

**MULTI-DONOR TRUST FUND FOR
UN ACTION AGAINST SEXUAL VIOLENCE IN CONFLICT
PROJECT PROPOSAL SUBMISSION FORM**

Part A. Meeting Information (To be completed by the UN Action Secretariat)			
RMC Meeting No: RMC-008	Project¹ No: 015		
Date of Meeting: November 1, 2010	RMC members in attendance at meeting: Mari Matsumoto (MDTF), Maura Heron and Gillian Holmes (UN Action), Maha Muna (UNFPA), Claudia Garcia Moreno (WHO), Mendy Marsh (UNICEF), Kate Burns (OCHA), Roma Bhattacharjea (UNDP) provided comments in writing		
Part B. Project Summary (To be completed by the Participating UN Organization)			
Date of Submission: 19 October 2010	Participating UN Organization(s): WHO, UNFPA, UNICEF		
	Participating UN Organization receiving funds: WHO		
Focal Point of the Participating UN Organization(s): Name: Claudia Garcia Moreno (WHO) Address: 20 Avenue Appia, 1211 Geneva 27, Switzerland Telephone: +4122 791 4353 Email: garciamorenoc@who.int	Project Title: Technical meeting on responding to the psychosocial and mental health needs of sexual violence survivors		
	Project Location(s): WHO, Geneva, Switzerland		
UN Action pillar of activity: <input checked="" type="checkbox"/> Advocacy <input checked="" type="checkbox"/> Knowledge building <input type="checkbox"/> Support to UN system at country level	Projected Project Duration: 1 year, including a 3 day meeting		
Proposed project, if approved, would result in: <input checked="" type="checkbox"/> New Project <input type="checkbox"/> Continuation of previous funding <input type="checkbox"/> Other (explain)	Total Project Budget: US \$ __ 128 400 _____		
	Amount of MDTF funds requested: US \$ __ 128 400 _____		
	Percentage of indirect support costs from MDTF contribution:		
Projected Annual Disbursements:	2010 \$ 10,000	2011 \$ 118,400	2012 \$ _____
Projected Annual Commitments:	2010	2011 \$ 118,400	2012 \$ _____

Application Instructions for Narrative Summary

¹ The term "project" is used for projects, programmes and joint programmes.



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Part C: Initial Review of Proposal (To be completed by the UN Action Secretariat)	
(a) Is the project explicitly linked to the UN Action Strategic Framework?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(b) Is the project effective, coherent, and cost-efficient?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(c) Does it avoid duplication and significant overlap with the activities of other UN system entities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(d) Does it build on existing capacities, strengths and experience?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(e) Does it promote consultation, participation and partnerships and agree with the existing country coordination mechanism?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(f) Is the Project Proposal Submission Form fully completed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(g) Is the Budget in compliance with the standard format?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
(h) Is the indirect support cost within the approved rate?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Part D: Decision of the Resource Management Committee (to be completed by the RMC Chairperson)	
5. Decision of the Resource Management Committee <input checked="" type="checkbox"/> Approved for a total budget of US\$ 128,400 <input type="checkbox"/> Approved with modification/condition <input type="checkbox"/> Deferred/returned with comments for further consideration <input type="checkbox"/> Rejected	
Comments/Justification:	
Chairperson of the Resource Management Committee C. GARCIA-MORENO Name (Printed)	
C Garcia-Moreno Signature	
20 November, 2010 Date	
Part E: Administrative Agent Review (To be completed by the UNDP MDTF Office)	
6. Action taken by the Executive Coordinator, Multi-Donor Trust Fund Office, UNDP	



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6. Action taken by the Executive Coordinator, Multi-Donor Trust Fund Office, UNDP

Bisrat Aklilu
Executive Coordinator
Multi-Donor Trust Fund Office, UNDP

.....
Signature

.....
Date



NARRATIVE REPORT

I. Overview

a. Provide a brief overview of the project, including overall goals and objectives, key strategies, expected results, and intended beneficiaries.

Increasing attention to sexual violence and awareness of the multiple needs of sexual violence victims/survivors over the last decade has led to an increase in psychosocial programming (which encompasses a range of approaches) for survivors of sexual violence in conflict settings. Mental health care provision as part of the health sector response in these settings, however, is still rare in spite of the recognition that the psychological impact of sexual violence can be severe and long-lasting. When used as a weapon of war this impact can extend to families and communities.

Common psychological problems for survivors include fear, self-blame, avoidance, flashbacks, anxiety, intense feelings of anger, hopelessness, alienation and/or 'feeling unclean'. Survivors of sexual violence have particularly high levels of clinical mental health problems such as depression and anxiety disorders, including Post Traumatic Stress Disorder. In addition they may experience isolation, stigmatization and inability to access services or continue to provide for themselves and their family. Survivors also often avoid speaking to their family members and friends about what happened for fear of their reaction. Relationship and family problems are common – family members may blame the victim or feel ashamed, children of victims may be stigmatized, families may become destitute or be forced to leave their community. The long term mental health effects of sexual violence can be especially harmful: sexual abuse during childhood has been associated with high risk sexual behaviours including early sex and multiple partners, alcohol and other substance abuse, and also with perpetration of violence later in life.

A few innovative programmes to address the mental health needs of sexual violence survivors have been developed, mainly by non-governmental organizations, in places like DRC and Liberia. These include building capacity of lay people or health professionals in strengthening social support, counseling, cognitive behaviour therapy or other approaches. The Department of Health in South Africa has included a module on mental health, based on cognitive behaviour therapy, in its recently developed curriculum on Caring for Survivors of Sexual Violence.

These experiences provide a useful starting point, however they are still limited. The impact of these programmes and their effects on the mental health and social wellbeing of survivors in the short and longer term have typically not been evaluated. It is necessary to explore new potential entry points for addressing the psychosocial and mental health problems of the population affected by conflict, including the DDR programmes. It is necessary to build a knowledge basis on what works to address the psychosocial and clinical mental health needs of survivors of sexual violence in conflict affected settings in order to develop and implement programmes that will more easily facilitate people's reintegration into their families and societies. Identification of these effective approaches will also help ensure that limited human and financial resources are channelled in the best way.

For this reason we propose to hold a technical meeting on responding to the psychosocial and mental



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health needs of rape/sexual violence survivors in conflict affected settings. This meeting begins to address the evidence gap by reviewing existing evidence and experiences. It will build on the IASC MHPSS guidelines and of the MHPSS reference group.

The meeting aims to develop recommendations on interventions to address the psychosocial and mental health needs of victims/survivors of sexual violence in conflicted affected settings. Specifically, the meeting will:

- review the current body of literature and level of evidence supporting different approaches to the mental health and psychosocial needs of survivors of rape/sexual violence;
- share experiences of and lessons learned from innovative approaches being tried out in the field in conflict affected settings, particularly any that have been evaluated;
- make policy and programmatic recommendations to inform donors and programmes; and
- develop an agenda for future programme development, evaluation and research efforts.

The meeting will bring together practitioners from the field representatives of key UN agencies and INGOs working on sexual violence in conflict and academic experts to review existing evidence and experience. Since efforts to address psychosocial and mental health needs of sexual violence survivors in resource poor settings are few and recent, it is proposed that the meeting will be informed also by a review of experiences from non conflict settings. The meeting will be three days long and include one day where groups will meet in two parallel sessions - one focused on psychosocial responses and the other on mental health responses-, with both groups coming together on the first day and the third day.- Efforts will be made to ensure representation of a range of conflict-affected settings.

Specific outcomes will be:

- A review of existing evidence of effective interventions for mental health care
- A review of existing evidence of effective interventions for psychosocial support
- A meeting report summarizing the evidence and experiences shared and policy and programmatic recommendations
- A brief document with key findings and policy and programmatic recommendations
- An agenda for programme development and evaluation and for further research

II. Proposal's compliance with UN Action's Strategic Framework

a. What pillar does the proposal fall under? (support to UN system action at country level, advocacy, or knowledge-building)

The proposal falls primarily under the knowledge-building pillar, although it is also relevant for the advocacy pillar. The reports emerging from the meeting will serve to increase the knowledge of all stakeholders to develop more effective and sustainable programmes in the future that address the mental health and psychosocial needs of survivors of sexual violence and others affected by conflict. Following the meeting, participants will have the tools to influence the public-policy arena on the need for increased



research on and funding for programming to address the psychosocial and mental health needs of rape/sexual violence survivors.

b. Explain how the proposal enhances UN system coordination and joint programming.

This meeting will enhance UN system coordination and joint programming by bringing together representatives of key UN agencies and INGOs working on sexual violence in conflict as well as other practitioners from the field and academics. Together, stakeholders will review and identify gaps within existing literature and in programming and make recommendations to inform donors and programmes and develop an agenda for the future. They will have an opportunity to review, define and pursue promising interventions in protection, health and other relevant sectors and identify the linkages between them.

c. Explain how the UN, governmental organizations, NGOs, and other key stakeholders will be engaged throughout implementation of the proposal.

Key groups of actors are being consulted in the development of the meeting, including the MHPSS reference group, GBV AoR, and Child Protection AoR. All involved are helping to identify promising approaches as well as providing suggestions for possible experts. Participants will be selected based on ensuring a range of expertise and regional and organizational diversity. All participants at the meeting will be given the opportunity to share their experiences of work conducted and programmes implemented to respond to the psychosocial and mental health needs of rape/sexual violence survivors in their own countries or settings. They will also be given the opportunity to discuss which programmes or responses are effective and thus influence the development of future programmes.

d. Explain how the proposal would strengthen the capacity of national institutions to deal with conflict-related sexual violence.

The meeting will result in the creation of a review of existing evidence of effective interventions for psychosocial support and for mental health care, a meeting report summarizing the evidence and experiences shared and policy and programmatic recommendations and a brief document with key findings and policy and programmatic recommendations. This will enable national institutions to respond to conflict-related sexual violence with more effective programmes and funding both by selecting interventions that work as well as having the tools with which to advocate for funding for these interventions. Addressing the mental health component is critical to improving the lives and wellbeing of survivors and of societies in general

III. Success criteria and means of evaluating results

a. Explain how the Participating UN Organisation(s) submitting the proposal have the institutional capacity to successfully achieve the proposed objectives.

The Participating UN Organisations submitting the proposal have the necessary infrastructure and staff needed to successfully achieve the proposed technical meeting. They are also in key positions globally and at country level to be able to support follow up on the meeting findings. Three departments of WHO are collaborating on this effort, including the Department of Mental Health and Substance Abuse.

b. Describe the overall management structure of this project



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The project will be coordinated by WHO (C. Garcia-Moreno, Family and Community Health (lead), C Reis, Humanitarian Action in Crises, M Van Ommerem, Mental Health and non-communicable diseases), in close collaboration with UNICEF (M Marsh and A Melville) and UNFPA (M Elmuna). Preparation of the meeting agenda, identification of participants and commissioning of background papers will be done by consensus among the three agencies.

c. Explain how the proposal will be monitored and evaluated.

A detailed timeline will be developed to monitor the events leading to the planned meeting and the delivery of the products agreed.

IV. Budget

The budget is to cover the costs of: hiring a consultant to support the preparations of the meeting, meeting report and follow up materials; commissioning of two background papers on psychosocial interventions and on mental health interventions for sexual violence victims, with a focus in conflict and post conflict settings; travel and per diem for 20 participants to a meeting; report, policy briefs and other materials from meeting. .

See budget form attached.



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ANNEX A. 3

MULTI-DONOR TRUST FUND FOR
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FUND SIGNATURE PAGE

(Note: Please attach to the Project Proposal Submission Form)

Participating UN Organization(s): WHO, UNICEF, UNFPA	Focal Point of Participating UN Organization receiving funds: Name: Claudia Garcia Moreno (WHO) Address: 20 Avenue Appia, 1211 Geneva 27, Switzerland Telephone: +4122 791 4353 Email: garciamorenoc@who.int												
Project Number: (to be allocated by the UNDP MDTF Office)	Project Duration: 1 year, including a 3 day meeting Estimated Start Date: Dec 2010 or January 2011 (depending on contracting of consultant)												
Project Title: Technical meeting on Responding to the psychosocial and mental health needs of rape/sexual violence survivors	Project Location(s): WHO, Geneva, Switzerland												
Total Project Cost: US \$ __128 400____ MDTF: US \$ __128 400____ Other: US \$ _____ GRAND TOTAL: US \$ __128 400____													
Total Amount Approved: US \$ _____													
<table border="1"> <thead> <tr> <th></th> <th>Name/Title</th> <th>Date</th> <th>Signature</th> </tr> </thead> <tbody> <tr> <td>Focal Point of Participating UN Organization receiving funds:</td> <td>Dr F. Bustreo Assistant Director-General Family and Community Health WHO</td> <td>1 Dec 2010</td> <td></td> </tr> <tr> <td>RMC Chairperson:</td> <td>Claudia Garcia Moreno, Coordinator, Department of Reproductive Health and Research, WHO</td> <td>23 Nov '10</td> <td></td> </tr> </tbody> </table>			Name/Title	Date	Signature	Focal Point of Participating UN Organization receiving funds:	Dr F. Bustreo Assistant Director-General Family and Community Health WHO	1 Dec 2010		RMC Chairperson:	Claudia Garcia Moreno, Coordinator, Department of Reproductive Health and Research, WHO	23 Nov '10	
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PROGRAMME² BUDGET FORM

PROGRAMME BUDGET*	
CATEGORY	AMOUNT
1. Supplies, commodities, equipment and transport	Report and other materials (editing, layout and printing) US \$ 12,000
	Translation of review and brief document US \$ 4,000
2. Personnel (staff, consultants and travel)	Meeting (travel and per diem for 3 days for 20 participants) US \$ 80,000
	Consultants to write 2 review papers US \$ 8,000
	Consultant (preparation and rapporteur) US \$ 16,000
3. Training of counterparts	
4. Contracts	
5. Other direct costs	
Total Programme Costs	US \$ 120 000
Indirect Support Costs**	Calculated at 7% US\$ 8,400
TOTAL	US \$ 128 400

* Based on the UNDG Harmonized Financial Reporting to Donors for Joint Programmes approved in 2006. Definition of the categories can be found in the instruction which is available on www.undg.org.

** Indirect support cost should be in line with the rate or range specified in the Fund TOR (or Programme Document) and MOU and SAA for the particular MDTF.

² The term "programme" is used for projects, programmes and joint programmes.

