

Requesting Organization :	Triangle Génération Humanitaire	
Allocation Type :	2022- SHF Reserve for Emergencies (Sub-national Conflict/Dry-Spell)	
Primary Cluster	Sub Cluster	Percentage
EMERGENCY SHELTER AND NON-FOOD ITEMS		63.00
WATER, SANITATION AND HYGIENE		27.00
PROTECTION		10.00
		100

Project Title :	Provision of emergency WASH, Protection, and shelter intervention in response to conflict and drought in West Darfur.
Allocation Type Category :	

OPS Details

Project Code :		Fund Project Code :	SUD-22/HSD20/RA2/ESNFIs-WASH-P/INGO/21592
Cluster :		Project Budget in US\$:	1,104,981.00
Planned project duration :	10 Months	Priority:	
Planned Start Date :	01/04/2022	Planned End Date :	30/11/2022
Actual Start Date:	01/05/2022	Actual End Date:	28/02/2023

Project Summary :	<p>This project proposal is aimed at contributing to address the needs of the most vulnerable conflict-affected people in West Darfur, in the context of increasing inter-community violence as illustrated by the clashes and subsequent massive population displacement which occurred in different localities in 2021. The perception that nomadic Arab communities are excluded from humanitarian aid adds to this frustration and increases tensions in a region scarred by decades of inter-communal conflicts. This violence is part of a context of a failed rainy season which has exerted considerable pressure on scarce agricultural and water resources, national political turmoil, COVID-19, deteriorated economy with very high inflation and constant impoverishment of populations, a context poorly conducive to any substantial improvement of the situation in the region. Communities are in survival mode and scramble for few resources.</p> <p>TGH's intervention is part of SHF's 2022 Sub-national Conflict and Dry-Spell response plan through the Reserve for Emergencies (RfE). The objective of this project is to address the most acute needs resulting from conflict and drought in West Darfur, more particularly in Kereneik and Sirba, through the provision of life-saving services. The intervention focuses on conflict and drought-affected communities in Kereneik and Sirba. The response projects aims to 1) provide 3,200 households (IDPs and host communities) in Kereneik town with safe, dignified and equitable access to emergency shelter, 2) provide direct and indirect Child Protection support to 30,896 highly vulnerable children in Kereneik locality and 3) provide 6,700 people (including 925 nomads) with safe and equitable access to WASH services in Sirba.</p> <p>The proposed intervention is aimed to all possible extent, to meet the most basic humanitarian needs while ensuring equal access to TGH's aid services that will allow beneficiaries to regain a minimum of dignity and mitigate health, environmental and protection risks. Due to the specific situations and needs of each population and their vulnerability to external factors, TGH offers solutions tailored to the profile of each population to meet their most urgent needs.</p> <p>This intervention is part of an emergency response coordinated with the sectors and humanitarian organizations operating in the target localities in the framework of SHF's 2022 Sub-national Conflict and Dry-Spell response plan through the Reserve for Emergencies (RfE). With 18 years of operational presence in West Darfur, TGH now has an understanding of the context, a local network, and a trained national team that allows it to be fully operational. Within the framework of SHF's RfE, TGH is the only actor to propose a humanitarian intervention in Sirba. Finally, the proposed intervention will complement two projects currently implemented by TGH in West Darfur, including a multi-sectoral emergency response in Geneina, Kereneik and Jebel Moon funded by ECHO, and a WASH emergency response in Kereneik funded by IOM/RRF.</p>
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Direct beneficiaries :

Men	Women	Boys	Girls	Total
4,332	5,018	7,091	7,335	23,776

Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Internally Displaced People	4,070	4,715	6,803	7,037	22,625
Other	262	303	288	298	1,151

Indirect Beneficiaries :

Shelter: 0
WASH: 16471
CP: 30676

Catchment Population:**Link with allocation strategy :**

The emergency response to be implemented by TGH is part of SHF's 2022 Sub-national Conflict and Dry-Spell response plan through the Reserve for Emergencies (RfE). As a pre-identified partner, TGH will address the most acute needs of conflict and drought-affected communities in Kereneik and Sirba through the provision of life-saving Emergency Shelter and Non-Food Items, Water, Sanitation and Hygiene, and Child Protection services, as stated in the Case for Funding.

The proposed intervention is in line with SHF's RfE strategy, as it aims not only to address the needs arising from inter-communal violence, but also to address the needs arising from the failure of the rainy season and harvest season, as a root cause of inter-communal violence in the targeted areas and as an emergency in itself. This project also aims to be inclusive, including all vulnerable people (IDPs, host communities and Arab nomads) to alleviate increasing tensions between these different groups and to address urgent life-saving needs.

This project is designed to contribute to the main strategic objective of the HRP 2022 of 'saving lives'. The project falls under the second Strategic Objective which aims to 'Provide safe, equitable and dignified access to critical basic services' (Specific Objective 2.2) and the third Strategic Objective which aims to 'Ensure equitable access to essential services, and access of humanitarian actors to those in need' (Specific Objective 3.1). This intervention will contribute to mitigating risks of inter-communal conflicts by providing equitable access to water, targeting the most vulnerable and groups (nomadic populations) that were previously not included in humanitarian coverage. The proposed intervention will contribute to the strategic objectives of the Shelter, WASH and Child Protection sectors.

- Enable crisis-affected populations to access adequate shelter solutions that provide protection, safety, security, and space to live in a dignified manner.
- 1.87 million crisis-affected people with access to basic water services; 1.79 million crisis-affected populations will access adequate, protected, and gender-sensitive sanitation services; 4.71 million crisis-affected populations will have access to hygiene promotion.
- Improved well-being, capacity, and resilience of girls and boys, age-and-gender-appropriate community-based protection services; Quality, specialized child protection services are available and accessible to the most vulnerable and at risk boys and girls; Improved protective environments for girls and boys through advocacy and mobilization of caregivers, communities, local services providers, and duty bearers.

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
Behailu Solomon	Head of Program WASH - TGH Sudan	wash.soudan@trianglegh.org	+249 118 278 343
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BACKGROUND**1. Humanitarian context analysis****2. Needs assessment**

Needs in the areas of emergency shelters, non-food items, water, sanitation and hygiene, and child protection were identified through several inter-agency humanitarian needs assessments conducted in West Darfur between December 2021 and February 2022. These needs assessments in the region are the result of a consultative and participatory process involving OCHA, the Area Inter-Sector Coordination Group, Sectors Coordination, consultations with relevant line ministries, Sector Coordinators and targeted communities. The humanitarian situation of IDPs, host communities and nomads requires a conflict-sensitive humanitarian response to support local efforts to

mitigate conflict and reduce protection risks within the communities. While TGH and other humanitarian organizations have already provided emergency assistance following the clashes that erupted in Kereneik on the 4th of December 2021, critical needs remain unmet among IDPs, nomads and host communities in Kereneik and Sirba localities.

3. Description Of Beneficiaries

4. Grant Request Justification

This project proposal aims to address the suffering of conflict-affected populations in ES/NFIs, WASH and CP sectors in localities with acute needs but insufficient humanitarian coverage. Due to the low intensity of the conflict in West Darfur, the area has been relegated to the status of a forgotten crisis, despite frequent inter-communal clashes in Kereneik locality, making it a volatile area, and humanitarian indicators reaching emergency. 36,776 people (7,215 households) remain displaced in Kereneik (IOM DTM, 14 February 2022) and thousands of children suffer the violence inherent in displacement. The emergency needs of the displaced are superimposed on the chronic vulnerabilities of the host communities, particularly in terms of access to safe water due to a lack of water points and the degradation of existing ones. This pre-existing situation has been deteriorated by the recent conflict through the pressure exerted on water points by the influx of displaced populations. TGH, already operational in the area, has decided to maintain its presence by strengthening its contribution to mitigate the acute needs of IDPs and host communities affected by conflicts. This intervention is intended to complement TGH's WASH emergency response currently being implemented in Kereneik, and aims to expand humanitarian coverage with the provision of ES/NFIs and CP activities.

The situation is similar in Sirba, which is also regularly the scene of conflicts between nomads and farmers over scarce water resources in the area. This already tense situation is exacerbated by the failed rainy season, which puts additional pressure on water resources and increases competition for access to water. Humanitarian water needs are all the more acute for Arab nomad communities not included in the humanitarian coverage. This situation creates frustrations amongst nomadic populations which contribute to increasing tensions in the area. Inter-Sector Rapid Needs Assessment conducted in Sirba locality -West Darfur on 16th February 2022 reportedly 6,700 people were drought-affected six villages including Karaz tamin, Haraz Timan, Manama, Shafo khalo and Gerena. Within the framework of SHF's Reserve for Emergencies (RfE), TGH is the only actor to propose a humanitarian intervention in Sirba aimed at mitigating risks of inter-communal conflicts by providing equitable access to water. Again, this intervention will complement current WASH services provided by TGH in Kereneik locality.

The prioritization of this intervention is justified by (i) the target areas (a forgotten but recurrently conflict-ridden area with alarming humanitarian indicators), (ii) the target populations (the most vulnerable populations for a direct contribution to conflict reduction and the mitigation of drought-related vulnerabilities), and (iii) the low presence of humanitarian actors in Sirba (TGH being the only humanitarian actor to have positioned itself in this area in the framework of the RfE). Designed to contribute to the main strategic objective of the HRP 2022 of 'saving lives'; the proposed projects falls under the second and the third strategic axes of the HRP 2022, and aims to "Provide safe, equitable and dignified access to critical basic services" (HRP 2022, Specific Objective 2.2) and "Ensure equitable access to essential services, and access of humanitarian actors to those in need" (HRP 2022, Specific Objective 3.1).

5. Complementarity

LOGICAL FRAMEWORK

Overall project objective

To improve living conditions of populations affected by conflict and drought through the provision of a safe and dignified environment and the creation of access to basic services of WASH in Sirba; Shelter, and Child Protection in Kereneik locality in West Darfur state.

PROTECTION

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
[Child Protection]: Improved protective environments for girls and boys through advocacy and mobilization of caregivers, communities, local service providers, and duty bearers	SO2: Improve vulnerable people's access to livelihoods and life-sustaining basic services	20
[Child Protection]: Improved well-being, capacity, and resilience of girls and boys, age-and gender-appropriate community-based protection services.	SO3: Mitigate protection risks and respond to protection needs through humanitarian action	40
[Child Protection]: Quality, specialized child protection services are available and accessible to the most vulnerable and at-risk girls and boys	SO3: Mitigate protection risks and respond to protection needs through humanitarian action	40

Contribution to Cluster/Sector Objectives : Through the construction of a Child Friendly Space providing PSS supports (A1), and the case management of separated and unaccompanied children (A2), as well as the case management for children at risk (A3), the project will contribute to improve the quality and accessibility of the specialized children protection services. The community based protection services will be improved through the strengthening of the community-based child protection network (A4) and the awareness-raising of the community about CP and SGBV. All the activities implemented will contribute to mitigate protection risks, to respond better to the protective needs, and to make the environment of intervention more protective. The community targeted will therefore benefit from improved access to life-sustaining basics services.

Outcome 1

Children's protective environment is improved in Kereneik locality.

Output 1.1

Description

To address the protection need of children in Kereneik locality, the action will contribute to improve children protection services through the construction of a child friendly space (CFS) in Kereneik town providing PSS support to the children in needs. In addition, the project will also provide case management services to separated and unaccompanied children, as well as children at risk. In parallel, the project will specifically work with the community through strengthening of the community-based child protection network. And the awareness-raising of the targeted communities about CP and SGBV.

Assumptions & Risks

- * The annual registration of TGH in Sudan is renewed
- * Local authorities continue to collaborate to allow humanitarian access and response in all project areas
- * Security conditions remain acceptable for national TGH staff in targeted localities and for international TGH staff to allow regular field visits to the area of intervention.
- * TGH receives all the necessary authorizations to continue their operations in West Darfur (project technical agreement) and hire the necessary staff on time (launching of the recruitment process before signature of the technical agreement).
- * Project beneficiaries and relevant target groups react positively to TGH interventions

Political and security aspects:

- * The politico-military situation is not excessively deteriorating, preventing the implementation of the project
- * Humanitarian workers are not targeted by attacks (kidnappings, car and office robberies)
- * Existing humanitarian capacities are not significantly diminished due to possible access limitations, travel permits, visas.

Social aspects:

- * No resurgence of conflict that would affect the current social organization in the targeted areas
- * The social protests in the major cities (including Khartoum) due to the deterioration of the economic situation do not call into question the presence of TGH in the country

Economic aspects:

- * Lack of liquidity does not force TGH to suspend or delay certain activities
- * The growing fuel crisis in Khartoum and in CD does not impact the operations of TGH and to any significant extent
- * Inflation in Sudan, although consequent, does not make the implementation of the project impossible

Sanitary aspects (specific COVID19):

- * The COVID19 pandemic and the resulting health situation, whether in West Darfur or in Khartoum, does not reduce the operational capacities of TGH and does not prevent the TGH staff from implementing activities without encountering major health risks
- * The COVID19 pandemic and the resulting health situation in West Darfur and in Khartoum does not prevent TGH from obtaining supplies and transferring the materials needed for the activities
- * TGH have the capacity to implement field activities within the limits imposed by the measures taken by the Sudanese authorities (i.e. lockdown and/or containment measures, movement restrictions)

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	PROTECTION	[Child Protection]: Number of girls and boys participating in structured and sustained psychosocial support programmes			122	123	245
Means of Verification : Attendance list of the activities carried out.							
Indicator 1.1.10	PROTECTION	Number of disable women and girls equipped with disability tools.		16		16	32
Means of Verification : Distribution list.							
Indicator 1.1.2	PROTECTION	[Child Protection]: Number of identified UASC that are reunified with their families			12	13	25
Means of Verification : Data base of the UASC reunified.							
Indicator 1.1.3	PROTECTION	[Child Protection]: Number of girls and boys at risk received and referral case management services including referrals			25	25	50
Means of Verification : Data base of cases managed.							
Indicator 1.1.4	PROTECTION	[Child Protection]: Number of women, men, boys and girls of community-based child protection structures trained on Child Protection related trainings according to minimum standards	25	25	0	0	50
Means of Verification : Training participants list.							
Indicator 1.1.5	PROTECTION	[Child Protection]: Number of women, men, boys and girls participating in awareness raising activities on protection risks including COVID 19, Mine Risk Education and Protection from Sexual Exploitation and abuse	400	400	0	0	800
Means of Verification : Activity reports.							
Indicator 1.1.6	PROTECTION	[Child Protection]: Number of permanent safe spaces finished and maintained according to the minimum standards					1
Means of Verification : Monitoring check list following the minimum standards of the guidelines for child friendly spaces in emergencies of the global protection cluster in child protection.							
Indicator 1.1.7	PROTECTION	[Outcome- CP]: % of targeted communities that have 'safe' places for children and youth					50

Means of Verification : Attendance list and comparison with the number of children in the area targeted around the CFS.							
Indicator 1.1.8	PROTECTION	[AAP/PSEA] : % of project implementing staff having a PSEA training certificate within first month of recruitment/start of project					100
Means of Verification : PSEA training certificates.							
Indicator 1.1.9	PROTECTION	[PSEA]: Number of PSEA community awareness sessions conducted					4
Means of Verification : Activity report.							
Activities							
Activity 1.1.1							
Standard Activity : [Child Protection]: Only where necessary and with a clear justification, construct, rehabilitate and/or operate child friendly spaces or multipurpose one stop centres with handwashing facilities							
<p>Psychosocial support to all children through child-friendly spaces or structured play/recreational activities in communities and home-based support/care will be provided by facilitators and social workers trained in the provision of psychosocial support services to children.</p> <p>Sustainable and structured PSS will be organized based on age (5-9, 10-13, 14-17 years old), gender, and special needs and designed to promote children's well-being, resilience, participation, development, and confidence.</p> <p>The activities will be organized in a Child Friendly Space (CFS) builds by the project in Kereneik town. The CFS will be equipped with adapted furniture, recreational items and will be managed by trained and skilled staff (2 social workers and 4 animators). The CFS will also include two segregated emergency latrines adapted for children, and a water tank of 5m3 to provide safe water.</p> <p>2 shifts per day (3 hours) will be made. Each shift will take care of 40 children. (2 groups of 20). 80 children will be cared per day. The shifts will take into account the children's school hours. At least 145 children will benefit from at least 2,5 days of activities per week.</p> <p>The supervision of educational staff will be adapted according to the age groups. TGH has its own tools for the implementation of PSS activities. For the facilitation of PSS activities, volunteers can be recruited from the community, providing them incentives. Volunteers will be informed and trained on PSEA issues.</p>							
Activity 1.1.2							
Standard Activity : [Child Protection]: Provision of case management services for children affected by protection risks including unaccompanied and separated children, child headed households, child and adolescent survivors of GBV							
<p>Case management with social workers for children identified as particularly vulnerable (separated or unaccompanied), family tracing and reunification.</p> <p>The project will identify the children separated and accompanied in Kereneik town to facilitate the reunification with their family. The cases will be managed by two trained social workers.</p> <p>An assessment will be carried out at the beginning of the project (key informants, household) to identify children particularly vulnerable (separated or unaccompanied). For family tracing, TGH will work in collaboration with the Ministry of Social Welfare, the Ministry of Health, Concern, SCI, and later the community-based child protection networks supported by the project. 2 social workers will be in charge of the reunification of 25 children.</p>							
Activity 1.1.3							
Standard Activity : [Child Protection]: Provision of case management services for children affected by protection risks including unaccompanied and separated children, child headed households, child and adolescent survivors of GBV							
<p>Referrals to protection services and/or institutions (police, schools, courts, etc.) in affected locations and at the community level to prevent and respond to child rights violations, including SGBV and PSEA.</p> <p>TGH will provide case management support to children at risk, including referral to specialized services (health, protection, legal, GBV, etc). This will include Child Protection service mapping and referral follow up. A holistic approach will be implemented and the case management process includes considering the whole family situation. Sensitive and complex cases (CAAFAG, UASC, SGBV survivor, children victim of domestic violence, etc) are dealt with a special care (including through involving concerned partners in case conferences). Coordination with children protection services (notably Ministry of Social Welfare) will be ensured.</p> <p>The cases will be managed by the 2 social workers. In the nomadic villages of Rose, Galala and Tarshana, the cases will be referred to Geneina services to avoid any risks of tension with the "non-arab" tribes of Kereneik town. For the cases coming from Kereneik town, they will be referred to Kereneik or Geneina according to the needs.</p> <p>A protection desk will be established in the CFS with one CP manager who will supervise the case management of 50 children by the social workers.</p>							
Activity 1.1.4							
Standard Activity : [Child Protection]: Strengthening of capacity of established community-based child protection structures and referral mechanisms to support prevention and response to children at risk of abuse, exploitation, violence and neglect.							
<p>Strengthening/establishing community-based child protection networks to enhance child protection</p> <p>Child Protection Community-based mechanisms will be strengthened, by setting up or supporting Child Protection Committees, Adolescents/Youth Clubs, PTA and ensuring their empowerment and active role in promoting a protective environment. Communication with Communities (CwC) is a key component to inform Communities on their rights and available services.</p> <p>CPC will notably be trained on identification, child safeguarding, referral pathways and included as community mobilizers in awareness sessions. TGH has specific tools to build and train CPCs. These tools have been developed and are being used in Iraq, Syria and CAR. In the nomadic villages of Rose, Galala and Tarshana the community based children protection networks will be strengthened in collaboration with the national NGO Al Massar which has a good acceptance from the nomadic community.</p>							

Activity 1.1.5

Standard Activity : [Child Protection]: Conduct community awareness sessions on child protection-related issues, i.e. Mine risk Education, CoVID-19, prevention from separation during emergencies and availability of services, and safety planning

Community sensitization sessions on prevention and response to CP/SGBV cases and risk mitigation measures will be organized.

Awareness-raising activities will be conducted on CP, SGBV, Education and Legal concerns, through different modalities: large awareness campaign, sensitization sessions, FGD. Awareness topics are to be further defined in collaboration with the targeted communities.

In the nomadic villages of Rose, Galala and Tarshana, the awareness-raising activities will be carried out in collaboration with the national NGO Al Massar which has a good acceptance from the nomadic community and good experience in community mobilizing.

Activity 1.1.6

Standard Activity : Not Selected

Training to all projects staff on PSEA.

TGH already has a consistent reporting procedure of PSEA allegation, train all his staff and the raise the awareness of the target community about PSEA (more detail in the Accountability to Affected Persons part). These mechanism and training will be continued in the framework of this project. A consultant will be recruit organize PSEA training for the new recruited staff and refreshment training for the already in position staff. It will also organize community awareness about PSEA on the 4 communities' targeted by the project.

Activity 1.1.7

Standard Activity : Not Selected

Equip disabled women and girls with disability tools (walker, elbow stick, disable chairs).

Among the 3200 HH support with an emergency shelter, 32 women and girls with disabilities will be support with disability tools. The beneficiary selection will be carried out in relation with the community targeting the most severed disabilities that can support be with disability tools. For each beneficiary targeted an assessment of the need will be carried out by a specialist to identify the adapted tool to provide. During the distribution, the beneficiary will be trained by a specialist about how to use the tool distribute. A PDM will be carried out on all the beneficiaries 1 month after the distribution. Follow-up of the beneficiaries will be carried out by the social workers.

Additional Targets :**WATER, SANITATION AND HYGIENE**

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
4.71 million crisis-affected populations will have access to hygiene promotion and other environmental health interventions.	SO1: Provide timely multi-sectoral life-saving assistance to crisis affected people to reduce mortality and morbidity	25
1.87 million crisis-affected people will access basic water services.	SO1: Provide timely multi-sectoral life-saving assistance to crisis affected people to reduce mortality and morbidity	47
1.79 million crisis-affected populations will access adequate, protected, and gender-sensitive sanitation services.	SO1: Provide timely multi-sectoral life-saving assistance to crisis affected people to reduce mortality and morbidity	28

Contribution to Cluster/Sector Objectives : The proposed activities will meet Strategic Objective 1 of the Sudan Multi-Year Humanitarian Response Plan 2022, "Provide timely multi-sectoral life-saving assistance to crisis-affected people to reduce mortality and morbidity". The SO1 activities will focus on "lifesaving assistance to vulnerable people Including IDPs, refugees, returnees and vulnerable residents". More precisely, it will follow the corresponding the three objectives set for the WASH sector under the 2022 HRP "crisis-affected population will have access to basic water services, access to adequate, protected, and gender-sensitive sanitation services, and access to hygiene promotion services, water quality, and environmental health interventions to address context-specific WASH needs of Sudan". TGH will build the capacity of the community to operate and maintain WASH facilities by strengthening and forming, training, and equipping new WASH committees as well. Indeed, the program will provide life-saving assistance to IPDs, host communities, and returnees of the Sirba locality in West Darfur state through WASH, intervention, and in coordinating with other partners such as SCI, CRS, IMC, WR to respond in health and nutrition program in the same locality. A coordinated response to the crisis-affected areas is also part of the strategy; TGH will coordinate its WASH response with all partners mentioned above working in the health and nutrition sectors and Concern in peacebuilding program in Sirba locality, targeting the same villages to provide a global and sustainable response to the needs of host communities, IDPs and returnees. To address the cross-cutting issues while providing WASH services, TGH will ensure girls' and women's security and safety through consulting or engaging the affected population in assessments, design, implementation, monitoring, and inclusion of women and girls.

Outcome 1

Provide timely WASH life-saving assistance to crisis-affected people to reduce mortality and morbidity.

Output 1.1**Description**

6,700 people affected by the conflict and drought gain access to clean water through the construction, and rehabilitation of water facilities.

Assumptions & Risks

- * The annual registration of TGH in Sudan is renewed
- * Local authorities continue to collaborate to allow humanitarian access and response in all project areas
- * Security conditions remain acceptable for national TGH staff in targeted localities and for international TGH staff to allow regular field visits to the area of intervention.
- * TGH receives all the necessary authorizations to continue their operations in West Darfur (project technical agreement) and hire the necessary staff on time (launching of the recruitment process before signature of the technical agreement).
- * Project beneficiaries and relevant target groups react positively to TGH interventions

Political and security aspects:

- * The politico-military situation is not excessively deteriorating, preventing the implementation of the project
- * Humanitarian workers are not targeted by attacks (kidnappings, car and office robberies)
- * Existing humanitarian capacities are not significantly diminished due to possible access limitations, travel permits, visas

Social aspects:

- * No resurgence of conflict that would affect the current social organization in the targeted areas
- * The social protests in the major cities (including Khartoum) due to the deterioration of the economic situation do not call into question the presence of TGH in the country

Economic aspects:

- * Lack of liquidity does not force TGH to suspend or delay certain activities
- * The growing fuel crisis in Khartoum and CD does not impact the operations of TGH and to any significant extent
- * Inflation in Sudan, although consequent, does not make the implementation of the project impossible

Sanitary aspects (specific COVID19):

- * The COVID19 pandemic and the resulting health situation, whether in West Darfur or Khartoum, does not reduce the operational capacities of TGH and does not prevent the TGH staff from implementing activities without encountering major health risks
- * The COVID19 pandemic and the resulting health situation in West Darfur and Khartoum does not prevent TGH from obtaining supplies and transferring the materials needed for the activities
- * TGH can implement field activities within the limits imposed by the measures taken by the Sudanese authorities (i.e. lockdown and/or containment measures, movement restrictions)

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	Number of new water sources systems constructed at the community level.					4
Means of Verification : Activity report, Procurement contracts, Pictures of Activity and Handover document.							
Indicator 1.1.2	WATER, SANITATION AND HYGIENE	Number of water points/hand pumps maintained and operated.					3
Means of Verification : Activity report, Procurement contracts, Pictures of Activity and Handover document.							
Indicator 1.1.3	WATER, SANITATION AND HYGIENE	Number of WASH committee members trained.	44	40			84
Means of Verification : Activity report, Procurement contracts, Pictures of Activity and Handover document.							
Indicator 1.1.4	WATER, SANITATION AND HYGIENE	Number of people who received Household water treatment chemical.	512	592	907	939	2,950
Means of Verification : Activity report, Water quality FU.							
Indicator 1.1.5	WATER, SANITATION AND HYGIENE	Number of water quality tests					180
Means of Verification : Activity report, Water quality FU.							
Indicator 1.1.6	WATER, SANITATION AND HYGIENE	[Outcome]: % of targeted population that have access to basic water services					85
Means of Verification : Activity report, water quality follow up.							
Indicator 1.1.7	WATER, SANITATION AND HYGIENE	Number of hand pump upgrade into Mini water Yard					1
Means of Verification : Activity report, Procurement contracts, Pictures of Activity and Handover document.							

Activities

Activity 1.1.1

Standard Activity : Drill and install new hand pumps

NOT IMPLEMENTED: Drilling of 2 boreholes equipped with hand pumps including installation of the full set of the hand pump – 1 Shafo-khalo and 1 Gerena.

In Shafo-khalo and Gerena villages of Sirba Locality, the inter-agency assessment conducted on the 16th of February 2022, identified that no available water source was found in these two villages. As a result, the IDP, returnees, and the host community are forced to use unsafe water far from their village average 2.5km distance that puts women and girls at risk of GBV such as harassment.

Therefore, to address this long lasting problem, TGH planned to drill two boreholes equipped with hand pumps : 1 in Shafo-khalo and 1 in Gerena. These two borehole drillings will include geophysical survey, drilling based on the survey result, water quality test, installation of the well-casing, pumping test (in order to ensure a yield of 2m³/h of water), installation of the full set of hand pump, fencing to prevent the incursion of the animal. The distribution platform will be connected to a drainage channel to evacuate the wastewater to a trough set outside of the fencing, then the remaining water eliminated in a soakaway pit (at least 10m from the drilling). TGH will make sure that the drilling are positioned away from any source of fecal contamination (no latrine pit, run off of waste water within 30m)

After the construction, the TGH team will disinfect the borehole before commissioning. Every month, water quality tests will be conducted by the TGH team, and the operators of the water point, hired by TGH, will report the population frequentation." After the completion of the borehole construction and installation of hand pump, 2,950 (590 HH) beneficiaries (1,445 males and 1,505 females) After the completion of the activity, 2,950 beneficiaries (1445 males and 1,505 females from 590 HH) will benefit from 2 hand pumps with 7.5L/P/D increasing the availability of protected water from 0 to 7.5L/P/D (reaching SPHERE standard for emergency water quantity).

Activity 1.1.2

Standard Activity : Rehabilitate hand pump

Rehabilitate existing 3 Hand pumps -Water points. 2 HarazTiman and 1 Manama)

Inter-Sector Rapid Needs Assessment in Sirba -West Darfur that was conducted on 16th February 2022 has identified three non-functional hand pumps, 2 in Haraz Timan and 1 in Manama village that can support the community, with a focus on ensuring the availability of clean water at the community where the population was affected by the conflict and drought. These 3 hand pumps, fitted in 3 hand dug well, have been identified as non-functional because of a lack of maintenance that has led to worn-out and broken parts. TGH will replace and rehabilitate the three hand pumps and train the WUCs to manage the water system (see activity 1.1.3 below). TGH will disinfect the borehole and hand pumps after rehabilitation before resuming the provision of water to the community. In addition, monthly quality monitoring will be conducted.

After the rehabilitation, the three-hand pumps will benefit 3,750 individuals (2,825 in Haraz Timan and 925 in Manama) After the completion of the activity, 2,950 beneficiaries (1,445 males and 1,505 females from 590 HH) will benefit from 2 hand pumps with 7.5L/P/D increasing the availability of protected water from 0 to 7.5L/P/D (reaching SPHERE standard for emergency water quantity).

Activity 1.1.3

Standard Activity : Not Selected

NOT IMPLEMENTED: Build capacities, provide training, to enhance WASH of affected communities

Establish and strengthen 5 WUC at the community level, and train and equip them on operation and maintenance of water systems.

The Inter-agency assessment highlighted that frequent breakdowns have been observed because of misuse and lack of maintenance of the water points. There were no active WUC during the assessment. Thus, access to basic water supply in Sirba locality remains very limited and the water points are not functioning. To mitigate these challenges, TGH will create WUC of 12 members for water point management at the community level for the new construed and rehabilitated water points.

At the beginning of the project, TGH team will meet the community leaders to set up all together an activity planning with a clear view of every step – water point building or rehabilitation, WUC creation and training, water point running, handover to the population and fees collection. According to the kind of water supply, the community size and resources, a money collection strategy can be set up with the community and TGH engineers.

Awareness campaigns will put emphasis on the following points:

- Drinking safe water to protect people against water borne diseases and diarrhea (this is especially important for vulnerable people such as young children, sick people, elders, pregnant and lactating women)
- Paying for safe water is less expensive than paying for a doctor.
- Paying for water is the only way of having a sustainable safe water supply for the whole community.
- Safe water is healthy only if carried and stocked in clean recipients: cleaning jerrycans regularly helps the community to be healthy.
- A community with sustainable water supply is more resistant to face crisis.

TGH will train WUC on technical, financial, and communication topics on each water point rehabilitated. The training is composed of two main parts, one technical to allow operation and maintenance of the water points and one financial to initiate and manage a cost recovery system for the water point maintenance expenses.

The technical part is itself divided into two parts: one theoretical, another one practical. The theoretical part will focus on basic maintenance operations :

- Presentation of the main spare parts that compose a water yard and how it functions
- Most regular types of breakdown
- Operation and maintenance of the hand pump
- Reparation techniques.

The financial part will explain how to run a cost recovery system by determining the right price of the water, organizing the committee to collect money at the distribution point, and to give the committee clues and ways to keep and save money once collected. In total 5 new Water Users Committees of 12 members, or a total of 60 persons, will be trained on operation, maintenance, and cost recovery in Sirba locality.

In the same time, WUC training can take place involving water operator, WES and TGH. This training will focus on accountancy and cost recovery strategy, including how to fill an account book, anticipate fuel and spare parts purchase, monthly accountancy, collecting fees.

Local authorities will be involved in fees collection to solve problems, and will be trained on basic water point management.

According to TGH experience, it is crucial to include women into the WUC as far as women are the main users of the water points. Enrolling women in the water point management helps acceptance, cost recovery, decision making and protection.

Monthly follow-up and evaluations of the WUC will be ensured by TGH staff and management advice and recommendations will be given to WUC during quarterly meetings during which will be invited WES, communities' representatives, and local authorities. Those meetings will be the opportunity for the WUCs to exchange their management experiences and challenges on the financial management aspect towards the community.

Activity 1.1.4

Standard Activity : Not Selected

Distribute water quality supplies (at point of use ☐ Aquatabs, or Pur)

Provision of flocculant and disinfectant water treatment chemicals (Shafo khalo and Gerena) - 0.33gm chlorine tab 1 carton has 1,000 strips.

The inter-agency assessment conducted on the 16th of February 2022 in Sirba locality Shafo khalo and Gerena villages reportedly that no protected water source was available., Consequently people collect water for cooking, drinking, bathing from the wadi, a distance away from the settlement (approximately 2.5km). As an immediate intervention, TGH will provide Household Water treatment Consumables for surface water users to 590HH for 3 months (2,950 individuals including 1,445 males and 1,505 females) IDPs and conflict-affected communities in Sirba locality Shafo khalo and Gerena villages. Demonstration of use will be organized at the distribution points.

In addition, TGH field-based staff will visit regularly (ad hoc and as needed) at the household level to monitor the utilization of the HH WTC and provide feedback on the use at HH WTC.

The choice of the water treatment chemical is "Aquatabs" (as per WASH national cluster recommendation) with 0.33gm sodium dichloroisocyanurate (NaDCC) and 0.20gm chlorine available per tab. One tab produces 5 liters of disinfected water from turbid and contaminated water.

Each household (averagely 5 persons/HH) will receive of 72 strips of 10 tabs to produce 40 liters/D/HH during 3 months. The total HH WTC needed for Shafo khalo and Gerena villages in Sirba locality 4,312 carton chlorine tabs each carton has 1,000 strips and one strip has 10 tablets. Instead of water trucking, (which would provide 7.5 litres/p/d according to the WASH cluster guidelines), TGH has proposed HH WTC in order to produce 40 liters/HH. This will meet the minimum SPHERE emergency safe water supply (7.5 litres/p/d).

Activity 1.1.5

Standard Activity : Operate and maintain water sources (includes water quality treatment and monitoring)

NOT IMPLEMENTED: Water quality monitoring

Water quality monitoring and provision of 70% HTH Chlorine, water quality test kits, and reagents for bulk chlorination.

TGH will conduct regular monthly bacteriological tests (fecal coliform detection) using a Pota lab kit at all water points and household levels, using a simple random sampling method. If fecal contamination is observed, adequate measures will be taken (disinfection of the water points, jerry can cleaning campaign, and hygiene education mass awareness) in collaboration with the WES. The operators of the chlorinated systems will conduct daily water treatment (chlorination) using appropriate tools. They will also receive water quality and quantity monitoring training from TGH and WES. This activity will be implemented in Sirba locality where water points are rehabilitated and at the household level.

TGH will procure and provide 2 drums of 70% HTH (45kg/drum) for chlorination of the existing water schemes. TGH in collaboration with the WES water experts will disinfect the 5 rehabilitated hand pumps with 1% chlorine solution (shock chlorination) and rinse the water schemes before commissioning. The 70% HTH will also be prepositioned and used for future water schemes disinfection. In addition, one pool tester and one pack DPD1 reagent to measure the FRC will be provided. TGH will collect 5 samples from the rehabilitated and constructed water schemes and 10 samples from households each month. As such 120 samples will collect and analyze during the project period. TGH will conduct orientation training on how to prepare and use the Chlorine solution and Pool tester to measure the FRC.

Activity 1.1.6

Standard Activity : Not Selected

Upgrade of a hand pump into a mini water yard in Haraz Timan village of Sirba Locality

TGH will upgrade one hand pump into a mini water yard in Haraz Timan village (approximately 565 households and 2,825 individuals) to increase access to safe water. Haraz Timan community has today limited access to drinking water as the two hand pumps exist in this village are broken. TGH will have to choose between those 2 potential sites to upgrade one hand-pump into mini water yard. This decision will be taken in concertation with community and crosschecked following the results of pumping tests.

Afterwards, hand pumps' material will be removed and replaced by a submersible pump powered by solar power and back up with electric generator, pipeline connected to an elevated water tank (27m³). Distribution point will be set up with 1 tap stand of 16 taps, a drainage system and an animal trough. The distribution point will be protected by fences preventing animals from drinking directly from the source and this will increase hygiene around the water point. Community participation in the construction will be ensured through initial consultations with sheikhs, the collection of local materials and participation to works such as pipeline digging with TGH staff. By encouraging team spirit between the community and TGH staff, a strong ownership of the new facility will be developed while ensuring a cost-effective intervention.

The filling of the water tank is estimated to 8 hours so one filling of the 27m³ water tank would be done each day increasing the safe water production up to 27,000 liters per day. With the two hand pumps planned to be rehabilitated and to drill one in the same village the daily water production will estimate 42,000liters. . This will allow Haraz Timan community to increase their daily water availability up to 14.86 liters per person per day .

In total, the upgrade will provide 14.86L/p/day of safe water to 2825 individuals in Haraz Timan villages.

Activity 1.1.7

Standard Activity : Not Selected

Two Animal Water Trough construction in Shafokhalo & Gerena

An animal trough is often a greatly desired accompaniment to TGH well. In fact, animal troughs are typically a necessary add-on for wells that are drilled in arid and semi-arid climates, where large herds of cattle, goats and other livestock are kept by the local population. Animal troughs are receptacles where water is collected and stored, and from which domestic animals can drink. However, this two villages don't have any water source and on the other hand, a number of livestock observed in the village. During drought season this two village travel up to 5km to feed their livestock's.

Therefore, TGH planned to construct two animals water trough, one in each village. Besides, TGH will construct two water storage ponds, one in each village and collect the run-off water during the rainy season to feed the cattle's during dry season. Each water storage pond connect with the animal water trough and fill the trough through gravity with the connected pipeline. As such, TGH will ensure that the constructed animal water trough can collect/harvest the run-off water systematically and feed the cattle's during the dry season as well.

Activity 1.1.8

Standard Activity : Drill and install new hand pumps

Drilling of 4 boreholes equipped with hand pumps including installation of the full set of the hand pump – 1 Shafo-khalo, 1 Haraz Timan, 1 Manama Damra and 1 Gerena.

In Shafo-khalo, and Gerena villages of Sirba Locality, the inter-agency assessment conducted on the 16th of February 2022, identified that no available water source was found in these two villages and very limited water availability in Haraz Timan and Manama Damra villages. As a result, the IDP, returnees, and the host community are forced to use unsafe water far from their village average 2.5km distance that puts women and girls at risk of GBV such as harassment.

Therefore, to address this long lasting problem, TGH planned to drill 4 boreholes equipped with hand pumps : 1 in Shafo-khalo, 1 Haraz Timan, 1 Manama Damra and 1 in Gerena. These four borehole drillings will include geophysical survey, drilling based on the survey result, water quality test, installation of the well-casing, pumping test (in order to ensure a yield of 2m³/h of water), installation of the full set of hand pump, fencing to prevent the incursion of the animal. The distribution platform will be connected to a drainage channel to evacuate the wastewater to a trough set outside of the fencing, then the remaining water eliminated in a soakaway pit (at least 10m from the drilling). TGH will make sure that the drilling are positioned away from any source of fecal contamination (no latrine pit, run off of waste water within 30m)

After the construction, the TGH team will disinfect the borehole before commissioning. Every month, water quality tests will be conducted by the TGH team, and the operators of the water point, hired by TGH, will report the population frequentation.” After the completion of the borehole construction and installation of hand pump, 6700(1340 HH) beneficiaries (3283 males and 3417 females) After the completion of the activity, 6700(1340 HH) beneficiaries (3283 males and 3417 females)) will benefit from 4 hand pumps with 7.5L/P/D increasing the availability of protected water from 0 to 7.5L/P/D (reaching SPHERE standard for emergency water quantity).

Activity 1.1.9

Standard Activity : Not Selected

Build capacities, provide training, to enhance WASH of affected communities

Establish and strengthen 7 WUC at the community level, and train and equip them on operation and maintenance of water systems.

The Inter-agency assessment highlighted that frequent breakdowns have been observed because of misuse and lack of maintenance of the water points. There were no active WUC during the assessment. Thus, access to basic water supply in Sirba locality remains very limited and the water points are not functioning. To mitigate these challenges, TGH will create WUC of 12 members for water point management at the community level for the new construed and rehabilitated water points.

At the beginning of the project, TGH team will meet the community leaders to set up all together an activity planning with a clear view of every step – water point building or rehabilitation, WUC creation and training, water point running, handover to the population and fees collection. According to the kind of water supply, the community size and resources, a money collection strategy can be set up with the community and TGH engineers.

Awareness campaigns will put emphasis on the following points:

- Drinking safe water to protect people against water borne diseases and diarrhea (this is especially important for vulnerable people such as young children, sick people, elders, pregnant and lactating women)
- Paying for safe water is less expensive than paying for a doctor.
- Paying for water is the only way of having a sustainable safe water supply for the whole community.
- Safe water is healthy only if carried and stocked in clean recipients: cleaning jerrycans regularly helps the community to be healthy.
- A community with sustainable water supply is more resistant to face crisis.

TGH will train WUC on technical, financial, and communication topics on each water point rehabilitated. The training is composed of two main parts, one technical to allow operation and maintenance of the water points and one financial to initiate and manage a cost recovery system for the water point maintenance expenses.

The technical part is itself divided into two parts: one theoretical, another one practical. The theoretical part will focus on basic maintenance operations :

- Presentation of the main spare parts that compose a water yard and how it functions
- Most regular types of breakdown
- Operation and maintenance of the hand pump
- Reparation techniques.

The financial part will explain how to run a cost recovery system by determining the right price of the water, organizing the committee to collect money at the distribution point, and to give the committee clues and ways to keep and save money once collected. In total 7 new Water Users Committees of 12 members, or a total of 84 persons, will be trained on operation, maintenance, and cost recovery in Sirba locality.

In the same time, WUC training can take place involving water operator, WES and TGH. This training will focus on accountancy and cost recovery strategy, including how to fill an account book, anticipate fuel and spare parts purchase, monthly accountancy, collecting fees.

Local authorities will be involved in fees collection to solve problems, and will be trained on basic water point management.

According to TGH experience, it is crucial to include women into the WUC as far as women are the main users of the water points. Enrolling women in the water point management helps acceptance, cost recovery, decision making and protection.

Monthly follow-up and evaluations of the WUC will be ensured by TGH staff and management advice and recommendations will be given to WUC during quarterly meetings during which will be invited WES, communities' representatives, and local authorities. Those meetings will be the opportunity for the WUCs to exchange their management experiences and challenges on the financial management aspect towards the community.

Activity 1.1.10

Standard Activity : Operate and maintain water sources (includes water quality treatment and monitoring)

Water quality monitoring

Water quality monitoring and provision of 70% HTH Chlorine, water quality test kits, and reagents for bulk chlorination.

TGH will conduct regular monthly bacteriological tests (fecal coliform detection) using a Pota lab kit at all water points and household levels, using a simple random sampling method. If fecal contamination is observed, adequate measures will be taken (disinfection of the water points, jerry can cleaning campaign, and hygiene education mass awareness) in collaboration with the WES. The operators of the chlorinated systems will conduct daily water treatment (chlorination) using appropriate tools. They will also receive water quality and quantity monitoring training from TGH and WES. This activity will be implemented in Sirba locality where water points are rehabilitated and at the household level.

TGH will procure and provide 2 drums of 70% HTH (45kg/drum) for chlorination of the existing water schemes. TGH in collaboration with the WES water experts will disinfect the 5 rehabilitated hand pumps with 1% chlorine solution (shock chlorination) and rinse the water schemes before commissioning. The 70% HTH will also be prepositioned and used for future water schemes disinfection. In addition, one pool tester and one pack DPD1 reagent to measure the FRC will be provided. TGH will collect 8 samples from the rehabilitated and constructed water schemes and 10 samples from households each month. As such 180 samples will collect and analyze during the project period. TGH will conduct orientation training on how to prepare and use the Chlorine solution and Pool tester to measure the FRC.

Output 1.2

Description

6,700 crisis-affected populations will access adequate, protected, and gender-sensitive sanitation services.

Assumptions & Risks

- * The annual registration of TGH in Sudan is renewed
- * Local authorities continue to collaborate to allow humanitarian access and response in all project areas
- * Security conditions remain acceptable for national TGH staff in targeted localities and for international TGH staff to allow regular field visits to the area of intervention.
- * TGH receives all the necessary authorizations to continue their operations in West Darfur (project technical agreement) and hire the necessary staff on time (launching of the recruitment process before signature of the technical agreement).
- * Project beneficiaries and relevant target groups react positively to TGH interventions

Political and security aspects:

- * The politico-military situation is not excessively deteriorating, preventing the implementation of the project
- * Humanitarian workers are not targeted by attacks (kidnappings, car and office robberies)
- * Existing humanitarian capacities are not significantly diminished due to possible access limitations, travel permits, visas

Social aspects:

- * No resurgence of conflict that would affect the current social organization in the targeted areas
- * The social protests in the major cities (including Khartoum) due to the deterioration of the economic situation do not call into question the presence of TGH in the country

Economic aspects:

- * Lack of liquidity does not force TGH to suspend or delay certain activities
- * The growing fuel crisis in Khartoum and CD does not impact the operations of TGH and to any significant extent
- * Inflation in Sudan, although consequent, does not make the implementation of the project impossible

Sanitary aspects (specific COVID19):

- * The COVID19 pandemic and the resulting health situation, whether in West Darfur or Khartoum, does not reduce the operational capacities of TGH and does not prevent the TGH staff from implementing activities without encountering major health risks
- * The COVID19 pandemic and the resulting health situation in West Darfur and Khartoum does not prevent TGH from obtaining supplies and transferring the materials needed for the activities
- * TGH can implement field activities within the limits imposed by the measures taken by the Sudanese authorities (i.e. lockdown and/or containment measures, movement restrictions)

Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	WATER, SANITATION AND HYGIENE	Number of people having access to secured and gender appropriate sanitation services	1,162	1,345	2,061	2,132	6,700
Means of Verification : Monthly progress report, free open defecation villages reported, Monitoring reports, Activity reports, pictures of activities.							
Indicator 1.2.2	WATER, SANITATION AND HYGIENE	Number of certified ODF villages.					5
Means of Verification : Progress report on free open defecation villages, celebration report of certified ODF villages in 5 communities, Monitoring reports, Activity reports, pictures of activities.							
Indicator 1.2.3	WATER, SANITATION AND HYGIENE	Number of people that went through WASH-related training.	20	15			35
Means of Verification : Training report on CLTS, pictures of activities.							
Indicator 1.2.4	WATER, SANITATION AND HYGIENE	Number of hand washing facilities constructed					150
Means of Verification : Monitoring reports, activity reports, pictures of activities, beneficiary registration list.							
Indicator 1.2.5	WATER, SANITATION AND HYGIENE	[Outcome]: % of targeted population that have access to minimum standard sanitation facilities					100
Means of Verification : Activity reports, progress reports, pictures of the activities, monthly reports.							

Activities
Activity 1.2.1
Standard Activity : Not Selected
<p>Facilitate household sanitation improvement through CLTS for household latrine construction/handwashing facilities at 5 villages (Karaz-Tamin, Haraz-Timan, Manama, Shafo-khalo, and Gerena)</p> <p>Following the inter-agency assessment conducted on the 16th of February 2022, the five targeted villages were identified as facing huge gap in term of excreta disposal: communities have no access to latrine and open defecation is rampant in all villages. As such, TGH planned to implement a Community-Lead Total Sanitation (CLTS) approach within the targeted five villages. The CLTS approach will follow the following 7 steps including Community prioritization; Locality-level Institutional Triggering; Training of community leaders and Hygiene promoters on CLTS; Community Pre-Triggering; Triggering and preparation of community action plan (target community by NGO only); Post-triggering (target community by NGO only); and Monitoring, Evaluation, Verification and Scale-up (target community by NGO only).</p> <p>Following the above-mentioned steps, TGH will conduct the below sub-activities.</p> <ul style="list-style-type: none"> - Conduct a Training of Trainers (ToT) for 35 participants from the local government and partners on Community-Led Total Sanitation (CLTS) approach, to raise their knowledge and skills on CLTS methodology to ending open defecation in targeted communities, and set the standards on appropriate access to sanitary facilities (latrines) and hygiene practices. - Information collection and community consultation, through the participation of diverse (age, ethnic, sex, socio-economic background) groups, to support Community-Led Total Sanitation (CLTS) interventions in 5 villages, to empower women, girls, boys, and men to build and use latrines and living in Open Defecation Free (ODF) communities. - Rehabilitation/construction of gender-segregated and disabled-friendly sanitation facilities in 3 public places. - Conduct hygiene promotion interventions in 5 communities, schools, and health centers with a focus on handwashing with soap at critical times including menstrual hygiene management in schools.
Activity 1.2.2
Standard Activity : Construction of hand washing facilities in communal set ups (communal toilets in camps, schools, markets, public places and health facilities)
<p>Poor WASH sanitation conditions expose both IDPs and host communities to water-related diseases risks. In such an emergency context, the construction of handwashing facilities is necessary to limit the risk of these diseases, but also to limit the spread of COVID-19. TGH will install handwashing facilities in 10 community facilities in IDPs gathering points (toilets in camps, schools, public gathering places, and health facilities). TGH will also provide 600 pieces of soap for each site, in line with the provision of handwashing facilities. Since TGH planned to install the handwashing facilities in communal places such as schools, health facilities and gathering points, soap will be provided for the facilities and the committees who will manage them. The hand washing sites will be equipped with proper drainage and absorption pits for wastewater disposal.</p>
Output 1.3
Description
6,700 people access to hygiene promotion services, water quality, and environmental health interventions
Assumptions & Risks
<ul style="list-style-type: none"> * The annual registration of TGH in Sudan is renewed * Local authorities continue to collaborate to allow humanitarian access and response in all project areas * Security conditions remain acceptable for national TGH staff in targeted localities and for international TGH staff to allow regular field visits to the area of intervention. * TGH receives all the necessary authorizations to continue their operations in West Darfur (project technical agreement) and hire the necessary staff on time (launching of the recruitment process before signature of the technical agreement). * Project beneficiaries and relevant target groups react positively to TGH interventions <p>Political and security aspects:</p> <ul style="list-style-type: none"> * The politico-military situation is not excessively deteriorating, preventing the implementation of the project * Humanitarian workers are not targeted by attacks (kidnappings, car and office robberies) * Existing humanitarian capacities are not significantly diminished due to possible access limitations, travel permits, visas <p>Social aspects:</p> <ul style="list-style-type: none"> * No resurgence of conflict that would affect the current social organization in the targeted areas * The social protests in the major cities (including Khartoum) due to the deterioration of the economic situation do not call into question the presence of TGH in the country <p>Economic aspects:</p> <ul style="list-style-type: none"> * Lack of liquidity does not force TGH to suspend or delay certain activities * The growing fuel crisis in Khartoum and in CD does not impact the operations of TGH and to any significant extent * Inflation in Sudan, although consequent, does not make the implementation of the project impossible <p>Sanitary aspects (specific COVID19):</p> <ul style="list-style-type: none"> * The COVID19 pandemic and the resulting health situation, whether in West Darfur or in Khartoum, does not reduce the operational capacities of TGH and does not prevent the TGH staff from implementing activities without encountering major health risks * The COVID19 pandemic and the resulting health situation in West Darfur and in Khartoum does not prevent TGH from obtaining supplies and transferring the materials needed for the activities * TGH have the capacity to implement field activities within the limits imposed by the measures taken by the Sudanese authorities (i.e. lockdown and/or containment measures, movement restrictions)
Indicators

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.3.1	WATER, SANITATION AND HYGIENE	Number of people receiving direct hygiene promotion (excluding mass media campaigns and without double-counting).	3,417	3,283			6,700
Means of Verification : Monitoring reports, Activity reports, pictures of activities.							
Indicator 1.3.2	WATER, SANITATION AND HYGIENE	Number of women receiving sanitary materials		1,000			1,000
Means of Verification : Monitoring reports, Activity reports, pictures of activities, and beneficiary registration list.							
Indicator 1.3.3	WATER, SANITATION AND HYGIENE	Number of hand washing facilities constructed					10
Means of Verification : Monitoring reports, activity reports, pictures of activities, beneficiary registration lists.							
Indicator 1.3.4	WATER, SANITATION AND HYGIENE	[Outcome]: % of targeted population that have access to minimum hygiene items (soap, Jerrycan, hygiene kits...)					75
Means of Verification : Distribution list, activity reports, monthly reports.							
Activities							
Activity 1.3.1							
Standard Activity : Not Selected							
<p>District hygiene and sanitation advocacy, sensitization training of key influential people per village at community and school in Sirba (Karaz tamin, HarazTiman, Manama, Shafo khalo, and Gerena)</p> <p>To improve hygiene knowledge and practices and implement community-wide hygiene behavior change in Sirba locality, particularly Karaz tamin, HarazTiman, Manama, Shafo khalo, and Gerena, TGH will implement clear, community coordinated, and widespread hygiene promotion and education activities.</p> <p>TGH will implement hygiene promotion activities in Sirba locality within the community through a network coordinated with the community leaders and will train 8 hygiene key promoters, who will operate as volunteers to share hygiene messaging. They will disseminate hygiene promotion messages through the organization of hygiene promotion sessions on key hygiene topics, using various methodologies including house to house visit, focus group discussion, child to child approach at schools, mass awareness, Information Education communication materials (IEC), and participatory hygiene and sanitation transformation (PHAST).</p> <p>TGH will conduct monthly follow-ups by a dedicated Hygiene Promoter Officer (TGH staff), as well as quarterly review meetings gathering all hygiene key promoters for reflective practice sessions. During those workshops, HKPs will exchange on their practices, challenges, share their progress reports and review the latest health data related to water-borne disease cases.</p> <p>8 hygiene key promoters will receive training on the following topics:</p> <ul style="list-style-type: none"> - Menstrual hygiene management - Facilitation skill - Garbage collection mobilization - Latrine construction promotion - Hygiene at water points and safe water management - Hygiene in school - Basic hygiene knowledge review <p>TGH will use the Participatory Hygiene and Sanitation Transformation approach aiming at improving hygiene behaviors to reduce diarrheal diseases and encouraging effective management of water and sanitation services. 512 awareness sessions (64 sessions per volunteer/KHP) for 8 WASH volunteers/HKPs focusing on:</p> <ul style="list-style-type: none"> - The linkage between WASH practices and health - Prevention of diarrheal and improvement of hygiene practices - Promotion of safe drinking water management - Proper handwashing - Latrine use <p>TGH will install handwashing facilities in 10 community facilities in IDPs gathering points (toilets in camps, schools, public gathering places, and health facilities). TGH will also provide 200 pieces of soap for each site, in line with the provision of handwashing facilities hygiene awareness activities will reach a total of 6,700 people without double counting through the house to house visit and FGD. HKPs will continue organizing HP sessions in each quarter on various topics such as environmental sanitation; food safety; handwashing with soap; jerry-can cleaning; latrine use; malaria prevention; personal hygiene and water safety. In particular, there will be training on COVID-19 epidemic evolution in all the TGH hygiene awareness sessions. Community mobilizers will conduct COVID-19 awareness sessions for communities of Sirba locality. Messages will be spread among the communities to make people aware of COVID-19 risks and encourage them to apply measures to limit the spread of the virus. The focus areas of the COVID-19 awareness session will be on COVID-19 symptoms, as well as how COVID-19 is spread and its prevention. The trained HKPs will also conduct awareness sessions on the importance of handwashing, physical and social distance, avoiding touching eyes, nose, and mouth, proper use of mask-wearing is gathering pace, and using hand sanitizer will be part of the awareness sessions.</p>							
Activity 1.3.2							
Standard Activity : Not Selected							

NOT IMPLEMENTED: Provision of Menstrual Hygiene Materials.

Distribution of Hygiene kits (200gm Laundry soap, 250gm bathing soap, 20L jerrican, reusable sanitary pad, and solar hand torch light) for most vulnerable IDPs group (Female-headed HH, disabled persons, Adolescent women, etc)

TGH will prioritize response for women and girls, who represent a highly vulnerable part of the population in an emergency context. TGH will provide 500 hygiene kits to 500 IDPs women and girls to improve their hygiene conditions. The kits will be procured from Khartoum/EI Geneina. One dignity kit contains 6 pieces of reusable sanitary pad, 3 pieces of 200g laundry soap, 3 pieces of 250g bathing soap, 20L jerrican, and one solar hand torch (in full compliance with WASH sector standard). TGH believes that a sustainable approach for hygiene kits like the provision of sanitary pads which can be reused is preferred. As such, TGH proposes to distribute reusable sanitary pads to ensure proper menstrual hygiene management. TGH will use the female trained Hygiene Key Promoters to provide individual hygiene consultation education on menstrual hygiene management during distribution. The hygiene kits distribution will be conducted in one of the community facilities like a school and health center by female staff only to give privacy for the women beneficiaries to come to the distribution place, receive the dignity kits, and attend the menstrual hygiene education session without fear. TGH will work in collaboration with the government's water and health offices and consult with the IDPs on the selection of beneficiaries.

Activity 1.3.3

Standard Activity : Not Selected

Hygiene promotion intervention through NNGO - Al Massar.

The hygiene promotion intervention will be strengthened by implementing appropriate communication strategies, including the production of 200 standard IEC materials (posters and banners), mass sensitization on specific topics (including awareness at event days such as October 15, Global hand washing Day), and small group discussions that will be addressed to identify hygiene and sanitation gaps. This strengthening the link with installed WASH hardware for optimal use of infrastructure and improved knowledge and safe hygiene practices.

Al Massar will target in Sirba locality (Shafo khalo and Gerenavillages) the two villages targeted by the project.

Al Massar will use Participatory Hygiene and Sanitation Transformation approach aiming at improving hygiene behaviors to reduce diarrheal diseases and encouraging effective management of water and sanitation services. 384 awareness sessions (64 sessions per volunteer/KHP) for 06 WASH volunteers/HKPs focusing on:

- The linkage between WASH practices and health,
- Prevention of diarrheal and improvement of hygiene practices.
- Promotion of safe drinking water management,
- Proper hand washing
- Latrine use

The messages will be disseminated through house to house visits, hygiene messages mass campaign using loudspeakers, posters and leaflets, and sensitization sessions in gathering points, water distribution points, and during WASH NFI kits distribution.

Al Massar will promote self- household water treatment- filtering and boiling for drinking water in absences of safe water and HH WTC. The hygiene awareness activities will reach a total of 2950 community beneficiaries in the two villages (Shafo khalo and Gerena villages)

Al Massar will focus activities on COVID-19 epidemic evolution. Community mobilizers will conduct COVID-19 awareness sessions for communities living in Sirba locality. Messages will be spread among the communities to make people aware of COVID-19 risks and encourage them to apply measures to limit the spread of the virus. The focus areas of the COVID-19 awareness session will be on COVID-19 symptoms, and how COVID-19 is spread and its prevention. The trained HKPs will also conduct awareness sessions on importance of handwashing, physical and social distance, avoid touching eyes, nose and mouth, proper use of mask wearing in gathering places and using hand sanitizer.

Activity 1.3.4

Standard Activity : Provision of Menstrual Hygiene Materials

Provision of Menstrual Hygiene Materials.

Distribution of Hygiene kits (200gm Laundry soap, 250gm bathing soap, 20L jerrican, reusable sanitary pad, and solar hand torch light) for most vulnerable IDPs group (Female-headed HH, disabled persons, Adolescent women, etc)

TGH will prioritize response for women and girls, who represent a highly vulnerable part of the population in an emergency context. TGH will provide 1000 hygiene kits to 1000 IDPs women and girls to improve their hygiene conditions. The kits will be procured from Khartoum/EI Geneina. One dignity kit contains 6 pieces of reusable sanitary pad, 3 pieces of 200g laundry soap, 3 pieces of 250g bathing soap, 20L jerrican, and one solar hand torch (in full compliance with WASH sector standard). TGH believes that a sustainable approach for hygiene kits like the provision of sanitary pads which can be reused is preferred. As such, TGH proposes to distribute reusable sanitary pads to ensure proper menstrual hygiene management. TGH will use the female trained Hygiene Key Promoters to provide individual hygiene consultation education on menstrual hygiene management during distribution. The hygiene kits distribution will be conducted in one of the community facilities like a school and health center by female staff only to give privacy for the women beneficiaries to come to the distribution place, receive the dignity kits, and attend the menstrual hygiene education session without fear. TGH will work in collaboration with the government's water and health offices and consult with the IDPs on the selection of beneficiaries.

Additional Targets :

EMERGENCY SHELTER AND NON-FOOD ITEMS							
Cluster objectives		Strategic Response Plan (SRP) objectives		Percentage of activities			
Enable crisis-affected populations to access adequate4 shelter solutions that provide protection, safety, security, and space to live in a dignified manner		SO2: Improve vulnerable people's access to livelihoods and life-sustaining basic services		100			
Contribution to Cluster/Sector Objectives : Through the distribution of 3,200 partial or full emergency shelters to the crisis-affected populations in Kereneik town, the project will improve their access to adequate shelters and will contribute to improve the access of the most vulnerable to life-sustaining basic services.							
Outcome 1							
Access to emergency shelters to crisis-affected populations is improved in Kereneik town.							
Output 1.1							
Description							
The project will provide partial or full emergency shelter to 3,200 households in Kereneik town. The beneficiaries will be selected and verified based on clear and comprehensive vulnerability criteria. A feedback, complaint, and response mechanism (FCRM) will be implemented all along the project and a Post Distribution Monitoring will be carried out 1 month after the distribution. TGH will also ensure that activities minimize the risk of exposure to COVID-19, following WHO guidelines for the implementation of the activities and will conduct awareness sessions concerning COVID-19 mitigation measures.							
Assumptions & Risks							
<ul style="list-style-type: none">* The annual registration of TGH in Sudan is renewed* Local authorities continue to collaborate to allow humanitarian access and response in all project areas* Security conditions remain acceptable for national TGH staff in targeted localities and for international TGH staff to allow regular field visits to the area of intervention.* TGH receives all the necessary authorizations to continue their operations in West Darfur (project technical agreement) and hire the necessary staff on time (launching of the recruitment process before signature of the technical agreement).* Project beneficiaries and relevant target groups react positively to TGH interventions							
Political and security aspects: <ul style="list-style-type: none">* The politico-military situation is not excessively deteriorating, preventing the implementation of the project* Humanitarian workers are not targeted by attacks (kidnappings, car and office robberies)* Existing humanitarian capacities are not significantly diminished due to possible access limitations, travel permits, visas,...							
Social aspects: <ul style="list-style-type: none">* No resurgence of conflict that would affect the current social organization in the targeted areas* The social protests in the major cities (including Khartoum) due to the deterioration of the economic situation do not call into question the presence of TGH in the country							
Economic aspects: <ul style="list-style-type: none">* Lack of liquidity does not force TGH to suspend or delay certain activities* The growing fuel crisis in Khartoum and in CD does not impact the operations of TGH and to any significant extent* Inflation in Sudan, although consequent, does not make the implementation of the project impossible							
Sanitary aspects (specific COVID19): <ul style="list-style-type: none">* The COVID19 pandemic and the resulting health situation, whether in West Darfur or in Khartoum, does not reduce the operational capacities of TGH and does not prevent the TGH staff from implementing activities without encountering major health risks* The COVID19 pandemic and the resulting health situation in West Darfur and in Khartoum does not prevent TGH from obtaining supplies and transferring the materials needed for the activities* TGH have the capacity to implement field activities within the limits imposed by the measures taken by the Sudanese authorities (i.e. lockdown and/or containment measures, movement restrictions)							
Indicators							
			End cycle beneficiaries				End cycle
Code	Cluster	Indicator	Men	Women	Boys	Girls	Target
Indicator 1.1.1	EMERGENCY SHELTER AND NON-FOOD ITEMS	Number of households supported with emergency shelters with at least one person with disability (PWD).					64
Means of Verification : Distribution list.							
Indicator 1.1.2	EMERGENCY SHELTER AND NON-FOOD ITEMS	[Outcome]: % of targeted population who have access to an emergency shelter					80
Means of Verification : Distribution list.							
Indicator 1.1.3	EMERGENCY SHELTER AND NON-FOOD ITEMS	Number of households who benefited from emergency shelter.					6,200
Means of Verification : Distribution list.							
Activities							
Activity 1.1.1							
Standard Activity : Distribution of life-saving emergency shelter to crisis affected households							

Provision of shelter for the most vulnerable fully or partially burnt shelter households of Kreneik Town.

Under this activity, a total of 3,200 partial or full emergency shelters will be distributed to affected populations in Kereneik town. Based on exchange with the ES/NFI cluster in West Darfur and the field experience of TGH in Kereneik, the full emergency shelter kit will include grass mats (20), poles (7), bamboo bundle (1), plastic sheeting (2), rope. Some adjustments will be carried out according to the availability of the items and specific needs identified. To ensure prioritizing safety and dignity and avoid causing harm, ensuring meaningful access, accountability, and participation and empowerment of IDP women and girls, all the distributions will target the most vulnerable households based on UNHCR criteria, which include gender, age and protection needs. For the distribution, women will be consulted regarding the locations and times for distributions; to be sure they have access and feel safe. During the distribution, vulnerable people will have a priority line and/or a safe space to wait.

Activity 1.1.2

Standard Activity : Not Selected

Beneficiary identification and verification.

TGH will identify and determine the beneficiaries for this project through an assessment of the situation and a close coordination with humanitarian actors in Kereneik locality, to avoid beneficiary overlap. This coordination stems from active involvement with the ES/NFI sector and attendance at meetings in West Darfur, information sharing with sector partners and collaboration on identification of most urgent needs, vulnerable populations, conflict impact, and beneficiary selection criteria. Utilizing UNHCR selection criteria as a guide (women-headed households, unaccompanied girls, women and girls with disabilities, etc.), TGH will identify 3,200 of the most vulnerable conflict-affected IDP households in Kereneik town villages to benefit from shelter distribution.

TGH will then verify the beneficiary list through on-field verification; TGH staff and daily workers will conduct household (HH) visits to confirm the information provided and validate the beneficiary list. During this stage, the beneficiary list can be adjusted to ensure it remains reflective of the objective of the project (i.e. to target the most vulnerable households). The list, once completed, will be coordinated with the sector to ensure those not targeted but yet in need can receive shelter assistance from sector partners.

Activity 1.1.3

Standard Activity : Not Selected

Post-Distribution Monitoring (PDM)

PDM will be conducted in the targeted areas 1 month after the distribution, to monitor the adequacy and sufficiency of the distributed items. A PDM HH survey will be conducted to enable TGH to gather beneficiaries' feedback regarding the quality and quantity of items in shelter kit, along with feedback in regards to timing, feelings of safety and security during distribution, distribution methods and TGH staff representation. The PDM HH survey will be conducted on a sample of beneficiaries by TGH staff and daily workers, who will utilize Kobo Collect software on tablets to gather data and allow for confidential management of beneficiary data.

Activity 1.1.4

Standard Activity : Sensitize beneficiaries targeted on complaint mechanism/s in place and ensure functionality.

Implementation of Feedback and complaint response mechanism (FCRM)

The FCRM will be directly implemented by TGH staff along with daily workers trained by TGH, ensuring the participation of sheikhs and other traditional leaders to mobilize the community. Before the implementation of each distribution, community mobilizers and traditional leaders will explain to the community the activity, the selection criteria and the FCRM as part of TGH accountability strategy. A FCRM will be set up in all distribution sites in order to allow beneficiaries to give feedback regarding the intervention during the activity. A feedback box will be set up in the most adapted location in the village allowing written feedback. In addition, TGH will identify community focal points to allow for direct in-person feedback, and a FCRM phone number will be displayed on posters that will be easily visible around the distribution site. The focal points will be gender balanced and trained on FCRM and mainstreaming protection (PSEA, GBV). The multiple approaches will ensure the mechanism is accessible by all community members. Further, should information be received regarding GBV or Sexual Exploitation or Abuse, this information will be reported directly to the Country Director for management as per TGH internal guidelines.

Activity 1.1.5

Standard Activity : Not Selected

Conducting awareness session concerning COVID-19 mitigation measures.

A daily worker previously trained by TGH WASH team will be in charge of delivering hygiene awareness messages concerning COVID-19 mitigation measures to the targeted beneficiaries. During the distribution, they will explain the importance of handwashing and physical distances in context of COVID-19 pandemic to limit the spread of the virus. TGH will continue to follow the situation and regularly communicate with the authorities to be in line with the official directives about COVID-19 regulation.

Additional Targets :

M & R

Monitoring & Reporting plan

TGH monitors program activities using a large range of reporting tools, which allow appraising the situation in various terms, logistics, administrative, HR but also technical, notably via follow-up tools which are linked with TGH contractual commitments (i.e. indicators). These tools, whose accuracy is crosschecked by TGH on field or "flying" senior staff are shared with TGH coordination team as well as TGH HQ, allowing analysis, regular feedback and corrective measures when deemed necessary. The monitoring of the activities will be undertaken at different levels and the technical field team will conduct the monitoring throughout different project steps:

- TGH team will conduct beneficiary selection utilizing Kobo Collect, conducted on tablets. To ensure accountability the lists will be coordinated with the Sector (also ensuring there is no doubling on beneficiaries). Beneficiary list will provide data disaggregated by gender and age.
- Activity plans – include distribution plan, resources required, security monitoring, risk reduction, and PDM planning. Submitted by Field team to Coordination to be validated prior to activities being conducted.
- Activity reports – include description of activity implementation, number of beneficiaries reached disaggregated by gender, main conclusions including difficulties, suggestions and learning, points of satisfaction, and level of participation of beneficiaries.
- TGH will conduct 2 KAP surveys (baseline and end-line survey) to measure the overall impact of the project

- PDM HH surveys to be conducted between one and two months after the distribution.
- FCRM at all stages of the project.

Tools are compiled and reviewed by sector coordinators every month, then sent to Khartoum where they are analysed by the Program Team. TGH's tools incorporate protection mainstreaming. This will include the collection of disaggregated data, including disaggregation by gender, age and disability where possible; to ensure the diversity of program beneficiaries is well understood and monitored throughout the project. These tools are shared with TGH HQ where the sector referents review them for decision making and eventual corrections. TGH HQ takes part in the monitoring via regular field visits (technical department, Desk) and monitoring based on field data shared with TGH HQ through dedicated tools and internal reports on activities' implementation. It allows supporting TGH teams on the field by ensuring the respect of implementation quality and humanitarian standards. TGH finance department monitors and checks the expenses related to this project and support the quality of the financial reporting. Finally, donor reporting is conducted by the Program Team using standardized templates, reviewed by TGH HQ, and then uploaded to GMS system within agreed timeframe.

Workplan													
Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
EMERGENCY SHELTER AND NON-FOOD ITEMS : Activity 1.1.1: Provision of shelter for the most vulnerable fully or partially burnt shelter households of Kreneik Town. Under this activity, a total of 3,200 partial or full emergency shelters will be distributed to affected populations in Kereneik town. Based on exchange with the ES/NFI cluster in West Darfur and the field experience of TGH in Kereneik, the full emergency shelter kit will include grass mats (20), poles (7), bamboo bundle (1), plastic sheeting (2), rope. Some adjustments will be carried out according to the availability of the items and specific needs identified. To ensure prioritizing safety and dignity and avoid causing harm, ensuring meaningful access, accountability, and participation and empowerment of IDP women and girls, all the distributions will target the most vulnerable households based on UNHCR criteria, which include gender, age and protections needs. For the distribution, women will be consulted regarding the locations and times for distributions; to be sure they have access and feel safe. During the distribution, vulnerable people will have a priority line and/or a safe space to wait.	2023												
	2022					X	X						
EMERGENCY SHELTER AND NON-FOOD ITEMS : Activity 1.1.2: Beneficiary identification and verification. TGH will identify and determine the beneficiaries for this project through an assessment of the situation and a close coordination with humanitarian actors in Kereneik locality, to avoid beneficiary overlap. This coordination stems from active involvement with the ES/NFI sector and attendance at meetings in West Darfur, information sharing with sector partners and collaboration on identification of most urgent needs, vulnerable populations, conflict impact, and beneficiary selection criteria. Utilizing UNHCR selection criteria as a guide (women-headed households, unaccompanied girls, women and girls with disabilities, etc.), TGH will identify 3,200 of the most vulnerable conflict-affected IDP households in Kereneik town villages to benefit from shelter distribution. TGH will then verify the beneficiary list through on-field verification; TGH staff and daily workers will conduct household (HH) visits to confirm the information provided and validate the beneficiary list. During this stage, the beneficiary list can be adjusted to ensure it remains reflective of the objective of the project (i.e.to target the most vulnerable households). The list, once completed, will be coordinated with the sector to ensure those not targeted but yet in need can receive shelter assistance from sector partners.	2023												
	2022					X	X						
EMERGENCY SHELTER AND NON-FOOD ITEMS : Activity 1.1.3: Post-Distribution Monitoring (PDM) PDM will be conducted in the targeted areas 1 month after the distribution, to monitor the adequacy and sufficiency of the distributed items. A PDM HH survey will be conducted to enable TGH to gather beneficiaries' feedback regarding the quality and quantity of items in shelter kit, along with feedback in regards to timing, feelings of safety and security during distribution, distribution methods and TGH staff representation. The PDM HH survey will be conducted on a sample of beneficiaries by TGH staff and daily workers, who will utilize KOBO Collect software on tablets to gather data and allow for confidential management of beneficiary data.	2023												
	2022								X				

<p>EMERGENCY SHELTER AND NON-FOOD ITEMS : Activity 1.1.4: Implementation of Feedback and complaint response mechanism (FCRM)</p> <p>The FCRM will be directly implemented by TGH staff along with daily workers trained by TGH, ensuring the participation of sheikhs and other traditional leaders to mobilize the community. Before the implementation of each distribution, community mobilizers and traditional leaders will explain to the community the activity, the selection criteria and the FCRM as part of TGH accountability strategy. A FCRM will be set up in all distribution sites in order to allow beneficiaries to give feedback regarding the intervention during the activity. A feedback box will be set up in the most adapted location in the village allowing written feedback. In addition, TGH will identify community focal points to allow for direct in-person feedback, and a FCRM phone number will be displayed on posters that will be easily visible around the distribution site. The focal points will be gender balanced and trained on FCRM and mainstreaming protection (PSEA, GBV). The multiple approaches will ensure the mechanism is accessible by all community members. Further, should information be received regarding GBV or Sexual Exploitation or Abuse, this information will be reported directly to the Country Director for management as per TGH internal guidelines.</p>	2022						X	X	X	X	X	X	X
	2023												
<p>EMERGENCY SHELTER AND NON-FOOD ITEMS : Activity 1.1.5: Conducting awareness session concerning COVID-19 mitigation measures.</p> <p>A daily worker previously trained by TGH WASH team will be in charge of delivering hygiene awareness messages concerning COVID-19 mitigation measures to the targeted beneficiaries. During the distribution, they will explain the importance of handwashing and physical distances in context of COVID-19 pandemic to limit the spread of the virus. TGH will continue to follow the situation and regularly communicate with the authorities to be in line with the official directives about COVID-19 regulation.</p>	2022						X	X					
	2023												
<p>PROTECTION: Activity 1.1.1: Psychosocial support to all children through child-friendly spaces or structured play/recreational activities in communities and home-based support/care will be provided by facilitators and social workers trained in the provision of psychosocial support services to children.</p> <p>Sustainable and structured PSS will be organized based on age (5-9, 10-13, 14-17 years old), gender, and special needs and designed to promote children's well-being, resilience, participation, development, and confidence.</p> <p>The activities will be organized in a Child Friendly Space (CFS) builds by the project in Kereneik town. The CFS will be equipped with adapted furniture, recreational items and will be managed by trained and skilled staff (2 social workers and 4 animators). The CFS will also include two segregated emergency latrines adapted for children, and a water tank of 5m3 to provide safe water.</p> <p>2 shifts per day (3 hours) will be made. Each shift will take care of 40 children. (2 groups of 20). 80 children will be cared per day. The shifts will take into account the children's school hours. At least 145 children will benefit from at least 2,5 days of activities per week.</p> <p>The supervision of educational staff will be adapted according to the age groups. TGH has its own tools for the implementation of PSS activities. For the facilitation of PSS activities, volunteers can be recruited from the community, providing them incentives. Volunteers will be informed and trained on PSEA issues.</p>	2022						X	X	X	X	X	X	X
	2023												
<p>PROTECTION: Activity 1.1.2: Case management with social workers for children identified as particularly vulnerable (separated or unaccompanied), family tracing and reunification.</p> <p>The project will identify the children separated and accompanied in Kereneik town to facilitate the reunification with their family. The cases will be managed by two trained social workers.</p> <p>An assessment will be carried out at the beginning of the project (key informants, household) to identify children particularly vulnerable (separated or unaccompanied). For family tracing, TGH will work in collaboration with the Ministry of Social Welfare, the Ministry of Health, Concern, SCI, and later the community-based child protection networks supported by the project. 2 social workers will be in charge of the reunification of 25 children.</p>	2022							X	X	X	X	X	X
	2023												

<p>PROTECTION: Activity 1.1.3: Referrals to protection services and/or institutions (police, schools, courts, etc.) in affected locations and at the community level to prevent and respond to child rights violations, including SGBV and PSEA.</p> <p>TGH will provide case management support to children at risk, including referral to specialized services (health, protection, legal, GBV, etc). This will include Child Protection service mapping and referral follow up. A holistic approach will be implemented and the case management process includes considering the whole family situation. Sensitive and complex cases (CAAFAG, UASC, SGBV survivor, children victim of domestic violence, etc) are dealt with a special care (including through involving concerned partners in case conferences). Coordination with children protection services (notably Ministry of Social Welfare) will be ensured.</p> <p>The cases will be managed by the 2 social workers. In the nomadic villages of Rose, Galala and Tarshana, the cases will be referred to Geneina services to avoid any risks of tension with the “non-arab” tribes of Kereneik town. For the cases coming from Kereneik town, they will be referred to Kereneik or Geneina according to the needs.</p> <p>A protection desk will be established in the CFS with one CP manager who will supervise the case management of 50 children by the social workers.</p>	2022							X	X	X	X	X	X
	2023												
<p>PROTECTION: Activity 1.1.4: Strengthening/establishing community-based child protection networks to enhance child protection</p> <p>Child Protection Community-based mechanisms will be strengthened, by setting up or supporting Child Protection Committees, Adolescents/Youth Clubs, PTA and ensuring their empowerment and active role in promoting a protective environment. Communication with Communities (CwC) is a key component to inform Communities on their rights and available services.</p> <p>CPC will notably be trained on identification, child safeguarding, referral pathways and included as community mobilizers in awareness sessions. TGH has specific tools to build and train CPCs. These tools have been developed and are being used in Iraq, Syria and CAR. In the nomadic villages of Rose, Galala and Tarshana the community based children protection networks will be strengthened in collaboration with the national NGO Al Massar which has a good acceptance from the nomadic community.</p>	2022							X	X	X	X	X	X
	2023												
<p>PROTECTION: Activity 1.1.5: Community sensitization sessions on prevention and response to CP/SGBV cases and risk mitigation measures will be organized.</p> <p>Awareness-raising activities will be conducted on CP, SGBV, Education and Legal concerns, through different modalities: large awareness campaign, sensitization sessions, FGD. Awareness topics are to be further defined in collaboration with the targeted communities.</p> <p>In the nomadic villages of Rose, Galala and Tarshana, the awareness-raising activities will be carried out in collaboration with the national NGO Al Massar which has a good acceptance from the nomadic community and good experience in community mobilizing.</p>	2022							X	X	X	X	X	X
	2023												
<p>PROTECTION: Activity 1.1.6: Training to all projects staff on PSEA.</p> <p>TGH already has a consistent reporting procedure of PSEA allegation, train all his staff and the raise the awareness of the target community about PSEA (more detail in the Accountability to Affected Persons part). These mechanism and training will be continued in the framework of this project. A consultant will be recruit organize PSEA training for the new recruited staff and refreshment training for the already in position staff. It will also organize community awareness about PSEA on the 4 communities’ targeted by the project.</p>	2023												
	2022							X					
<p>PROTECTION: Activity 1.1.7: Equip disabled women and girls with disability tools (walker, elbow stick, disable chairs).</p> <p>Among the 3200 HH support with an emergency shelter, 32 women and girls with disabilities will be support with disability tools. The beneficiary selection will be carried out in relation with the community targeting the most severed disabilities that can support be with disability tools. For each beneficiary targeted an assessment of the need will be carried out by a specialist to identify the adapted tool to provide. During the distribution, the beneficiary will be trained by a specialist about how to use the tool distribute. A PDM will be carried out on all the beneficiaries 1 month after the distribution. Follow-up of the beneficiaries will be carried out by the social workers.</p>	2022							X	X	X	X		
	2023												

WATER, SANITATION AND HYGIENE: Activity1.1.1: NOT IMPLEMENTED: Drilling of 2 boreholes equipped with hand pumps including installation of the full set of the hand pump – 1 Shafo-khalo and 1 Gerena. In Shafo-khalo and Gerena villages of Sirba Locality, the inter-agency assessment conducted on the 16th of February 2022, identified that no available water source was found in these two villages. As a result, the IDP, returnees, and the host community are forced to use unsafe water far from their village average 2.5km distance that puts women and girls at risk of GBV such as harassment. Therefore, to address this long lasting problem, TGH planned to drill two boreholes equipped with hand pumps : 1 in Shafo-khalo and 1 in Gerena. These two borehole drillings will include geophysical survey, drilling based on the survey result, water quality test, installation of the well-casing, pumping test (in order to ensure a yield of 2m3/h of water), installation of the full set of hand pump, fencing to prevent the incursion of the animal. The distribution platform will be connected to a drainage channel to evacuate the wastewater to a trough set outside of the fencing, then the remaining water eliminated in a soakaway pit (at least 10m from the drilling). TGH will make sure that the drilling are positioned away from any source of fecal contamination (no latrine pit, run off of waste water within 30m) After the construction, the TGH team will disinfect the borehole before commissioning. Every month, water quality tests will be conducted by the TGH team, and the operators of the water point, hired by TGH, will report the population frequentation.” After the completion of the borehole construction and installation of hand pump, 2,950 (590 HH) beneficiaries (1,445 males and 1,505 females) After the completion of the activity, 2,950 beneficiaries (1445 males and 1,505 females from 590 HH) will benefit from 2 hand pumps with 7.5L/P/D increasing the availability of protected water from 0 to 7.5L/P/D (reaching SPHERE standard for emergency water quantity).	2022																	X	X
	2023	X	X																
WATER, SANITATION AND HYGIENE: Activity1.1.2: Rehabilitate existing 3 Hand pumps -Water points. 2 HarazTiman and 1 Manama) Inter-Sector Rapid Needs Assessment in Sirba -West Darfur that was conducted on 16th February 2022 has identified three non-functional hand pumps, 2 in Haraz Timan and 1 in Manama village that can support the community, with a focus on ensuring the availability of clean water at the community where the population was affected by the conflict and drought. These 3 hand pumps, fitted in 3 hand dug well, have been identified as non-functional because of a lack of maintenance that has led to worn-out and broken parts. TGH will replace and rehabilitate the three hand pumps and train the WUCs to manage the water system (see activity 1.1.3 below). TGH will disinfect the borehole and hand pumps after rehabilitation before resuming the provision of water to the community. In addition, monthly quality monitoring will be conducted. After the rehabilitation, the three-hand pumps will benefit 3,750 individuals (2,825 in Haraz Timan and 925 in Manama) After the completion of the activity, 2,950 beneficiaries (1,445 males and 1,505 females from 590 HH) will benefit from 2 hand pumps with 7.5L/P/D increasing the availability of protected water from 0 to 7.5L/P/D (reaching SPHERE standard for emergency water quantity).	2022						X											X	X
	2023	X	X																

<p>WATER, SANITATION AND HYGIENE: Activity1.1.3: NOT IMPLEMENTED: Build capacities, provide training, to enhance WASH of affected communities</p> <p>Establish and strengthen 5 WUC at the community level, and train and equip them on operation and maintenance of water systems.</p> <p>The Inter-agency assessment highlighted that frequent breakdowns have been observed because of misuse and lack of maintenance of the water points. There were no active WUC during the assessment. Thus, access to basic water supply in Sirba locality remains very limited and the water points are not functioning. To mitigate these challenges, TGH will create WUC of 12 members for water point management at the community level for the new construed and rehabilitated water points.</p> <p>At the beginning of the project, TGH team will meet the community leaders to set up all together an activity planning with a clear view of every step – water point building or rehabilitation, WUC creation and training, water point running, handover to the population and fees collection. According to the kind of water supply, the community size and resources, a money collection strategy can be set up with the community and TGH engineers.</p> <p>Awareness campaigns will put emphasis on the following points:</p> <ul style="list-style-type: none"> - Drinking safe water to protect people against water borne diseases and diarrhea (this is especially important for vulnerable people such as young children, sick people, elders, pregnant and lactating women) - Paying for safe water is less expensive than paying for a doctor. - Paying for water is the only way of having a sustainable safe water supply for the whole community. - Safe water is healthy only if carried and stocked in clean recipients: cleaning jerry cans regularly helps the community to be healthy. - A community with sustainable water supply is more resistant to face crisis. <p>TGH will train WUC on technical, financial, and communication topics on each water point rehabilitated. The training is composed of two main parts, one technical to allow operation and maintenance of the water points and one financial to initiate and manage a cost recovery system for the water point maintenance expenses.</p> <p>The technical part is itself divided into two parts: one theoretical, another one practical. The theoretical part will focus on basic maintenance operations :</p> <ul style="list-style-type: none"> - Presentation of the main spare parts that compose a water yard and how it functions - Most regular types of breakdown - Operation and maintenance of the hand pump - Reparation techniques. <p>The financial part will explain how to run a cost recovery system by determining the right price of the water, organizing the committee to collect money at the distribution point, and to give the committee clues and ways to keep and save money once collected. In total 5 new Water Users Committees of 12 members, or a total of 60 persons, will be trained on operation, maintenance, and cost recovery in Sirba locality.</p> <p>In the same time, WUC training can take place involving water operator, WES and TGH. This training will focus on accountancy and cost recovery strategy, including how to fill an account book, anticipate fuel and spare parts purchase, monthly accountancy, collecting fees.</p> <p>Local authorities will be involved in fees collection to solve problems, and will be trained on basic water point management.</p> <p>According to TGH experience, it is crucial to include women into the WUC as far as women are the main users of the water points. Enrolling women in the water point management helps acceptance, cost recovery, decision making and protection.</p> <p>Monthly follow-up and evaluations of the WUC will be ensured by TGH staff and management advice and recommendations will be given to WUC during quarterly meetings during which will be invited WES, communities' representatives, and local authorities. Those meetings will be the opportunity for the WUCs to exchange their management experiences and challenges on the financial management aspect towards the community.</p>	2022								X	X	X
	2023	X									

<p>WATER, SANITATION AND HYGIENE: Activity1.1.4: Distribute water quality supplies (at point of use □ Aquatabs, or Pur)</p> <p>Provision of flocculant and disinfectant water treatment chemicals (Shafo khalo and Gerena) - 0.33gm chlorine tab 1 carton has 1,000 strips.</p> <p>The inter-agency assessment conducted on the 16th of February 2022 in Sirba locality Shafo khalo and Gerena villages reportedly that no protected water source was available., Consequently people collect water for cooking, drinking, bathing from the wadi, a distance away from the settlement (approximately 2.5km). As an immediate intervention, TGH will provide Household Water treatment Consumables for surface water users to 590HH for 3 months (2,950 individuals including 1,445 males and 1,505 females) IDPs and conflict-affected communities in Sirba locality Shafo khalo and Gerena villages. Demonstration of use will be organized at the distribution points.</p> <p>In addition, TGH field-based staff will visit regularly (ad hoc and as needed) at the household level to monitor the utilization of the HH WTC and provide feedback on the use at HH WTC.</p> <p>The choice of the water treatment chemical is "Aquatabs" (as per WASH national cluster recommendation) with 0.33gm sodium dichloroisocyanurate (NaDCC) and 0.20gm chlorine available per tab. One tab produces 5 liters of disinfected water from turbid and contaminated water.</p> <p>Each household (averagely 5 persons/HH) will receive of 72 strips of 10 tabs to produce 40 liters/D/HH during 3 months. The total HH WTC needed for Shafo khalo and Gerena villages in Sirba locality 4,312 carton chlorine tabs each carton has 1,000 strips and one strip has 10 tablets. Instead of water trucking, (which would provide 7.5 litres/p/d according to the WASH cluster guidelines), TGH has proposed HH WTC in order to produce 40 liters/HH. This will meet the minimum SPHERE emergency safe water supply (7.5 litres/p/d).</p>	2022							X			X	X	X
	2023												
<p>WATER, SANITATION AND HYGIENE: Activity1.1.5: NOT IMPLEMENTED: Water quality monitoring</p> <p>Water quality monitoring and provision of 70% HTH Chlorine, water quality test kits, and reagents for bulk chlorination.</p> <p>TGH will conduct regular monthly bacteriological tests (fecal coliform detection) using a Pota lab kit at all water points and household levels, using a simple random sampling method. If fecal contamination is observed, adequate measures will be taken (disinfection of the water points, jerry can cleaning campaign, and hygiene education mass awareness) in collaboration with the WES. The operators of the chlorinated systems will conduct daily water treatment (chlorination) using appropriate tools. They will also receive water quality and quantity monitoring training from TGH and WES. This activity will be implemented in Sirba locality where water points are rehabilitated and at the household level.</p> <p>TGH will procure and provide 2 drums of 70% HTH (45kg/drum) for chlorination of the existing water schemes. TGH in collaboration with the WES water experts will disinfect the 5 rehabilitated hand pumps with 1% chlorine solution (shock chlorination) and rinse the water schemes before commissioning. The 70% HTH will also be prepositioned and used for future water schemes disinfection. In addition, one pool tester and one pack DPD1 reagent to measure the FRC will be provided. TGH will collect 5 samples from the rehabilitated and constructed water schemes and 10 samples from households each month. As such 120 samples will collect and analyze during the project period. TGH will conduct orientation training on how to prepare and use the Chlorine solution and Pool tester to measure the FRC.</p>	2022					X	X	X	X	X	X	X	X
	2023	X	X										

WATER, SANITATION AND HYGIENE: Activity1.2.1: Facilitate household sanitation improvement through CLTS for household latrine construction/handwashing facilities at 5 villages (Karaz-Tamin, Haraz-Timan, Manama, Shafo-khalo, and Gerena)	2022							X	X	X	X	X	X	X
	2023	X	X											
<p>Following the inter-agency assessment conducted on the 16th of February 2022, the five targeted villages were identified as facing huge gap in term of excreta disposal: communities have no access to latrine and open defecation is rampant in all villages. As such, TGH planned to implement a Community-Lead Total Sanitation (CLTS) approach within the targeted five villages. The CLTS approach will follow the following 7 steps including Community prioritization; Locality-level Institutional Triggering; Training of community leaders and Hygiene promoters on CLTS; Community Pre-Triggering; Triggering and preparation of community action plan (target community by NGO only); Post-triggering (target community by NGO only); and Monitoring, Evaluation, Verification and Scale-up (target community by NGO only).</p> <p>Following the above-mentioned steps, TGH will conduct the below sub-activities.</p> <ul style="list-style-type: none">- Conduct a Training of Trainers (ToT) for35 participants from the local government and partners on Community-Led Total Sanitation (CLTS) approach, to raise their knowledge and skills on CLTS methodology to ending open defecation in targeted communities, and set the standards on appropriate access to sanitary facilities (latrines) and hygiene practices.- Information collection and community consultation, through the participation of diverse (age, ethnic, sex, socio-economic background) groups, to support Community-Led Total Sanitation (CLTS) interventions in5 villages, to empower women, girls, boys, and men to build and use latrines and living in Open Defecation Free (ODF) communities.- Rehabilitation/construction of gender-segregated and disabled-friendly sanitation facilities in 3 public places.- Conduct hygiene promotion interventions in 5 communities, schools, and health centers with a focus on handwashing with soap at critical times including menstrual hygiene management in schools.														
WATER, SANITATION AND HYGIENE: Activity 1.2.2: Poor WASH sanitation conditions expose both IDPs and host communities to water-related diseases risks. In such an emergency context, the construction of handwashing facilities is necessary to limit the risk of these diseases, but also to limit the spread of COVID-19. TGH will install handwashing facilities in 10 community facilities in IDPs gathering points (toilets in camps, schools, public gathering places, and health facilities). TGH will also provide 600 pieces of soap for each site, in line with the provision of handwashing facilities. Since TGH planned to install the handwashing facilities in communal places such as schools, health facilities and gathering points, soap will be provided for the facilities and the committees who will manage them. The hand washing sites will be equipped with proper drainage and absorption pits for wastewater disposal.	2022								X	X	X	X	X	X
	2023	X	X											

<p>WATER, SANITATION AND HYGIENE: Activity1.3.1: District hygiene and sanitation advocacy, sensitization training of key influential people per village at community and school in Sirba (Karaz tamin, HarazTiman, Manama, Shafo khalo, and Gerena)</p> <p>To improve hygiene knowledge and practices and implement community-wide hygiene behavior change in Sirba locality, particularly Karaz tamin, HarazTiman, Manama, Shafo khalo, and Gerena, TGH will implement clear, community coordinated, and widespread hygiene promotion and education activities.</p> <p>TGH will implement hygiene promotion activities in Sirba locality within the community through a network coordinated with the community leaders and will train 8 hygiene key promoters, who will operate as volunteers to share hygiene messaging. They will disseminate hygiene promotion messages through the organization of hygiene promotion sessions on key hygiene topics, using various methodologies including house to house visit, focus group discussion, child to child approach at schools, mass awareness, Information Education communication materials (IEC), and participatory hygiene and sanitation transformation (PHAST).</p> <p>TGH will conduct monthly follow-ups by a dedicated Hygiene Promoter Officer (TGH staff), as well as quarterly review meetings gathering all hygiene key promoters for reflective practice sessions. During those workshops, HKPs will exchange on their practices, challenges, share their progress reports and review the latest health data related to water-borne disease cases.</p> <p>8 hygiene key promoters will receive training on the following topics:</p> <ul style="list-style-type: none"> - Menstrual hygiene management - Facilitation skill - Garbage collection mobilization - Latrine construction promotion - Hygiene at water points and safe water management - Hygiene in school - Basic hygiene knowledge review <p>TGH will use the Participatory Hygiene and Sanitation Transformation approach aiming at improving hygiene behaviors to reduce diarrheal diseases and encouraging effective management of water and sanitation services. 512 awareness sessions (64 sessions per volunteer/KHP) for 8 WASH volunteers/HKPs focusing on:</p> <ul style="list-style-type: none"> - The linkage between WASH practices and health - Prevention of diarrheal and improvement of hygiene practices - Promotion of safe drinking water management - Proper handwashing - Latrine use <p>TGH will install handwashing facilities in 10 community facilities in IDPs gathering points (toilets in camps, schools, public gathering places, and health facilities). TGH will also provide 200 pieces of soap for each site, in line with the provision of handwashing facilities hygiene awareness activities will reach a total of 6,700 people without double counting through the house to house visit and FGD. HKPs will continue organizing HP sessions in each quarter on various topics such as environmental sanitation; food safety; handwashing with soap; jerry-can cleaning; latrine use; malaria prevention; personal hygiene and water safety. In particular, there will be training on COVID-19 epidemic evolution in all the TGH hygiene awareness sessions. Community mobilizers will conduct COVID-19 awareness sessions for communities of Sirba locality. Messages will be spread among the communities to make people aware of COVID-19 risks and encourage them to apply measures to limit the spread of the virus. The focus areas of the COVID-19 awareness session will be on COVID-19 symptoms, as well as how COVID-19 is spread and its prevention. The trained HKPs will also conduct awareness sessions on the importance of handwashing, physical and social distance, avoiding touching eyes, nose, and mouth, proper use of mask-wearing is gathering pace, and using hand sanitizer will be part of the awareness sessions.</p>	2023														
	2022						X	X	X	X	X	X	X	X	X

<p>WATER, SANITATION AND HYGIENE: Activity1.3.2: NOT IMPLEMENTED: Provision of Menstrual Hygiene Materials.</p> <p>Distribution of Hygiene kits (200gm Laundry soap, 250gm bathing soap, 20L jerrican, reusable sanitary pad, and solar hand torch light) for most vulnerable IDPs group (Female-headed HH, disabled persons, Adolescent women, etc)</p> <p>TGH will prioritize response for women and girls, who represent a highly vulnerable part of the population in an emergency context. TGH will provide 500 hygiene kits to 500 IDPs women and girls to improve their hygiene conditions. The kits will be procured from Khartoum/EI Geneina. One dignity kit contains 6 pieces of reusable sanitary pad, 3 pieces of 200g laundry soap, 3 pieces of 250g bathing soap, 20L jerrycan, and one solar hand torch (in full compliance with WASH sector standard). TGH believes that a sustainable approach for hygiene kits like the provision of sanitary pads which can be reused is preferred. As such, TGH proposes to distribute reusable sanitary pads to ensure proper menstrual hygiene management. TGH will use the female trained Hygiene Key Promoters to provide individual hygiene consultation education on menstrual hygiene management during distribution. The hygiene kits distribution will be conducted in one of the community facilities like a school and health center by female staff only to give privacy for the women beneficiaries to come to the distribution place, receive the dignity kits, and attend the menstrual hygiene education session without fear. TGH will work in collaboration with the government's water and health offices and consult with the IDPs on the selection of beneficiaries.</p>	2022							X			X	X	
	2023												
<p>WATER, SANITATION AND HYGIENE: Activity1.3.3: Hygiene promotion intervention through NNGO - Al Massar.</p> <p>The hygiene promotion intervention will be strengthened by implementing appropriate communication strategies, including the production of 200 standard IEC materials (posters and banners), mass sensitization on specific topics (including awareness at event days such as October 15, Global hand washing Day), and small group discussions that will be addressed to identify hygiene and sanitation gaps. This strengthening the link with installed WASH hardware for optimal use of infrastructure and improved knowledge and safe hygiene practices.</p> <p>Al Massar will target in Sirba locality (Shafo khalo and Gerenavillages) the two villages targeted by the project.</p> <p>Al Massar will use Participatory Hygiene and Sanitation Transformation approach aiming at improving hygiene behaviors to reduce diarrheal diseases and encouraging effective management of water and sanitation services. 384 awareness sessions (64 sessions per volunteer/KHP) for 06 WASH volunteers/HKPs focusing on:</p> <ul style="list-style-type: none"> - The linkage between WASH practices and health, - Prevention of diarrheal and improvement of hygiene practices. - Promotion of safe drinking water management, - Proper hand washing - Latrine use <p>The messages will be disseminated through house to house visits, hygiene messages mass campaign using loudspeakers, posters and leaflets, and sensitization sessions in gathering points, water distribution points, and during WASH NFI kits distribution.</p> <p>Al Massar will promote self- household water treatment- filtering and boiling for drinking water in absences of safe water and HH WTC. The hygiene awareness activities will reach a total of 2950 community beneficiaries in the two villages (Shafo khalo and Gerena villages)</p> <p>Al Massar will focus activities on COVID-19 epidemic evolution. Community mobilizers will conduct COVID-19 awareness sessions for communities living in Sirba locality. Messages will be spread among the communities to make people aware of COVID-19 risks and encourage them to apply measures to limit the spread of the virus. The focus areas of the COVID-19 awareness session will be on COVID-19 symptoms, and how COVID-19 is spread and its prevention. The trained HKPs will also conduct awareness sessions on importance of handwashing, physical and social distance, avoid touching eyes, nose and mouth, proper use of mask wearing in gathering places and using hand sanitizer.</p>	2022							X	X	X	X	X	X
	2023	X	X										

OTHER INFO

Accountability to Affected Populations

As demonstrated by TGH membership in the AAP/CEA Working Group, accountability is key in TGH's interventions. Beneficiaries are involved in all stages of the project. Putting people at the center of decision making by promoting their participation and community consultation is part of the development of the communities' self-protection capacities advocated by TGH. A bottom-up and inclusive approach promoting community ideas and solutions will be encouraged through cooperation with community members participating in these structures, which is an important component of the 'do no harm' strategy. Age, gender, vulnerability or disability are taken into account while identifying the beneficiaries and implementing activities. TGH will implement the project in accordance with its anti-fraud and anti-corruption policy established at HQ-level and regulating all stages of the project, including procurement and financial processes.

The FCRM will be directly implemented by TGH staff along with daily workers trained by TGH, ensuring the participation of sheikhs and other traditional leaders to mobilize the community. Prior to the implementation of each distribution, community mobilizers and traditional leaders will explain to the community the activity, the selection criteria and the FCRM as part of TGH's accountability strategy. A FCRM will be set up in all distribution sites in order to allow beneficiaries to give feedback regarding the intervention during the activity. A feedback box will be set up next to the water points in the village to allow written feedback. In addition, TGH will identify community focal points to allow for direct in person feedback, further a FCRM phone number will be displayed on posters that will be easily visible around the distribution site. These multiple approaches ensure that the mechanism is accessible to all community members. Focal points will be in charge of transferring beneficiaries' grievances to TGH Program and MEAL teams. Complaints will be systematically compiled, allowing the required follow-up; and beneficiaries feedback will systematically be addressed, providing beneficiaries with answer to their feedback/complaint, and will further be taken into account to adjust activities and adopt corrective measure as needed and relevant. Further, should information be received regarding GBV or Sexual Exploitation or Abuse, this information will be reported directly to the Country Director to be managed according to TGH's internal guidelines.

The PSEA policy is a key component of TGH's accountability strategy in Sudan, with TGH ensuring regular attendance at National PSEA meetings. Staff training and awareness campaigns are key to ensure teams maintain a 'do no harm' approach particularly with highly vulnerable groups such as women, girls, elderly or PWD. As part of the international-national approach to sustainability of action, TGH has ensured a PSEA referent both at HQ and mission level, supporting implementation of the policy. All recruited staff members participate in PSEA training at the beginning of their contract; followed by a refresher course after 12 months. Linked with its FCRM policy established at HQ level, TGH informs all beneficiaries of the PSEA policy, reporting procedures, and awareness raising on their rights. Any PSEA-related report would be immediately considered by TGH CD, followed by an investigation at HQ level if criminal behavior is potentially involved and the donor is informed of the risk. TGH's priority is transparency and ensuring the safety and security for staff and beneficiaries. TGH's PSEA policy was validated by UNICEF through their annual accreditation.

Implementation Plan

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

Gender Marker Of The Project

4- Likely to contribute to gender equality, including across age groups

Justify Chosen Gender Marker Code

Protection Mainstreaming

TGH ensures its interventions are in compliance with the 'do no harm' principle, incorporating protection principles and promoting meaningful participation, access, safety and dignity in its interventions. The proposed intervention is focusing on conflict and drought-affected population, in a region where humanitarian coverage is insufficient, including alarming humanitarian indicators. The provision of safe, equitable and dignify access to basic services is part of life-saving principle. Other underlying principles in TGH's approach to protection include participation (of communities and local actors), non-discrimination, partnership (with non-governmental NGOs and humanitarian actors in general) and capacity building (through the multiplication of appropriate and relevant training). These principles are in line with SPHERE's basic protection principles.

TGH is strongly committed to protecting children from abuse, a commitment that is reflected in TGH's Child Protection Policy. In addition, TGH is a member of the Alliance for the Protection of Children in Humanitarian Action and INEE, which underlines TGH's commitment to furthering its involvement in the Education and Protection sector.

TGH ensures all projects are in line with its internal Gender Equality and Gender-based Violence Protection Policy, June 2019. This document attests TGH's commitment to creating a protective and egalitarian environment for all employees and beneficiaries. Gender will be mainstreamed in the design of the action, which will ensure an at least equal access to the provided services to women, men, girls and boys. Throughout project implementation, TGH will endeavor to reach a 50% presence of female.

TGH encourages and facilitates the participation of beneficiaries at all stages of the project during regular FGD. This process enables TGH to design projects adapted to the context and to beneficiaries' needs. TGH pays particular attention to the participation of women, and to this end wishes to systemize holding separate male/female FGD (facilitated by female staff) to ensure sufficient representation of women and address the specific needs of women and girls (e.g. selection of safe location, gender sensitive design of the WASH facilities, dignity kits for females). TGH aims to meet the specific needs related to age (e.g. safe spaces will take into account the needs and vulnerabilities of girls and boys). TGH also pays particular attention to the participation of marginalized groups (e.g. sensitive design of the WASH facilities for people with disabilities) and works to ensure their inclusion in all stages of the project.

The beneficiary feedback mechanisms will systematically take into account diversity and inclusion, in particular with regard to gender, age, ethnicity and disability. The beneficiary feedback regarding meaningful access to services provided by TGH will be regularly sought through FGD and PDM.

TGH will ensure that the project is in line with GBV policy. TGH's staff members are sensitized to GBV, and are committed to endorse and respect it by signing the Code of Conduct when signing their contract. TGH adopts systematic cross-checking mechanisms to guarantee endorsement by all staff and avoid causing harm. Beneficiaries will be provided with GBV awareness sessions during hygiene promotion sessions. TGH will conduct GBV survey following distribution during PDM and FGD, and beneficiaries will have access to FCRM to report any GBV case. This will enable TGH to improve GBV case management and take corrective measures if necessary. The mid-term report and final evaluation of the project will review and discuss how the program has addressed any identified protection risks.

Country Specific Information

Safety and Security

Access

TGH has been implementing programs in West Darfur since 2004.; TGH is operating in Geneina and Kereneik respectively since 2004 and 2017. TGH has maintained an operational and coordination base in Geneina to facilitate administrative procedures, coordination and representation with the HAC and humanitarian actors in West Darfur. Since its establishment in the region and during successive projects, TGH has strengthened its relations with local actors. TGH also has a sub-national office in Kereneik to facilitate field intervention and ensure continuous presence in the area.

TGH staff travel to project sites in West Darfur via UNHAS flights. Once in Geneina, it takes another 1.5 to 2 hours by car to drive the 60 km between Geneina and Kereneik. Although the road is in poor condition, it is still passable, even in the rainy season. However, access is granted on a case-by-case basis, with each field mission requiring specific validations from the local authorities, who may also request validation from Geneina authorities. TGH has good relationships with the local authorities and the HAC, which allows it to receive travel authorizations without delay for both national and expatriate staff.

Due to the volatile security context in West Darfur, some restrictions on movements may be enforced, particularly in the event of conflict. For example, movements were restricted between December 2021 and February 2022 in Jebel Moon and Kereneik localities following inter-communal clashes and population displacement. For the movements of its staff, TGH systematically refer to the directives of the UNDSS and OCHA. In parallel, TGH closely monitors the security situation through its teams in the field and refers to UNDSS guidelines for the implementation of its activities.

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	Head of Program Wash	D	1	4,488.12	8	25.00	8,976.24
	<i>1 International staff. WASH project activities (staff management, technical follow up and reports, coordination with other stakeholders and procurement). Experienced international staff. Knowledge in participatory methodology and Project development. In charge of intermediary and final report. 25 % charged to SHF (equivalent to 2 month over 8 months). Unit cost includes salary , benefits: life and medical insurance.</i>						
1.2	Head of Program Shelter/CP	D	1	4,488.12	8	25.00	8,976.24

	1 International staff. CP, Shelter, NFI project activities (staff management, technical follow up and reports, coordination with other stakeholders and procurement). Experienced international staff. Knowledge in participatory methodology and Project development. In charge of intermediary and final report. 25 % charged to SHF (equivalent to 2 month over 8 months). Unit cost includes salary , benefits: life and medical insurance.						
1.3	Project Manager	D	1	3,912.72	8	100.00	31,301.76
	1 International staff. Experienced in management of humanitarian projects. In charge of the good implementation of the project (team management, activity planning, quality control...). 100 % charged to SHF (equivalent to 6 month over 8 months). Unit cost includes salary , benefits: life and medical insurance.						
1.4	Program Technical support from HQ to mission	S	1	5,754.00	8	13.00	5,984.16
	International staff from HQ will provide technical support to the mission. the support will be on WASH & Child protection programming to ensure the quality program delivery. 13 % charged to SHF (equivalent to 1 month over 8 months). Unit cost includes salary and benefits: life and medical insurance.						
1.5	Field Coordinator	D	1	2,550.00	8	50.00	10,200.00
	"1 National staff .Skilled senior staff providing general coordination at field level (both technical and administratively). Great experience of emergency situation and security management. 50% charged to SHF (equivalent to 4month over 8 months). unit cost includes salary and benefits (medical insurance, Eid bonus) "						
1.6	Multi-sectorial, Emergency Response Coordinator (Flying)	D	1	2,113.00	8	25.00	4,226.00
	1 National Staff Flying Multi-sectorial, Emergency response coordinator. General project coordinator. Mobilizes project managers and technical managers in the field for activities implementation, coordinates and reports and assists the Head of program. Great experience of emergency situation. 25% charged to SHF (equivalent to 2 months over 8 months). unit cost includes salary and benefits (medical insurance, Eid bonus).						
1.7	MEAL Manager	S	1	1,160.00	8	25.00	2,320.00
	1 National Staff MEAL manager. Ensure the good implementation of the Monitoring, Evaluation, Accountability and Learning mechanisms on the sudanese mission and on the project. Mobilizes program teams and data clerk at field level. Great experience in MEAL. 25% charged to SHF (equivalent to 2 months over 8 months). unit cost includes salary and benefits (medical insurance, Eid bonus).						
1.8	Data Clerk	D	1	655.00	8	50.00	2,620.00
	1 National Staff Data Clerk. Ensure data entry at base level, informs the communities about FCRM, collect the complaints. Report to the MEAL manager and the field coordinator. 50% charged to SHF (equivalent to 2 months over 8 months). unit cost includes salary and benefits (medical insurance, Eid bonus).						
1.9	WASH Coordinator (flying)	D	1	2,218.00	8	25.00	4,436.00
	"1 National Staff Flying wash coordinator. General project coordinator. Mobilizes WASH managers in the field for activities implementation, coordinates and reports and assists the Head of program. Great experience of emergency situation. 25% charged to SHF (equivalent to 2 months over 8 months). unit cost includes salary and benefits (medical insurance, Eid bonus). "						
1.10	Deputy WASH coordinator (flying)	D	1	1,742.00	8	25.00	3,484.00
	1 National staff deputy wash coordinator. Skilled senior staff providing training and post-training support, as well general supervision of the WASH action. 25% charged to SHF (equivalent to 2 month over 8 months). unit cost includes salary and benefits (medical insurance, Eid bonus)						
1.11	WASH Manager	D	1	1,219.00	8	50.00	4,876.00
	National staff. Direct implementation and management of all project activities at field level. Great experience of WASH emergency situation and development settings. 50% charged to SHF (equivalent to 4 month over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)						
1.12	WASH Supervisor	D	1	995.00	8	50.00	3,980.00
	1 national staff include he ensure the good implementation of wash activities and leading the WASH team at field level. 50% charged to SHF (equivalent to 4 month over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)						
1.13	WASH Officer	D	1	740.00	8	50.00	2,960.00

	<p>"1 national staff include he ensure the good implementation of wash activities focusing on WASH facility constructions including drilling, water point construction, latrine construction, etc at field level. This cost include salary + benefits (medical insurance, Eid bonus).50% charged to SHF project (equivalent to 4 months over 8 months)"</p>					
1.14	Water supply mentanace officer (operation and maintenance of water facilities)	D	1	715.00	8	2,860.00
	<p>"1 national staff include he ensure the good implementation of wash activities focusing on operation and maintenance of water facilities, organizing and stablishing WASH committes and follow up of the WASH facilities as well as the water user committes at field level. This cost include salary + benefits (medical insurance, Eid bonus).50% charged to SHF project (equivalent to 4 months over 8 months)"</p>					
1.15	Water supply Technician (Water Quality)	D	1	517.00	8	2,068.00
	<p>"1 national staff include he ensure the good implementation of wash activities focusing on at field level. This cost include salary + benefits (medical insurance, Eid bonus).50% charged to SHF project (equivalent to 4 months over 8 months)"</p>					
1.16	Hygiene promotion officer	D	1	688.00	8	2,752.00
	<p>National Staff. Ensures implementation of hygiene promotion activities in emergency settings, as well as follow-up, monitoring and KAP surveys. 50% charged to SHF (equivalent to 4 months over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)</p>					
1.17	Community mobilizer officer	D	1	740.00	8	2,960.00
	<p>1 National staff. In charge of the Community Mobilizer Technician, will mobilize the community for activities (trainings, distributions and monitoring activities). 50% charged to SHF (equivalent to 4 months over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus).</p>					
1.18	Community mobilizer Tech Technician	D	1	517.00	8	2,068.00
	<p>1 National staff. Will mobilize the community for activities (trainings, distributions and monitoring activities), reports to the community mobilizer officer. 50% charged to SHF (equivalent to 4 months over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus).</p>					
1.19	CP manager (Geneina)	D	1	1,188.00	8	9,504.00
	<p>1 National staff. Direct implementation and management of all the CP project activities at field level. Great experience of CP in emergency situation . 100% charged to SHF (8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)</p>					
1.20	Case worker technician = social workers in the CFS (Kereneik)	D	2	517.00	8	8,272.00
	<p>2 TGH National staff. In charge of the case management and support the CFS. Great experience of case management in emergency situation . 100% charged to SHF (8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)</p>					
1.21	PSS facilitators technician = animator in the CFS (Kereneik)	D	4	517.00	8	16,544.00
	<p>"4 National staff. Will organise Psychosocial Support (PSS) based on age (5-9, 10-13, 14-17 years old), gender and special needs and designed to promote children's well-being, resilience, participation, development, and confidence. The activities will be organized in the CFS. 100% charged to SHF (8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)"</p>					
1.22	Country Director	S	1	5,063.52	8	10,127.04
	<p>"Triangle GH representative in the country and ensures local and national coordination 25% charged to SHF total budget (equivalent to 2 month over 8 months).Unit cost includes salary and benefits: life and medical insurance. The country director will put his time effort a minimum of 25% for the assigned project.</p>					
1.23	Head Of Admin And Finance	S	1	4,488.12	8	8,976.24
	<p>International staff. Will manage the finance, HR and departement. 25% charged to SHF total budget (equivalent to 2 month over 8 months).Unit cost includes salary and benefits: life and medical insurance. The Head of Admin and Finance will put his time effort a minimum of 25% for the assigned project.</p>					
1.24	Grants Officer	S	1	3,912.72	8	7,825.44

	<i>"International staff. Will manage all reports for donors 25% charged to SHF total budget (equivalent to 2 month over 8 months).Unit cost includes salary and benefits: life and medical insurance. "</i>						
1.25	Logistic coordinator	S	1	2,515.00	8	13.00	2,615.60
	<i>"National staff. Coordinates all logistic teams. charged 13% to SHF Total Budget (equivalent to 1 month over 8 months). Unit cost includes salary = and benefits (medical insurance, Eid bonus)</i> "						
1.26	HR Coordinator (Khartoum)	S	1	3,005.00	8	13.00	3,125.20
	<i>National staff.In charge of recruitment, staffs evaluation, and all human resources matters. 13% charged to SHF Total budget (equivalent to 1 month over 8 months) . Unit cost includes salary and benefits (medical insurance, Eid bonus)</i>						
1.27	Deputy HR coordinator (flying)	S	1	1,188.00	8	25.00	2,376.00
	<i>National staff.In charge of recruitment, staffs evaluation, and all human resources matters. 25% charged to SHF Total budget (equivalent to 2 month over 8 months) . Unit cost includes salary and benefits (medical insurance, Eid bonus)</i>						
1.28	Finance Coordinator (Khartoum)	S	1	2,542.00	8	13.00	2,643.68
	<i>"National staff.In charge of budget monitoring and supervision of field expenditures. 13% charged to SHF Total budget (equivalent to 1 month over 8 months). Unit cost includes salary and benefits (medical insurance, travel allowance, Eid bonus) . "</i> "						
1.29	Assistance Archive	S	1	495.00	8	25.00	990.00
	<i>"National staff.In charge of archiving and scanning for Finance, Admin, Hr, Logistics departments. 25% charged to SHF Total budget (equivalent to 2 month over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus) . "</i>						
1.30	Deputy finance coordinator (Flying)	S	1	1,814.00	8	25.00	3,628.00
	<i>National staff. in charge of finance and admin control base level from Khartoum. 25% charged to SHF total budget (equivalent to 2 month over 8 months). Unit cost includes salary and benefits(medical insurance, Eid bonus)</i>						
1.31	Access /Liaison Manager	S	1	1,161.00	8	25.00	2,322.00
	<i>"National staff, in charge of HAC procedures, immigrations follow up, Security follow up, registration follow up (Technical agreement, Visa, evaluation...). 25% charged to SHF Total budget (equivalent to 2 month over 8 months) . Unit cost includes salary USD and benefits (medical insurance, Eid bonus)</i> " "						
1.32	Deputy Logistic coordinator (Flying)	S	1	1,161.00	8	25.00	2,322.00
	<i>National staff. in charge of purchase and logistics procedures form Khartoum. 25% charged to SHF total budget (equivalent to 2 month over 8 months). Unit cost includes salary and benefits(medical insurance, Eid bonus)</i>						
1.33	Logistic Supervisor (Khartoum)	S	1	1,180.00	8	25.00	2,360.00
	<i>National staff. in charge of purchase and logistics procedures form Khartoum for SHF project. 25% charged to SHF total budget (equivalent to 2 month over 8 months). Unit cost includes salary and benefits(medical insurance, Eid bonus)</i>						
1.34	Logistic Officer (Khartoum)	S	1	740.00	8	25.00	1,480.00
	<i>National staff.In charge (Management of stocks, maintenance of equipment, etc.) 25 % charged to SHF total budget (equivalent to 2 month over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)</i>						
1.35	Driver (Khartoum)	S	2	518.00	8	13.00	1,077.44

	"2 National staff. For TGH vehicles. 13% charged to SHF total budget (equivalent to 1 month over 8 months) unit cost includes salary and benefits(medical insurance, Eid bonus)						
	"						
	"						
1.36	Watchmen (Khartoum)	S	4	405.00	8	13.00	1,684.80
	"4 National staffs. 13% charged to SHF total budget (equivalent to 1 month per staff over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus) "						
1.37	Cleaner/Cook (Khartoum)	S	3	395.00	8	13.00	1,232.40
	3 National staff. 13% charged to SHF total budget (equivalent to 1 month per staff over 8 months)unit cost includes salary and benefits (medical insurance, Eid bonus						
1.38	Project Deputy field coordinator (Geneina)	D	1	1,188.00	8	50.00	4,752.00
	1 national staff. This position is providing support to field coordinator for implementation and support department in project office. 50% charged to SHF total budget (equivalent to 4 month over 8 months). Unit cost includes salary and benefits(medical insurance, Eid bonus)						
1.39	Project Logistic Supervisor (Geneina)	S	1	909.00	8	25.00	1,818.00
	1 National staff. in charge of purchase and logistics procedures form Geneina under the supervision of the logistic anager Geneina for SHF project. 25% charged to SHF total budget (equivalent to 2 month over 8 months). Unit cost includes salary and benefits(medical insurance, Eid bonus)						
1.40	Project Logistic Officer (Geneina)	S	1	688.00	8	50.00	2,752.00
	National staff.In charge of Direct implementation and supervision of all project activities at field level.Experience in the sector and geographical area(Management of stocks, maintenance of equipment, etc.) 50 % charged to SHF total budget (equivalent to 4 month over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)						
1.41	Project office Watchmen (Geneina)	S	4	390.00	8	50.00	6,240.00
	"4 National staffs. 50 % charged to SHF total budget (equivalent to 4 month per staff over 8 months). Unit cost includes salary and benefits (medical insurance, Eid bonus)						
	"						
1.42	Proiject office Cleaner/Cook (Geneina)	S	2	448.00	8	50.00	3,584.00
	2 National staff. 50% charged to SHF total budget (equivalent to 4 months per staff over 8 months)unit cost includes salary and benefits (medical insurance, Eid bonus						
	Section Total						215,300.24
2. Supplies, Commodities, Materials							
2.1	Rehabilitate existing 3 Hand pump -Water points. 2 HarazTiman and 1 Manama)	D	1	3,377.89	3	100.00	10,133.67
	This cost refers to rehabilitating the Handpump in Sirba locality. The hand pump rehabilitation includes the part replacement, provision of tool kits, fencing of the water point, plastering of the headworks, and drainage maintenance. Spare parts cost (\$1461.354*1), hand pump special & standard tool kits cost (\$558*1), labor cost (\$448*1) and local & industrial materials cost (\$910.53*1). The cost per hand pump rehabilitation will be \$3377.89. Therefore, the total cost for the three-hand pump rehabilitation will be (\$3377.89*3) = \$10133.66. Costs are charged at 100% to this project. Refer 2.1 BoQ						
2.2	Drilling of 2 hand pumps including installation of fulset of the hand pump - 1Shafo khalo and 1 Gerena	D	1	16,997.53	4	100.00	67,990.12

	<i>This cost refers to PRELIMINARIES AND GENERAL, DRILLING AND WELL DEVELOPMENT, TEST PUMPING AND RECOVER, WATER QUALITY, PUMP INSTALLATION, and CONSTRUCTION OF BOREHOLE APRON, DRAINAGE CHANNEL SOAKPIT AND ANIMAL TROUGH INSTALLATION" The cost for PRELIMINARIES AND GENERAL WHICH INCLUDES geophysics Survey, MOBILIZATION AND SITE CLEARANCE for one site is estimated at \$730, the cost for drilling and well development of the one new borehole is estimated at \$ 12845, the cost for one site TEST PUMPING AND RECOVER is estimated at \$725, the cost for water quality for one site is estimated at \$205, pump Installation cost for one site is estimated at \$1992, the CONSTRUCTION OF BOREHOLE APRON, DRAINAGE CHANNEL SOAKPIT AND ANIMAL TROUGH INSTALLATION cost for one site estimated is estimated at \$500.53 The total cost for one site borehole drilling is \$16,997.53. The total cost for the four sites is 16,997.53*4=67,990.12 USD. Costs are charged at 100% to this project. Refer to 2.2 BoQ.</i>						
2.3	Provision of flocculant and disenfectan water treatemnet chemiclas (Shafo khalo and Gerena) - 0.33gm chlorine tab 1carton has 1000strips	D	43	37.71	1	100.00	1,621.53
	<i>This cost includes Household Water treatment Consumables (HHWTC), to 590HH for 3 months. Each household (averagely 5 persons/HH) will receive of 72 strips of 10 tabs to produce 40 liters/D/HH during 3 months . One carton contains 1000strips. The total HH WTC needed for Shafo khalo and Gerena villages in Sirba locality 43 carton chlorine tabs. The unit cost for one cartone water treatment Consumables is \$37.71. The total cost for 43 carton will be 43* \$37.71= \$1621.39. Costs are charged at 100% to this project.</i>						
2.4	Establish and strengthening of 5 water user committee at community level, and train and equip them on operation and maintenance of water systems	D	7	337.79	1	100.00	2,364.53
	<i>This cost refers to the cost of training and follow-up of the 7 water user committees with 12 members each. This line includes all costs related to the training and the evaluation (stationaries, HAC & WES support documents printing, team meals, etc.).One WUCs has 12 member for four days training, the cost will be (12persone*4days*\$2.9413 =\$141.18); the unit cost for 12 trainee and 3 trainer for refreshment water & tea (two small water +tea/coffee for four days will be (15*4days*\$1.4707= \$88.24; the unit cost for notebook for 12 trainees & 3 trainers will be (15*\$1.18= \$17.65); the cost for Pen for one water user committee will be (12*\$0.2677 = \$ 3.21); the cost for Marker to train one water user committee will be (1*\$0.37 = \$ 0.37); Flip chart (1pkt* \$0.37 = \$ 0.37); Printing paper (2rim*\$2.94 = \$5.88); Printed training manual for the participant (1*\$36.77= \$36.77); Trainer from water bureau to support (4*\$3.677= \$14.71); and Training room rent for four days (4days* \$ 7.3533= \$29.41). The cost per water user committee with 12 members is \$337.79. The total cost will be (7*\$337.79 = \$2364.53). Costs are charged at 100% to this project</i>						
2.5	water quality monitoring and provision of 70% HTH Chlorine, water quality test Kits, and reagents for bulk chlorination	D	7	204.36	1	100.00	1,430.52
	<i>This line includes the purchase of 70% HTH Chlorine, water quality test Kits, and reagents for bulk chlorination , water quality test Kits, pool tester and reagents for bulk chlorination . The water quality monitoring will be conducted at 7 water points. The unit cost for one drum of 45kg 70% HTH Chlorine is (1*\$185.78), and the unit cost for one pool tester including DPD1& DPD3 is (1* \$18.58) The unit cost per site is calculated (\$204.36*1 = \$204.36) The total cost for seven sites will be (7*\$204.36 = \$1430.52). Costs are charged at 100% to this project</i>						
2.6	Facilitate household sanitation improvement through CLTS for household latrine construction/handwashing facilities at 5 villages (Karaz tamin, HarazTiman, Manama, Shafo khalo and Gerena.)	D	1	12,667.10	1	100.00	12,667.10
	<i>Facilitate household sanitation improvement through CLTS -The cost for one village training of Trainers (ToT) on Community-led Total Sanitation (CLTS) approach for 7 participants is estimated at \$470.17; the cost for one village selection of communities for pre-Triggering is estimated at \$219.78; the cost for one locality level triggering exercise by CLTS trained facilitators is estimated at \$237.36; the cost for one Community level triggering exercise by CLTS trained facilitators are estimated at \$132.75; the cost for one Post-Triggering exercise in one targeted village is estimated at \$196.66; the budgets for monthly review meetings with CLTS Committee members and community leaders is estimated a \$149.45; the cos for one village 10 trainee communities volunteers on local sanitation and handwashing in targeted villages is estimated at \$542.04; for one Joint ODF verification visit by SMOH/TGH in one village is estimated at \$475 and cost for Celebration of certified ODF villages in one village is estimated at \$110. The total cost for one village to implement the CLTS approach is (1*2,533.42\$=2533.42\$). The total cost for five villages will be \$12,667.08 . Please refer to 2.6 BoQ.</i>						
2.7	District hygiene & Sanitation advocacy, sensitization training of key influential people per village at community and school in Sirba (Karaz tamin, HarazTiman, Manama, Shafo khalo and Gerena.)	D	1	12,667.10	1	100.00	12,667.10
	<i>"This includes the incentives given to the Hygiene key promoters for 8 months, 300 IEC/BCC materials production(200poster & 100 leaflets), 5 banners, 2000 pieces of soap for handwashing demonstration training cost for the 5 hygiene key promoters, hand washing facility and awareness campaign during global event days. This cost also includes the KAP survey and PDM cost as well. The line ministries who will be trainers for the hygiene promotion training of HKPs are also included. The total cost for the five targeted villages will be \$12667.087. Costs are charged at 100% to this project. Refer to 2.7 BoQ</i> "						
2.8	Distribution of Hygiene kits (200gm Laundry soap, 250gm bathing soap, 20L jerrican, reusable sanitary pad, and solar hand torch light) for most vulnerable IDPs group (Female headed HH, disabled persons, Adolecent women etc)	D	1	52.99	1000	100.00	52,990.00
	<i>This budget line refers to the cost of Hygiene kits. One hygiene kit contains 6 pieces of reusable sanitary pad, 15 pieces of 200g laundry soap, 15 pieces of 250g bathing soap, 20L jerrycan, and one solar hand torch. The unit cost of one hygiene kit is 52.99\$. The total cost for 1000 hygiene kits will be \$52.99*1000=\$52990. Costs are charged at 100% to this project. Refer to 2.8 BoQ.</i>						
2.9	Transportation cost for WASH Supplies	D	4	4,391.25	1	100.00	17,565.00

	<i>This line includes the transportation costs for material transportation from Khartoum to Geneina and geneina to Sirba. Also it includes within Sirba locality. The way of one trip has been recently established to 4391.25 USD with the transporters from Khartoum to Sirba Locality. TGH is planning on requiring 4 trips for WASH activities</i>						
2.10	Cost for field implementation, monitoring and evaluation of WASH activities	D	1	422.24	6	100.00	2,533.44
	<i>As all of the activities will be implemented in Sirba, in surrounding villages, close follow-up and monitoring will be necessary. This line includes all the costs related to activities follow-up and monitoring (team meals, Thuraya and phone credits, HAC & line ministries incentives, stationaries, documents printing, etc.) Line ministries staff support cost (5person*1month*\$36.77 = \$183.83); the unit cost for 6 people for refreshment water & tea (two small water +tea/coffee for one month will be (6people**\$2.21= \$13.24; the unit cost for notebook will be (50 notebooks*\$2.21= \$110.3); the cost for 12 pkt Pen will be (12*\$2.21 = \$ 26.47); the cost for Marker will be (10pkt*\$3.68 = \$ 36.77); Flip chart (10pec* \$2.21 = \$ 22.06); Printing paper (10 rim*\$2.96 = \$29.57); The total cost for field implementation, monitoring and evaluation of WASH activities for one month will be \$ 422.24. The total cost of 6 months (6*\$422.24= \$2533.42). Costs are charged at 100% to this project.</i>						
2.11	Shelter	D	3200	115.00	1	100.00	368,000.00
	<i>Purchase of shelter for 3200 HH. Unit cost corresponding to the purchase cost of one shelter kits in Kereneik town see BoQ shelter attached. refer to 2.11 BoQ.</i>						
2.12	Daily worker for shelter activities	D	6	10.00	60	100.00	3,600.00
	<i>DW for the implementation of the shelter activities: assessment, beneficiary selection and verification, distribution. Unit cost corresponding to the cost of a daily worker during one day. The quantity is estimated at 6 daily worker during 60 days.</i>						
2.13	Shelter transportation	D	1	2,500.00	1	100.00	2,500.00
	<i>Estimation of the transportation cost for the 3200 shelter from the supplier in Kereneik town to the dsistribution area (Kereneik IDP camps).</i>						
2.14	Cost for field implementation, monitoring and evaluation of Schelter activities (PDM, assessment, FGD...)	D	1	500.00	1	100.00	500.00
	<i>This line includes all the costs related to activities follow-up and monitoring (team meals 90\$, Thuraya and phone credits 100\$, HAC & line ministries fees 120\$, stationaries 90\$, documents printing 100\$, etc.) Costs are charged at 100% to this project.</i>						
2.15	Construction of a full equiped child friendly space (2 rooms, 2 emergency latrines, 1 water tank, maintenance and clinic products)	D	1	10,000.00	1	100.00	10,000.00
	<i>Construction of a full equipped child friendly space: 2 rooms (2x3476.61\$), 2 emergency latrines (2x446.29\$), 1 water point (2154.20\$)). Refer attach unit cost for each construction through 2.15 BoQ.</i>						
2.16	Furniture for the CFS	D	1	5,000.00	1	100.00	5,000.00
	<i>Estimated cost for the furniture of the the CFS, including child desks (30*70\$), benches (30*50\$), mats (8*25\$), office desk (2x250\$), office chair (2x100\$), cupboard (2x250\$)</i>						
2.17	Capacity building training for CFS animators and Social Workers and other staff on provision of psychosocial support services to children	D	1	1,499.85	1	100.00	1,499.85
	<i>Estimated cost for the training of 11 staff during 5 days on provision of psychocial support. The costs include the transportation of the participant and the trainer (365.81\$), support to trainees (67.07\$), facilitator (304.85\$), the stationary materiel (60.97\$), meal (335.33\$), room rental (304.85\$), refreshment (60.97\$). The unit cost mentioned corresponding to the estimated price for one day of training.</i>						
2.18	Recreational kits	D	1	920.64	1	100.00	920.64
	<i>Cost for a recreational kit for the child friendly space including, including sport, art and music items. See BoQ recreational kit CFS attached. Refer 2.18 BoQ.</i>						
2.19	Snack for children	D	1	100.00	8	100.00	800.00
	<i>Snack for the children coming at the Child Friendly Space. The cost is estimated at 100 dollars per month. (maximum of 1600 children per month for a snack at around 0.06\$)</i>						
2.20	Support for volunter involve in the CFS	D	5	30.00	8	100.00	1,200.00
	<i>Support for the volunteers coming from the community involve in the CFS. The cost is estimated at 30 dollars per months per person and per months. The project will be able to provide support to 5 volunteers.</i>						
2.21	Support to case management in family tracing and reunification (transportation cost, medical fees,...)	D	1	50.00	25	100.00	1,250.00

	Estimated price to cover various cost for the case management in family tracing and reunification. This costs can include transport (20\$), medical fees (30\$)... The average cost per case is estimated at 50 dollars. The project plans to cover a least 25 cases.						
2.22	Communication (credit) costs for teams	D	8	5.00	8	100.00	320.00
	Communication cost estimated at 5 dollars per month per staff. The budget is planned for 8 CP staff during 8 months.						
2.23	Stationnaries and Supplies for case management, PSS	D	1	200.00	6	100.00	1,200.00
	Estimated at 200\$ per month (150\$ of paper and printing, 50\$ of pen, scissor,s tape.) , during 6 months						
2.24	Material for teams (jacket, water, cool box, bags...)	D	1	100.00	8	100.00	800.00
	100 dollars for each staff for material include (jacket (15\$), water (10\$), coold box (30\$), bags (45\$). Planned for 8 CP TGH staff.						
2.25	Printing documents (forms, guidelines, manuals,...)	D	1	100.00	6	100.00	600.00
	Estimated at 100\$ per month. (CFS attendance sheets 20\$, CFS daily logbook 20\$, registration form for children 20\$, service 20\$, referral form 20\$)						
2.26	Support referral and protection services to institutions (police, schools, court, etc.) in the affected locations and community level to prevent and respond to child rights violations, including SGBV and PSEA.	D	35	50.00	1	100.00	1,750.00
	"Estimated cost per case if the child needs transportation, medical cares (50\$ per case (20\$ for transportation, 30\$ for institution fees) for 35 cases managed by TGH within the project"						
2.27	Establish protection desk (chair, desk, stationnaries)	D	1	800.00	1	100.00	800.00
	Estimated cost equipped and run and protection desk at the CFS). office desk 250\$ office chair 125\$, cupboard 250\$, stationary 125\$, refreshment 50\$						
2.28	Training costs for strengthen community-based child protection networks (5 persons per network for 10 networks)	D	1	2,100.00	1	100.00	2,100.00
	Estimated cost for the training of 50 member of the community-based CP network. During 2 days training (5 member per network, with a total of 10 network targeted group, means 50 members in total). The costs include, transportation of the participant and the trainer (5.1219USD*50members*2days = 512.19\$), support to trainees (0.939USD*50 trainees*2 days=93.90\$), facilitator (53.3537USD*2 facilitators*2days*2session = 426.83\$), the stationary materiel (0.41685USD*2days*50person = 85.37\$), meal (4.6951usd*2days*50, members = 469.51\$), hall rental (106.7075USD*2days*2sessions = 426.83\$), refreshment (0.42685USD*50members*2sessions*2days = 85.37\$). The unit cost mentioned corresponding to the estimated price for one day of training.						
2.29	Community awareness sessions on Prevention and response to CP/SGBV cases and risk mitigation measures (leaflets, posters,...)	D	1	8,750.00	1	100.00	8,750.00
	Cost for community awereness session during 7 months, estimated at 312.5 dollars per month per villages/towns. 4 villages/towns will be targetted. The cost will include the production of leaflets 30\$, posters 22.50\$, Daily workers 60\$, car rental 200\$). (312.5*4*7 = 8750 USD)						
2.30	Cost for field implementation, monitoring and evaluation of CP activities (PDM, assessment, FGD)	D	1	501.12	1	100.00	501.12
	This line includes all the costs related to activities follow-up and monitoring (team meals 91.12\$, Thuraya and phone credits 100\$, HAC & line ministries fees 120\$, stationaries 90\$, documents printing 100\$, etc.) Costs are charged at 100% to this project.						
2.31	Distribution of disable tool for people with disability	D	32	45.31	1	100.00	1,449.92
	Disable tools will be distributed to 32 women and girls. The 45.31\$ will include the assessment (3\$), the purchase of the tool (35\$), the training to use the tool (5\$) and the PDM (2.31\$).						
2.32	Visibility	D	1	2,000.00	1	100.00	2,000.00
	Includes costs of visibility material and website maintenance for visibility. 1900 USD for website 1100 USD for poster, small banners "						
2.33	Guard for Child Friendgly Space Kereneik (Daily Worker)	S	2	237.50	8	100.00	3,800.00

	Guards for Child friendly space. 2 daily worker will be used for 8 months. 100% charged to SHF						
2.34	Program team field visit	D	2	658.26	1	50.00	658.26
	this cost refers to program team field visit which includes, (per diem, meal , local transport, lodging support cost to lien ministry) the unit cost per mission is 658.26 USD it will be for 2 missions and 50% cost is charged to SHF. 2 missions for 5 days each time during the project duration.						
2.35	Upgrade of one hand pump to Mini water yard	D	1	60,000.55	1	100.00	60,000.55
	This cost refers to upgrade of the Handpump in to Mini water yard in Sirba locality. The hand pump upgrade includes removed the hand pump parts and replaced by a submersible pump powered by solar system and a back of an electric generator, pipeline connected to an elevated water tank (27m3). Distribution point will be set up with 1 tap stand of 16 taps, and a drainage system. The distribution point will be protected by fences preventing animals from drinking directly from the source and power house will be constructed for the generator from CIS. Therefore, the total cost for one hand pump upgrade will be (\$60000.55*1) = \$60,000.55. Costs are charged at 100% to this project. Refer 2.35 BoQ						
2.36	Animal trough construction for Animal watering	D	1	9,306.00	2	100.00	18,612.00
	This cost refers to Animal trough construction in Sirba locality. The Animal trough construction includes procurement of Cement, Reinforcement steel, Binding wire, Sand, Gravel, Timber shutters, Nails, and Tool Therefore, the total cost for one Animal trough construction will be (\$9,306*1) = \$9306. Therefore, for two Animal trough construction 2*9306=\$18,612 USD. Costs are charged at 100% to this project. Refer 2.36 BoQ						
	Section Total						680,575.35
3. Equipment							
3.1	Laptop for program staff	D	3	1,208.34	1	100.00	3,625.02
	3 Laptop will be needed to implement the activities of the project. Laptops will be given to Program staff .						
3.2	Thuraya and accessories for Project office	S	1	1,500.00	1	100.00	1,500.00
	1 Thuraya for Krenink office with all accessories, to support TGH keep communication channel.						
3.3	Solar panel 300W project office	D	1	2,334.95	1	100.00	2,334.95
	The current shortage of fuel and high price would create more expense on running cost for this generator. Therefore we wanted have this alternate power solution. 1 Solar panel of 300 W to be installed in Krenink sub project office to provide ulternate power option.						
	Section Total						7,459.97
4. Contractual Services							
4.1	Vehicle Rental / Project Support (Geneina)	S	1	1,500.00	8	50.00	6,000.00
	Vehicle Rental for Project Support (Geneina) to be used to support project activities in area. 50% charged to SHF, Vehicle rental includes, fuel, driver						
4.2	Consutancy mission for PSEA training and awareness raising	D	1	4,000.00	1	100.00	4,000.00
	Local consultancy mission of 1 month for training and awareness raising on PSE., The cost include the cost of the consultant (3000\$), the transport (500\$) and the organization of the trainings and awareness session (500\$))						
4.3	Car rental for WASH activities follow-up	D	1	3,000.00	6	100.00	18,000.00
	TGH has no car at Geneina and Siba level. All activities will be implemented in Sirba. Therefore, TGH will have to rent cars to ensure the implementation and follow-up of WASH activities in Sirba. The car will be rent at Geneina level, with a driver. The cost for car rental for one month with driver and fuel is 3000\$ (136.37\$ per day that includes fuel, driver, rental cost).						
4.4	Car rental for Shelter activities follow-up	D	1	3,000.00	3	100.00	9,000.00
	TGH has no car at Geneina and Kereneik level. All activities will be implemented in Kereneik. Therefore, TGH will have to rent cars to ensure the implementation and follow-up of Shleter activities. The car will be rent at Geneina level, with a driver. The cost for car rental for one month with driver and fuel is 3000\$ (136.37\$ per day, 22 days per month, that includes fuel, driver, rental cost).						
4.5	Car rental for CP activities follow-up	D	1	3,000.00	3	100.00	9,000.00

	TGH has no car at Geneina and Kereneik level. All activities will be implemented in Kereneik locality. Therefore, TGH will have to rent cars to ensure the implementation and follow-up of CP activities. The car will be rent at Geneina level, with a driver. The cost for car rental for one month with driver and fuel is 3000\$ (136.37\$ per day, 22 days per month, that includes fuel, driver, rental cost).						
	Section Total						46,000.00
5. Travel							
5.1	WFP - TGH flights	D	6	200.00	8	50.00	4,800.00
	<i>"3 number of staff for 3 round trips which make 6 flights/trips per month. per trip/flight cost is 200 USD. we are using WFP flight for travel to Geneina/Khartoum. Refers to flying staffs travels (program Manager, Head of mission, head of program, wash coordinator ,Logistic coordinator, finance coordinator, deputy wash coordinator and all inpts based in Geneina) from Khartoum to the base for monitoring and support. Also regular travels for field based staffs for coordination meeting. 50% cost is charged to SHF. "</i> <i>field based staffs for coordination meeting. 50% cost is charged to SHF.</i>						
5.2	Expat Per diems Aid	D	3	690.48	8	50.00	8,285.76
	<i>Expat per diem 690.48 USD for 30days. (690.48/30= 23.016 USD Per day) 3 expat will receive this per diem. 50% charged to SHF, according to duration on the SHF project.</i>						
5.3	Expat Per diems Support	S	3	690.48	8	29.00	4,805.74
	<i>Expat per diem 690.48 USD for 30days. (690.48/30= 23.016 USD Per day) 3 expat will receive this per diem. 29% charged to SHF, according to duration on the SHF project.</i>						
	Section Total						17,891.50
6. Transfers and Grants to Counterparts							
6.1	AL Massar	D	1	22,430.96	1	100.00	22,430.96
	<i>"This cost will be allocated for national NGOs that will work on WASH-related activities in partnership with TGH. The cost will cover hygiene promotion activities such as production of IEC/BCC materials , distribution of soap for handwashing demonstration training, monitoring of the 5 hygiene key promotors, and awareness campaign during global event days. Costs are charged at 100% to this project "</i> <i>Cost for the implementation of the activities delegated to Al Massar in CP in the 3 nomadic villages targeted. The activities include15 case management, community sensitization sessions on prevention and response to CP/SGBV cases and risk mitigation measures, and strengthening/establishing of the community-based child protection networks to enhance child protection. Please refer 6.01 BoQ.</i>						
	Section Total						22,430.96
7. General Operating and Other Direct Costs							
7.1	Guest house/Office - Rent (Khartoum)	S	1	8,750.00	8	25.00	17,500.00
	<i>Guesthouse in Khartoum costs 4750 USD per month. 25% charged to SHF, rest of 75% charged to other projects Office costs 4000 USD per month. 25% charged to SHF, rest of 75% charged to other projects Includes the prices of the rental Guest house and office of Khartoum. 25% cost to charged to SHF.</i>						
7.2	Project Guest house/Office - Rent (Geneina, Krenink)	S	1	1,320.00	8	50.00	5,280.00
	<i>"Includes the prices of the rental Guest house and office of Geneina + kreinik. 50% cost is charged to SHF. rest of 50% charged to other projects. Office/Guest house Geneina 1200 USD, Kerenice is 120 USD"</i>						
7.3	Running cost (including water, waste, electricity, repairs) (Khartoum)	S	1	1,000.00	8	25.00	2,000.00
	<i>"2 months or 25% is allocated to hereby SHF project for Khartoum bases. Drinking water 100 bottles per months, estimated total costing estimated 266 USD garb collection 244 USD Per month Gass Baloon refill 70 USD for 3 cylender 420 USD electricty,"</i>						
7.4	Project office Running costs (including water, waste, electricity, repairs) (Geneina)	S	1	260.00	8	50.00	1,040.00

	<i>One month equivalent cost. 4 months 50% allocated to hereby SHF project for Geneina. Drinking water 50 bottles per months costing estimated total costing 135 USD garb collection 100 Per month Gass Baloon refill 25 for 1 cylender"</i>						
7.5	Office supplies and other consumables (Khartoum)	S	1	950.0 0	8	25.00	1,900.00
	<i>"Stationary 400 USD, 550 USD for cleaning material, One month equivalent cost. 2 months or 25% allocated to the hereby SHF project for Khartoum. "</i>						
7.6	Office supplies and other consumables (Geneina, Krenink)	S	1	500.0 0	8	50.00	2,000.00
	<i>"Stationary 200 USD, 300 USD for cleaning material, one month equivalent cost. 4 months or 50% allocated to the hereby SHF project for Geneina and Krenink."</i>						
7.7	Maintenance of vehicles and generators (Khartoum)	S	1	400.0 0	8	25.00	800.00
	<i>"Estimated monthly repair and maintenance works on TGH cars and generators 25 % of SHF budget (equivalent to 2 months over 8 months). The price are based on the actual market price. Generator: airfilter 40 USD oil filter 30 USD gas filter 50 USD service cost 45 USD. Vehicle: airfilter 80 USD oil filter 56 USD gas filter 54 USd service cost 45 USD"</i>						
7.8	Generator maintenance (Geneina, Krenink)	S	1	250.0 0	8	50.00	1,000.00
	<i>"Estimated monthly reparation and maintenance works on generators 50 % of SHF budget (equivalent to 4 months over 8 months). The price are based on the actual market price. " Generator: airfilter 60 USD oil filter 45 USD gas filter 75 USD service cost 70 USD.</i>						
7.9	Gasoline vehicles and generators (Khartoum)	S	1	950.0 0	8	25.00	1,900.00
	<i>"5 berrel per months 190 USD per baerrel 950 USD per month Contribution to the purchase of diesel fuel for the generators and cars.(equivalent to 2 months over 12 months = 25 % of SHF budget). The price are based on the market price) " "</i>						
7.10	Gasoline generators (Geneina, Krenink)	S	1	600.0 0	8	50.00	2,400.00
	<i>"3 barrels per month 200 USD per barrel. 600 USD per month Equivalent to one month cost. Contribution to the purchase of diesel fuel for the generators.(equivalent to 4 months over 8 months = 50 % of SHF budget). The price are based on the market price) "</i>						
7.11	Communication (telephone, Internet etc.) (Khartoum)	S	1	656.0 0	8	25.00	1,312.00
	<i>"Communication credit amount 166 USD. Internet cost 325 USD per month for office. 165 Usd for guest house. Lumpsum/month. For internet KRT, mobile and landline communications related to the project especially in the field for 2 months (25 % on shf projet)"</i>						
7.12	Project Communication (telephone, Internet etc.) (Geneina)	S	1	335.0 0	8	50.00	1,340.00

	"Internet cost per month 200 Usd per month. Communication credit 85 USD, 50 USD small internet device. Lumpsum/month. For internet, mobile and communications related to the project especially in the field for 4 months (50 % on shf projet)"						
7.13	HR and administrative costs	S	1	850.00	1	25.00	212.50
	This cost relates with documentation process for visa 285 USD, HAC governmental fee 515 USD, labor office administrative cost 50 USD. 25% allocated to SHF						
7.14	Legal Services	S	1	1,125.00	8	25.00	2,250.00
	"Legal services required by TGH on legal matters and opinion. Contract cost 1125 USD per month. 25% allocated in SHF"						
7.15	Security costs	S	1	2,000.00	1	50.00	1,000.00
	"26 Fireextingusher 33.1 USD, (860 USD). 22 torches per torch cost 20 USD. (440 USD) 10 Metle deductor each cost 70 USD, (700) It includes small security equipments, such as , tarch, metal detector, borbed wire, fire extinguisher etc. 50% allocated on SHF."						
7.16	PPE COVID-19	S	1	500.00	1	100.00	500.00
	"70 Face mask boxes cost 5 USD per box, (350 USD). 50 Hand sanitizers cost 2.5 USD per piece, (125 USD). 10 boxes of disposable gloves cost 2.5 USD, (25 USD). staff in capital and field offices. 100% cost allocation on SHF"						
7.17	Computers maintenance and spare parts	S	1	300.00	8	25.00	600.00
	keyboard, mouse, wires, cable etc and maintenance						
	Section Total						43,034.50
SubTotal			3,471.00				1,032,692.52
Direct							896,068.28
Support							136,624.24
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							72,288.48
Total Cost							1,104,981.00

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
West Darfur > Kreinik	73.00000	0	0	0	0		ESNFIs: Activity 1.1.1: Provision of shelter for the most vulnerable full... ESNFIs: Activity 1.1.2: Beneficiary identification and verification. ... ESNFIs: Activity 1.1.3: Post-Distribution Monitoring (PDM) PDM w... ESNFIs: Activity 1.1.4: Implementation of Feedback and complaint response... ESNFIs: Activity 1.1.5: Conducting awareness session concerning COVID-19 ... P: Activity 1.1.1: Psychosocial support to all children through chil... P: Activity 1.1.2: Case management with social workers for children ... P: Activity 1.1.3: Referrals to protection services and/or instituti... P: Activity 1.1.4: Strengthening/establishing community-based child ... P: Activity 1.1.5: Community sensitization sessions on prevention an...
West Darfur > Sirba	27.00000	0	0	0	0		WASH: Activity 1.1.1: NOT IMPLEMENTED: Drilling of 2 boreholes equipped... WASH: Activity 1.1.2: Rehabilitate existing 3 Hand pumps -Water points.... WASH: Activity 1.1.3: NOT IMPLEMENTED: Build capacities, provide traini... WASH: Activity 1.1.4: Distribute water quality supplies (at point of us... WASH: Activity 1.1.5: NOT IMPLEMENTED: Water quality monitoring WASH: Activity 1.2.1: Facilitate household sanitation improvement throu... WASH: Activity 1.3.1: District hygiene and sanitation advocacy, sensiti... WASH: Activity 1.3.2: NOT IMPLEMENTED: Provision of Menstrual Hygiene M... WASH: Activity 1.3.3: Hygiene promotion intervention through NGO - AI ...

Documents

Category Name	Document Description
Project Supporting Documents	CBPF 2020 identity guide_v01 (006).pdf
Project Supporting Documents	Copy of ERRM and PSEA Indicators.xlsx
Budget Documents	2.15.xlsxCanceled
Budget Documents	Canceled 2.20.xlsx
Budget Documents	2.21.xlsx
Budget Documents	Canceled 6.01.xlsx
Budget Documents	2.1 Hand Pump.xlsx
Budget Documents	2.2 BoQ for drilling and installation of HP.xlsx
Budget Documents	2.6 BoQ for CLTS activity.xlsx
Budget Documents	2.7 BoQ for hygiene promotion activity.xlsx

Budget Documents	2.8 BoQ for Hygiene kits.xlsx
Budget Documents	2.9 BoQ for Transportation cost for WASH supplies.xlsx
Budget Documents	4.3 BoQ for car rental for WASH activity follow -up.xlsx
Budget Documents	6.01 AL Massar.xlsx
Budget Documents	2.11 BoQ Shelter.xlsx
Budget Documents	2.18.xlsx
Budget Documents	2.15 (2) updated.xlsx
Grant Agreement	Grant Agreement TGH 21592.pdf
Grant Agreement	Grant Agreement TGH 21592 signed by HC.pdf
Grant Agreement	Grant Agreement TGH 21592 signed by HC and TGH.pdf
Grant Agreement	Grant Agreement TGH 21592 signed by HC and TGH.pdf
Grant Agreement	Grant Agreement TGH 21592 signed by HC and TGH.VF.pdf
Grant Agreement	EO Signed Grant Agreement SUD-21592.pdf
Revision related Documents	RFe-2022- New Detailed BoQ for WASH activities above 10k USD070822.xlsx
Revision related Documents	RFe-2022-New Revised WASH Activity Detailed BoQ 110822.xlsx
Revision related Documents	SHF Revision request _ HC Approval top up dry spell and crop failure projects.pdf
GA Amendment	Grant Agreement Amendment TGH 21592.pdf
GA Amendment	Grant Agreement Amendment TGH 21592 signed by HC.pdf
GA Amendment	Grant Agreement Amendment TGH 21592 signed by HC and IP.pdf
GA Amendment	SUD-21592_EO-GAA_2022-09-06 CE.pdf