Cluster Meetings, and RRM Meeting in Juba, Lakes and Jonglei including WASH Cholera Response Meeting at UNICEF head office in Juba.

LOGICAL FRAMEWORK

Overall project objective

To reduce access morbidity and mortality from Cholera Outbreak by providing Emergency integrated Lifesaving WASH interventions focusing on sustainable safe clean water, good sanitation practice and hygiene promotion activities.

WATER, SANITATION AND HYGIENE

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
Sustain access to water, sanitation and hygiene promotion services for 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

Contribution to Cluster/Sector Objectives : LiveWell's WASH activities will reached out to the most affected communities by the outbreak of cholera in the specified locations above by distributing basic WASH response materials along with Hygiene promotion messages as well capacity building of the local communities on the usage of house-hold water treatment and good sanitation/hygiene measures.

Outcome 1

Enhancing hygiene promotion messages, social mobilization, and mass campaign at households and community level like schools, churches, markets and restaraunts

Output 1.1

Description

Local communities have reached with direct and participatory hygiene promotion activities at households and community level in Yirol East

Assumptions & Risks

It's assumed that the three counties listed above are accessible by road and air transport and the security is stable, and that the WASH core pipelines have the required supplies to prevent the outbreak of cholera.

Risk of heavy rainfall and insecurity may affect the transportation of WASH supplies.

WASH supplies will be prepositioned before heavy rainfall season approaches and the insecurity will be mitigated through contiuous coordination with the local authorities on security status of the areas.

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of community based hygiene promoters trained	15	12			27

Means of Verification : Quarterly and month report

Attendant sheet

Training report

Indicator 1.1.2	WATER, SANITATION AND HYGIENE	[Frontline] Number of people reached through direct and participatory hygiene promotion activities	3,000	4,000	3,000	3,500	13,500
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Means of Verification : Quarterly and monthly project report

Daily WASH report

Daily Hygiene promotion report

Photos

Indicator 1.1.3	WATER, SANITATION AND HYGIENE	No. Cholera Prevention Mass campaigns activities conducted						1
Means of Verification : Quarterly and monthly project report WASH activities report Photos								
Indicator 1.1.4	WATER, SANITATION AND HYGIENE	No. people reached with awareness on safe clean water, and hand-washing techniques at schools, churches, restaraunts, and markets						25,000
Means of Verification : Quarterly and monthly report WASH weekly report								
Activities								
Activity 1.1.1								
Conduct the training of hygiene promoters to build the local capacity and hygiene promotion								
Activity 1.1.2								
Conduct hygiene promotion and social mobility at households and community level								
Activity 1.1.3								
Conduct cholera prevention and control mass campaign activities								
Activity 1.1.4								
Conduct cholera prevention awareness geared towards safe drinking water, and good hand-washing practices in the markets, church, schools and restaurants								
Outcome 2								
Enhancing lifesaving the distribution of basic WASH supplies to prevent the outbreak of cholera epidemics and other acute watery diseases (AWDs) in the affected communities in Yirol East								
Output 2.1								
Description								
Households and local communities have access to basics WASH supplies for the prevention, control and management of cholera outbreak the affected counties								
Assumptions & Risks								
It is assumed that supplies are adequate to meet the needs of the communities, and that the WASH core pipelines are responding to the needs and request in time. The logistics cluster also coordinate the transportation of the supplies to the locations, Delay to approved the WASH supplies and delay to transport the WASH supplies to the site will also delay the activities. This will be mitigated through early request from the WASH core pipelines, and coordinate with the logistics cluster to transport the items in time.								
Indicators								
			End cycle beneficiaries				End cycle	
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target	
Indicator 2.1.1	WATER, SANITATION AND HYGIENE	No. Cholera prevention illustrated booklet distributed to schools, markets, restaraunts and churches					1,000	
Means of Verification : Quarterly and monthly report Activity report and photos								
Indicator 2.1.2	WATER, SANITATION AND HYGIENE	No. Hygiene Kit distribute to the households					1,000	
Means of Verification : Quarterly and monthly program report Distribution report Weekly WASH update								
Indicator 2.1.3	WATER, SANITATION AND HYGIENE	[Frontline] Number of people reached with WASH NFI distribution	800	2,000	1,000	1,200	5,000	
Means of Verification : Quarterly and monthly report WASH weekly report Daily Activities updates								
Activities								
Activity 2.1.1								
Conduct the distribution of Cholera prevention booklet to the markets, restaraunts, churches and schools level								
Activity 2.1.2								
Conduct the distribution of hygiene kits to 1000 households								
Activity 2.1.3								
Assess the number of people reached with WASH NFIs distribution in Yirol East.								
Outcome 3								
Enhancing the rehabilitation or construction of sanitation and hand-washing facilities located in the 2 Oral Rehydration Points (ORPs) and awareness campaigns in common public areas to control and prevent the cholera outbreaks in Yirol								
Output 3.1								

Description							
Sanitation and hand-washing facilities have been rehabilitated or constructed , and functional in the 2 ORPs to control and prevent the cholera transmission in the health facilities							
Assumptions & Risks							
The assumption is that LiveWell will established 2 ORPs in Adior payam of Cuiedit and Shambe Port and there are no sanitation facilities. The risk is the underfunding and lack of transport to take the construction materials to the site. This will be mitigated by keeping the WASH Cluster posted and also mobilize available LiveWell resources to solved this out.							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	WATER, SANITATION AND HYGIENE	[Frontline] Number of new latrines constructed/rehabilitated					2
Means of Verification : Quarterly and monthly report WASH weekly report Photos							
Indicator 3.1.2	WATER, SANITATION AND HYGIENE	[Frontline] Number of hand washing facilities constructed/rehabilitated					2
Means of Verification : Quarterly and monthly report WASH weekly updates Photos							
Indicator 3.1.3	WATER, SANITATION AND HYGIENE	[Frontline] Number of people with access to improved sanitation facilities	20	30	20	30	100
Means of Verification : Quarterly and monthly report WASH weekly report Daily activity updates							
Activities							
Activity 3.1.1							
Rehabilitate or construct 2 sanitation facilities in Yirol East							
Activity 3.1.2							
Rehabilitate or construct 2 hand-washing facilities in Yirol East							
Activity 3.1.3							
Conduct the assessment on the number of people reach with improved sanitation and hand-washing facilities							
Additional Targets :							

M & R

Monitoring & Reporting plan

Project Monitoring and Reporting plan will continually ensure the following;

- EFFECTIVE REPORTING SYSTEM: (i) compilation of daily/weekly/monthly WASH report, (ii) compilation of hygiene promotion reports, (iii) compilation of monthly and quarterly reports for Yirol East's Cholera Response report, (iv) compilation of quarterly progress report for the Hygiene promotion activities to WASH Cluster and the donors, (v) monthly and quarterly reports to the head Office in Juba.
- EFFECTIVE FINANCIAL MONITORING SYSTEM: (i) LiveWell accounting systems is based on the double-entry system which records transactions into journals and ledgers. Daily transactions, including purchases, cash receipts, accounts receivable and accounts payable are recorded using a specific accounting software which is reconcile on a weekly/monthly basis under the supervision of finance department; II) Budget follow-up are elaborated and approved by project department together with the request for funds (ii) procurement plan is elaborated at the begin of the project and review on a quarterly basis with the support and supervision of logistics and procurement manager; III) compilation of financial report is elaborated by the LiveWell administration with the support of a Project accountant and subsequently approved by executive committee within the Head Office.
- SKILLED TECHNICAL TEAM: LiveWell envisaged employment of technical human resources skilled in Emergency WASH Response with skilled in management and supervision, responsible for assisting CHD's team in Cholera case management, early detection and surveillance at Payam and Boma level. The activities will be based in 3 payams of Adior, Nyang and Malek. Daily monitoring and Supervision
- RAPID RESPONSE COMMITTEE: WASH Officer to oversee the activities, and provide supportive supervision and technical assistance to the Hygiene promotion team (3 supervisors corresponding to 3 payams, and 24 hygiene promoters, 8 HPs in each payam).
- Public Health Offcier(M&E Focal will be based in the Yirol East headquarter will be responsible for periodic visits in the 3 project areas, to check the implementation based on our indicators, targets and performances. The same role will be played by LiveWell's Program Director in the head office in Juba;
- EXTERNAL MONITORING: LiveWell will share daily/weekly WASH activities and other response data on the project implementation with WASH and Health Cluster focal persons both at Eastern Lakes State and State Ministry Of Health (SMOH) to share views and get additional inputs and comments.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
		Activity 1.1.1: Conduct the training of hygiene promoters to build the local capacity and hygiene promotion	2017								X	X	
	2018												

Activity 1.1.2: Conduct hygiene promotion and social mobility at households and community level	2017								X	X	X	X	X
	2018	X											
Activity 1.1.3: Conduct cholera prevention and control mass campaign activities	2017										X		
	2018												
Activity 1.1.4: Conduct cholera prevention awareness geared towards safe drinking water, and good hand-washing practices in the markets, church, schools and restaurants	2017								X	X	X	X	X
	2018	X											
Activity 2.1.1: Conduct the distribution of Cholera prevention booklet to the markets, restaraunts, churches and schools level	2017								X	X	X	X	X
	2018	X											
Activity 2.1.2: Conduct the distribution of hygiene kits to 1000 households	2017								X	X	X	X	X
	2018	X											
Activity 2.1.3: Assess the number of people reached with WASH NFIs distribution in Yirol East.	2017									X	X	X	X
	2018	X											
Activity 3.1.1: Rehabilitate or construct 2 sanitation facilities in Yirol East	2017								X	X	X		
	2018												
Activity 3.1.2: Rehabilitate or construct 2 hand-washing facilities in Yirol East	2017								X	X	X		
	2018												
Activity 3.1.3: Conduct the assessment on the number of people reach with improved sanitation and hand-washing facilities	2017								X	X	X	X	X
	2018	X											

OTHER INFO

Accountability to Affected Populations

LiveWell will continue to provide the emergency WASH response and preventive services in conflict affected areas of Yirol East ensuring that the affected populations are protected, not discriminated against based on age, gender, ethnicity or any form of disability. Sharing of information with SSHF, Health cluster, CHDs and community focal persons as a way to promote community ownership and long-term containment of the outbreak. Therefore, LiveWell will work closely with Yirol East communities, Adior hospital, Nyang PHCC, Malek PHCC, and other implementing INGOs/NNGOs in Yirol East county for appropriate referral and to also follow up on the progress of treatment in the referred facility.

SMOH'S CHD at Yirol East county will be responsible for transporting the referred patients. Logistics/Health/WASH clusters will coordinate the transportation of the ORPs/WASH/Health supplies to the LiveWell's main stores in Nyang, Malek, Adior and the head office in Juba where it will be channels to the specific locations ORPs in Yirol East. LiveWell has a capacity in term of storage to keeps the supplies and the hired vehicles to distribute the supplies.

Implementation Plan

LiveWell organization will self-perform as a implementing partner. LiveWell is registered by Relief and Rehabilitation commission as well as Ministry of Justice and this registry is recognized and acknowledged by the State Ministry of Health. LiveWell has a past experience in implementing cholera response and prevention project and this verse knowledge of area and the required skills will enable LiveWell to successfully implement this current project efficiently and effectively

This project will aim to reduced the morbidities and mortalities due to cholera outbreak, and as well support and strengthened the capacity of existing County Health Department's units/centers to response effectively to the further epidemics in the area.

27 hygiene promoters (HPs) including 3 payam supervisors will undergo 2 days refreshers training on cholera outbreak response and prevention, then deployed the HPs to conduct hygiene promotion activities at household, health facility and community level such as markets, schools, churches, restaraunts and waterpoints. Mass cholera awareness campaign and WASH NFIs distribution will be conducted for a period of 6 months, and the activities will be coordinated within the existing community leadership and other stakeholders at CHD, and other primary health care centers to guarantee effective and continues lifesaving cholera response services in the Bomas and corresponding villages. Effective referral will be put in place to make sure severe cholera cases identified at community level are referred to the nearest ORP, PHCC/Us, and CTC for further case management.

LiveWell Health project will coordinate other integrated Cholera prevention activities such as Household/neighborhood spraying will be conducted for patients with suspected cholera case to stop the active transmission. Surveillance team will investigate cases of community death from AWDs, and ascertain whether the cause was due to cholera. Public Health officer together with Community Health workers in the ORP will trained the 3 communities on burial and funeral plans for cholera death case.

Hygiene Promotion/social mobilization activities, and WASH NFIs distributions will be conducted in the ORP facilities, household and community level and teaches the community to have a better understanding of cholera transmission and its preventive measures.

The project design is based on proactive and continuous collaboration between LiveWell, SMOH, and other national and international organizations in Yirol East in order to ensure proper coordination, adherence to the activity plan and capacity of prompt project adjustments (when required). The LiveWell's emergency team in Yirol East will meet on regularly basis to ensure that proper monitoring and evaluation is in place to achieve properly achieved our objectives.

- WASH RESPONSE TEAM: Chaired by CHD Director in Yirol East, LiveWell Project focal persons, the WASH officer will meet on monthly basis and will be responsible for: (i) defining/consolidating/readjusting the work plan, (ii) sharing information and data on the activities carried out and in pipeline, (iii) debating possible project implementation challenges and identifying the related way forward,(iv) providing technical assistance in the project supervision, (v) consolidating quarterly project reports, (vi) representing the Project board in front of local stakeholders and when project-related decisions are taken.

- PROJECT COMMITTEE: Composed of CHD (or his/her delegate), and LiveWell, and both will be meeting on quarterly basis and will be responsible for: (i) supervising the general project implementation and provide related feedback/advice to the ERT Committee, (ii) facilitating integration of the project with other health activities in the catchment areas, (iii) linking with other stakeholders at Health Clusters, WASH clusters, IOM, WHO, UNICEF, other INGOs, etc.) to facilitate the project implementation and promotion. With reg

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
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Environment Marker Of The Project

A+: Neutral Impact on environment with mitigation or enhancement

Gender Marker Of The Project

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

Justify Chosen Gender Marker Code

All LiveWell programs always involves and encourages the participation of boys, girls, women and men in the program through community participation. An aspect which is evident with the community health and hygiene promoters (both men and women) who are normally being involved at the facility and community level. Beneficiaries include all age groups with suspected cholera cases. Health education and hygiene promotion will target both genders, men, women. The WASH interventions data will be disaggregated by gender (boys, girls, men, women) defining the most affected group. The project will not discriminate against any gender, race, tribe, or religion during implementation. We have clear policy in the employees' code of conduct that stipulated the prevention of sexual and exploitation at work. Hygiene kits and dignity kits will be distributed. All the repaired emergency toilets will observed gender sensitive (marking, signs and lights).

Protection Mainstreaming

- LiveWell's cholera project will involves and encourage the participation of women, girls, boys, and men in the project.
 - Our beneficiaries include children aged under-five years (boys and girls) and caregivers of children with suspected cases of cholera epidemics.
 - Health education and hygiene promotion activities at the community and the household level will target both genders, men, women, young adults (male & female) living in 3 payams of Nyang, Malek and Adior.
 - Cholera Case Management at community level will observed the reproductive health issues pertaining to the protection of pregnant women or female in their reproductive age, by encouraging pregnant women to test for HCG at health facility before administering any antibiotics especially women has who missed their period to avoid the association of abortion with the cholera case management. Lactating mothers will also be considered in the management.
 - The WASH weekly information and monthly reports data, will be disaggregated by gender (boys, girls, men, women), defining the most affected group.
 - The project activities will not discriminate against any gender, race, tribe, or religion during implementation process. Our focus will be on the affected vulnerable populations within Yirol East county.
- We have clear policy in the employees' code of conduct that stipulated the prevention of sexual harassment and exploitation at work, and there is NO tolerance to any case of Gender-based Violence at workplace

Country Specific Information

Safety and Security

Since July 2016, South Sudan was characterized by the escalation of armed violence targeting civilians leading to forced displacements in the POCs, IDPs, and local settlements within affected states. In Jonglei, over 250,000 civilians crossed the river Nile to Mingkaman IDP sites, but some moved to Yirol West and Yirol East to stay with the host communities in search for food, shelters and safe drinking water. Lakes State has been undergoing difficult time with the inter-clan raiding of cows and killing of innocent civilians in almost all its 8 counties. The security is kinder stable in Yirol East but worrying between on the road that connect Yirol West and the Yirol East on your way from Mingkaman. 2 months ago, IOM staffs felt in the road ambush, got looted and 3 employees killed, and this had made some three INGOs to withdraw from the area.

Yirol East people are friendly and welcoming, except few cases of looting/robbery reported on the roads to Yirol West but rare occasions.

Access

Yirol East is accessible by road, water and air transports. It is access by road through The Mingkaman-Yirol West road, and by boat through Mingkaman from Awerial, Shambe port from Twic East of Jonglei State to Yali then to Nyang, quiet a far distance compare to Mingkaman passage. Adior town have a very small airstrip for emergency Logs flight. However road and water transport is not 100 percent safer, but it's 100 percent accessible.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
1. Staff and Other Personnel Costs							
1.1	Executive Director	S	1	6,000.00	6	3.00	1,080.00
	<i>The Executive Director will have overall control and management of the program. S/he will be involved in the coordination and provide guidance in program policy issues. S/he will oversee the program implementation as per the proposal; s/he will be reviewing all reports before submission to the donors. S/he will partially work under this project.</i>						
1.2	Program Director	S	1	5,500.00	6	10.00	3,300.00
	<i>S/he is responsible for the overall oversight of the projects and ensuring that donor requirements are met. S/he will review program reports, program workplans, liaise with the donor and overseen the program manager to ensure sound implementation and completion of activities.</i>						
1.3	Finance Manager	S	1	4,000.00	6	3.00	720.00
	<i>S/he will be primarily responsible for the donor and administrative reporting. S/he will be formulating new budgets and ensuring adequate cash is available in the sites. S/he will also ensure all the donor requirements and LiveWell internal regulations are met and adhered to in all the field sites. S/he will also be the administration focal point ensuring all the local laws are adhered to in all LiveWell operating projects. S/he will partially work under this project.</i>						
1.4	Logistics/Procurement Manager	S	1	3,600.00	6	3.00	648.00
	<i>S/he will be responsible for providing direction to the logistic team in accordance with project objectives and the proposal. S/he will provide support for project procurement, asset/inventory and report writing and liaising with the project focal persons to ensure lead time between purchasing and delivery of supplies and other is kept minimal and determined beforehand. S/he will partially work under this project.</i>						
1.5	Human Resource Manager	S	1	2,500.00	6	4.00	600.00
	<i>S/he is responsible for developing and implementing HR policies and procedure, ensuring that all labor laws are complied with, and is a member of senior management team.</i>						
1.6	WASH Officer	D	1	500.00	6	100.00	3,000.00
1.7	Hygiene Promotion Supervisors	D	3	120.00	6	100.00	2,160.00
1.8	Hygiene Promoters/Social Mobilizers	D	24	90.00	6	100.00	12,960.00
	Section Total						24,468.00
2. Supplies, Commodities, Materials							
2.1	Visibilities supplies	D	1	1,350.00	1	100.00	1,350.00
	<i>Cost for T-shirt, Cap, and ribbon for cholera prevention response</i>						
2.2	Training of Hygiene promoters on social mobilization and cholera prevention	D	1	2,000.00	1	100.00	2,000.00
	<i>Cost for Training materials such as notepads, pen, meals and transport</i>						
2.3	2 Community Meetings	D	2	600.00	1	100.00	1,200.00

	<i>Cost of sodas, incentive, water, handbooks, pens, hiring of halls, and the transport cost per attendant</i>						
2.4	Mass Campaigns	D	1	1,350.00	1	100.00	1,350.00
	<i>Cost of hiring a campaign truck, public microphones, drama groups and dancers</i>						
2.5	Rehabilitation or construction of new toilets	D	2	4,500.00	1	100.00	9,000.00
	<i>Cost for construction for local materials, excavation of the pits, doors, iron-sheets, poles, and finishing, labour cost</i>						
2.6	Rehabilitation or construction of new Hand-washing facilities	D	2	750.00	1	100.00	1,500.00
	<i>Cost of concrete stand, tanks, plumbings and labour cost</i>						
	Section Total						16,400.00
3. Equipment							
3.1	Laptops	D	1	500.00	1	100.00	500.00
	<i>cost for 1 laptop for WASH officer for report at Yirol East</i>						
3.2	Satelite phones	D	1	700.00	1	100.00	700.00
	<i>cost of 1 satellite phone in case of poor network in the remote setting</i>						
3.3	Communication-Juba office	D	1	1,500.00	6	10.00	900.00
	<i>Airtime to call the staffs for report, airtime for internet</i>						
	Section Total						2,100.00
4. Contractual Services							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total						0.00
5. Travel							
5.1	Local staff travel per diem	D	1	100.00	6	100.00	600.00
	<i>This covers the cost of staff per diem during training and other times of assignment outside of their duty station, including accommodation. Cost is budgeted as per actual cost LiveWell is paying, as per the procedure</i>						
5.2	Local staff Travel accommodation	D	2	100.00	6	100.00	1,200.00
	<i>This covers the cost of staff per diem during training and other times of assignment outside of their duty station, including accommodation. Cost is budgeted as per actual cost LiveWell is paying, as per the procedure</i>						
5.3	Travel Air-fare within South Sudan	D	1	283.70	3	100.00	851.10
	<i>This will cover the cost of travel both by road and by air within South Sudan. Staff travel will be required mainly between the Juba main office and the site where RRM working group wanted LiveWell to response. The main means of transport between Juba and Project Implementation sites is by air since roads are impassable especially during the rainy season and LiveWell relies mainly on WFP flights for such travel. Cost is budgeted as per historical cost.</i>						
	Section Total						2,651.10
6. Transfers and Grants to Counterparts							
NA	NA	NA	0	0.00	0	0	0.00
	NA						
	Section Total						0.00
7. General Operating and Other Direct Costs							
7.1	Office rent and maintenance	S	1	9,000.00	6	1.00	540.00
	<i>cost of rent</i>						
7.2	Office utilities and supplies	S	1	5,000.00	6	1.00	300.00

7.3	Fuel and generator maintenance	S	1	3,808.00	6	1.00	228.48
7.4	Fees for legal documents for NGO	S	1	500.00	1	8.30	41.50
Section Total							1,109.98
SubTotal			53.00				46,729.08
Direct							39,271.10
Support							7,457.98
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							3,271.04
Total Cost							50,000.12

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Lakes -> Yirol East	100	5,000	7,000	6,000	7,000	25,000	Activity 1.1.1 : Conduct the training of hygiene promoters to build the local capacity and hygiene promotion Activity 1.1.2 : Conduct hygiene promotion and social mobility at households and community level Activity 1.1.3 : Conduct cholera prevention and control mass campaign activities Activity 1.1.4 : Conduct cholera prevention awareness geared towards safe drinking water, and good hand-washing practices in the markets, church, schools and restaurants Activity 2.1.1 : Conduct the distribution of Cholera prevention booklet to the markets, restaraunts, churches and schools level Activity 2.1.2 : Conduct the distribution of hygiene kits to 1000 households Activity 2.1.3 : Assess the number of people reached with WASH NFIs distribution in Yirol East. Activity 3.1.1 : Rehabilitate or construct 2 sanitation facilities in Yirol East Activity 3.1.2 : Rehabilitate or construct 2 hand-washing facilities in Yirol East Activity 3.1.3 : Conduct the assessment on the number of people reach with improved sanitation and hand-washing facilities

Documents

Category Name	Document Description