

**SECRETARY-GENERAL'S PEACEBUILDING FUND  
PROJECT DOCUMENT TEMPLATE**



**PBF PROJECT DOCUMENT**

<b>Country(ies):</b> The Gambia	
<b>Project Title:</b> Promoting peace and social cohesion through provision of mental health services and psychosocial well-being of SGBV survivors in The Gambia	
<b>Project Number from MPTF-O Gateway (if existing project):</b> 00130106	
<b>PBF project modality:</b> <input checked="" type="checkbox"/> IRF <input type="checkbox"/> PRF	<b>If funding is disbursed into a national or regional trust fund (instead of into individual recipient agency accounts):</b> <input type="checkbox"/> Country Trust Fund <input type="checkbox"/> Regional Trust Fund <b>Name of Recipient Fund:</b>
<b>List all direct project recipient organizations (starting with Convening Agency), followed by type of organization (UN, CSO etc.):</b>  UNDP, UNFPA	
<b>List additional implementing partners, specify the type of organization (Government, INGO, local CSO):</b>  <ol style="list-style-type: none"> <li>1. Ministry of Gender, Children and Social Welfare – Government</li> <li>2. Ministry of Health - Government</li> <li>3. Ministry of Justice - Government</li> <li>4. Local Government Authorities – Government</li> <li>5. University of The Gambia - Government</li> <li>6. National Human Rights Commission – NHRI</li> <li>7. The Gambia Center for Victims of Human Rights Violations (the Victim’s Center) – CSO</li> <li>8. Network Against Gender Based Violence (NGBV) – NGO</li> <li>9. Peace of Mind (POM) – CSO</li> <li>10. Paradise Foundation Initiative– CSO</li> <li>11. Organization for social Innovation (OPI) – CSO</li> <li>12. Women in Leadership and Liberation - CSO</li> <li>13. Women Association for Victims’ Empowerment - CSO</li> <li>14. Centre for Research and Policy Development – CSO</li> </ol>	
<b>Project duration in months<sup>1</sup>:</b> 24 months with a NCE (initial project duration: 18 months; initial project end date: 30 June 2023 / new project end date: 31 December 2023 )	
<b>Geographic zones (within the country) for project implementation:</b> Lower River Region, North Bank Region, West Coast Region, Greater Banjul Area	
<b>Does the project fall under one or more of the specific PBF priority windows below:</b> <input checked="" type="checkbox"/> Gender promotion initiative <sup>2</sup> <input type="checkbox"/> Youth promotion initiative <sup>3</sup>	

<sup>1</sup> Maximum project duration for IRF projects is 18 months, for PRF projects – 36 months.

<sup>2</sup> Check this box only if the project was approved under PBF’s special call for proposals, the Gender Promotion Initiative

<sup>3</sup> Check this box only if the project was approved under PBF’s special call for proposals, the Youth Promotion Initiative

<input type="checkbox"/> Transition from UN or regional peacekeeping or special political missions <input type="checkbox"/> Cross-border or regional project		
<b>Total PBF approved project budget* (by recipient organization):</b> <b>UNFPA: \$ 800,000.48</b> <b>UNDP: \$ 697,378.92</b> <b>Total: \$ 1,497,379.40</b> *The overall approved budget and the release of the second and any subsequent tranche are conditional and subject to PBSO's approval and subject to availability of funds in the PBF account. For payment of second and subsequent tranches the Coordinating agency needs to demonstrate expenditure/commitment of at least 75% of the previous tranche and provision of any PBF reports due in the period elapsed. Any other existing funding for the project (amount and source):		
<b>PBF 1<sup>st</sup> tranche (70%):</b> UNDP: \$ 488,165.24 UNFPA: \$ 560,000.34  Total: \$ 1,048,165.58	<b>PBF 2<sup>nd</sup> tranche* (30%):</b> UNDP: \$ 209,213.68 UNFPA: \$ 240,000.14  Total: \$ 449,213.82	
<b>Provide a brief project description (describe the main project goal; do not list outcomes and outputs):</b>  <p>In The Gambia, sexual and gender-based violence (SGBV) was a reoccurring theme of the public hearings of the Truth, Reconciliation and Reparations Commission (TRRC). Dozens of survivors, which included both men and women, publicly testified about SGBV they encountered, from forced nudity and abortion, to molestation, sexual assault, and rape. SGBV is one of the most traumatic and pervasive, yet common life threatening and protection issues that human beings suffer, which can often affect survivors in several ways, including depression and Post-Traumatic Stress Disorder (PTSD). Horrifically, some of the most disturbing incidents examined by the TRRC over its 892 days of public hearings include systematic, state sanctioned sexual exploitation, violence, and rape of young women, and sexualized torture of men.</p> <p>The main goal of this Project is to contribute to peacebuilding and social cohesion through reducing the short- and long-lasting effects of SGBV on the mental health and psychosocial wellbeing of survivors, their families, and communities. The Project's interventions center first and foremost on the promotion and protection of the mental health and psychosocial wellbeing of SGBV survivors through the provision of services, community engagement, knowledge sharing and learning, as well as strengthening local and national institutional efforts and capacities to continuously address SGBV and promote mental health in The Gambia.</p> <p>The Project is timely and has been designed to respond to what will be a critical feature of the post-TRRC context in which it would be implemented, namely, the integration of Mental Health and Psychosocial Support Services (MHPSS) in the justice sector, as a means of ensuring that SGBV survivors can mitigate against the stress and other potentially negative effects of court hearings and other interactions with justice sector officials.</p>		
<b>Summarize the in-country project consultation process prior to submission to PBSO, including with the PBF Steering Committee, civil society (including any women and youth organizations) and stakeholder communities (including women, youth and marginalized groups):</b>  <p>This Project is the outcome of an inclusive and consultative process with implementing partners and stakeholders. At the inception stage of the proposal development, brainstorming sessions were initiated by UNDP, UNFPA and OHCHR with key partners (Ministry of Health, Ministry of Women, Children and Social Welfare, Ministry of Justice, TRRC, NHRC, CSOs) to discuss issues surrounding the post-TRRC context, particularly the unique experiences, human rights violations and needs of SGBV survivors vis-a-vis the status of MHPSS and preparedness of national and local structures to support these survivors, noting the destructive and pervasive nature of SGBV in a small country like The Gambia. A concept on strengthening mental health structures to promote and advocate for MHPSS of SGBV survivors in The Gambia was thereafter developed and shared with partners and stakeholders for their feedback, which has been reflected in this proposal.</p>		

**Project Gender Marker score<sup>4</sup>: GEWE - 3**

Specify % and \$ of total project budget allocated to activities in pursuit of gender equality and women's empowerment: 81.32 % (\$1,217,633.25)

**Briefly explain through which major intervention(s) the project will contribute to gender equality and women's empowerment<sup>5</sup>:**

This Project's gender marker score is 3 because all the proposed interventions have gender equality as a principal objective. Firstly, the Project's conflict analysis elaborates on the consequences of non-intervention on MHPSS for SGBV women survivors on one hand and men survivors on the other, both within targeted communities, and on national peacebuilding efforts. This gendered analysis is rooted in the pre-and post-TRRC context as well, noting pre-existing and still relevant socio-economic and political status of women in The Gambia, low access to services and how the highly participatory public hearing approach taken by the Commission has the more severe potential to affect the mental health of women more so than men SGBV TRRC witnesses, and survivors at large.

Thus, for this Project, whilst all interventions are designed to contribute to gender equality and women's empowerment, the most immediate Project interventions to do so relate to the swift and tailored provision of services, both MHPSS and economic initiatives, for SGBV survivors most in need, most of whom are women. These interventions will be spearheaded by mostly women and SGBV survivors themselves, to "do no harm," as well as enhance community and national ownership and sustainability of results.

**Project Risk Marker score<sup>6</sup>: 1**

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<sup>4</sup> **Score 3** for projects that have gender equality as a principal objective and allocate at least 80% of the total project budget to Gender Equality and Women's Empowerment (GEWE)

**Score 2** for projects that have gender equality as a significant objective and allocate between 30 and 79% of the total project budget to GEWE

**Score 1** for projects that contribute in some way to gender equality, but not significantly (less than 30% of the total budget for GEWE)

<sup>5</sup> Please consult the **PBF Guidance Note on Gender Marker Calculations and Gender-responsive Peacebuilding**

<sup>6</sup> **Risk marker 0** = low risk to achieving outcomes

**Risk marker 1** = medium risk to achieving outcomes

**Risk marker 2** = high risk to achieving outcomes

**Select PBF Focus Areas** which best summarizes the focus of the project (*select ONLY one*)<sup>7</sup>:

3.2 Equitable access to social services

If applicable, SDCF/UNDAF **outcome(s)** to which the project contributes:

1.2. Governance and Human Rights: Improving governance and fighting corruption - Institutional reforms implemented to ensure rule of law and guarantee the protection of the human rights of all, including access to justice, gender equality, access to basic services, and democratic participation in decision-making processes.

**Sustainable Development Goal(s) and Target(s)** to which the project contributes:

SDG 5, Target 5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.

SDG16, Target 16.1 Significantly reduce all forms of violence and related death rates everywhere.

SDG 16, Target 16.2 End abuse, exploitation, trafficking, and all forms of violence against and torture of children.

**Type of submission:**

- New project  
 Project amendment

**If it is a project amendment, select all changes that apply and provide a brief justification:**

**Extension of duration:**  6 months (initial project end date: 30 June 2023/  
new project end date: 31 December 2023)

**Change of project outcome/ scope:**

**Change of budget allocation between outcomes or budget categories of more than 15%:**

**Additional PBF budget:**  Additional amount by recipient organization:  
USD XXXXX

**Brief justification for amendment:**

A 6-month project extension is being sought to ensure full project delivery. After 12 months of implementation (January to December 2022), the project's delivery rate is at 45% mostly due to delayed recruitment of project staff.

Whilst implementation of UNFPA activities swiftly commenced in January 2022 with support of existing staff, UNDP has experienced delays in the recruitment of project staff, namely, the Project Coordinator, Human Rights Officer, and Project Associate, following centralized reforms in UNDP recruitment processes. Notwithstanding, an MHPSS Consultant was contracted in August 2022 to provide technical support to partners in the development of their activity proposals. In October and December, the Project Coordinator and

<sup>7</sup> **PBF Focus Areas** are:

(1.1) SSR, (1.2) Rule of Law; (1.3) DDR; (1.4) Political Dialogue;

(2.1) National reconciliation; (2.2) Democratic Governance; (2.3) Conflict prevention/management;

(3.1) Employment; (3.2) Equitable access to social services

(4.1) Strengthening of essential national state capacity; (4.2) extension of state authority/local administration; (4.3) Governance of peacebuilding resources (including PBF Secretariats)

Human Rights Officer were respectively onboarded and have since finalized with partners said activity proposals.

According to the financial spending plan, a total of 45% has been spent as of April 2023. The project has achieved some key results, such as :

- Training materials on MHPSS have been developed to support service providers at the grassroots level, and at the national level. These include a handbook on techniques to support those affected by SGBV, which guides on how to discuss MHPSS with communities in The Gambia and a presentation on SGBV and its mental health impacts.
- The capacity of the NHRC is strengthened through ongoing partnerships on a draft Mental Health Advisory Note, which is currently at a validation stage. This document reflects the MHPSS issues in the country and proffer relevant and effective interventions to address them.
- To enhance the healing of survivors and strengthen social cohesion, a community self-help capacitation for regional youth leaders is ongoing with the aim of achieving the project objective on strengthening the community peace structures. This will not only enhance healing, but also be one of the sustainability strategies to make the realization of the 'Never Again' slogan.
- The UNDP/OHCHR in March 2023 supported the She Awards Gambia team to identify and celebrate anti-SGBV persons and institutions championing the cause through its annual award show. 18 women were recognized for their contributions to SGBV work in The Gambia and the awardees included politicians, media personalities, legal practitioners, academics, local entrepreneurs, etc.
- Capacity building for key stakeholders to promote mental health, and provision of quality and comprehensive GBV and psychosocial services including livelihood support for survivors have been implemented. A total of 49 social and health workers (26 females and 23 males) were trained on MHPSS and psychosocial first aid over a period of five months. The training has increased the capacity of the health and social workers, promoted positive attitudinal change, and strengthened service delivery and quality of care for SGBV survivors, especially in One-Stop Centers.
- A Series of Community Healing Cycle sessions on MHPSS was conducted in six communities this included 40 GBV survivors (10 male and 30 female) that participated in the TRRC process. The sessions provided psychosocial counseling and therapy management to reduce mental health trauma, fostering reconciliation, healing, and peace.
- Thirty-Five survivors (28 female and 7 male) were referred for MHPSS services at the One Stop Center for the period under review. This shows the effectiveness of the dialogue sessions in the communities and the willingness of survivors to commence their healing process.
- 10 Survivors (2 male and 8 female) have concluded the economic and livelihood training to enhance personal empowerment this has equipped them with livelihood skills to create income aiding their reintegration back into society.
- The Ministry of Gender children and social welfare is being supported to develop the sexual offenses amendment bill in collaboration with

the Ministry of Justice to include the establishment of Gender-based Violence (GBV) special courts thereby increasing and improving access to services and justice for survivors.

- 812 people (428 female 384 male) across twelve targeted communities were reached through activities such as intergenerational dialogue sessions, community led peace talks and recreational activities such as football tournaments geared toward strengthening local peace structures to increase access to mental health and psychosocial support for SGBV survivors. These dialogue sessions will upscale and enhance reconciliation, and peacebuilding at the community level.

The main interventions to be completed within the 6 additional months, in the framework of the NCE include:

- The NCE is needed to complete the implementation of planned activities such as the digitalization of a board game developed by a partner on the mental health impacts of SGBV. Within the six months, a digital game developer will be contracted to support the digitalization process, to test, socialize and educate schools and communities on how to use the game.
- The six-month period would allow a greater time window in completing the project activities, which are currently underway. Community based victim support initiatives need more time to be impactful and sustainable. The six months extension will enable uninterrupted support to build agency and change relations and structures to support survivors.
- During the final months of the project (April-June 2023), the project team has committed to a comprehensive, robust, and independent final evaluation. The renewal of the project for 6months would allow for a greater preparatory stage ahead of the final project evaluation.
- Due to some challenges faced in MHPSS programming in The Gambia, UNDP in partnership with the United Nations Institute for Training and Research (UNITAR) will support the project team and partners who are already experiencing significant mental and physical health effects because of their exposure to the experiences of survivors like stress and trauma with PSS sessions after project end date. Therefore, additional time beyond the established expiration date is required to permit an orderly phase-out of the project.
- For longer term objectives, transitioning arrangements will be made during the six-month period to ensure processes and plans move to an operational state. The Ministry of Gender will continue to ensure sustainability of interventions and national ownership including engaging with networks.
- The transition arrangements within this extended six-month period will also include internal stakeholder and objectives review and lessons learnt by the project team.
- During the next six months the review of policies, frameworks and procedures on promotion and protection of mental health and psychosocial support services to survivors of SGBV will be implemented.

Advantages of a 6 month no-cost extension of the project

Whilst delayed recruitments have slowed implementation of the project in 2022, it is important to note that there are two important advantages to prolonged implementation of this project until December 2023.

- Alignment with and support towards the implementation of the Government's TRRC White Paper
- The Government's White Paper on the TRRC recommendations were released in May 2022 and in March 2023, the Government released its Implementation Plan on the White Paper, which details activities and resources required to achieve each of the accepted TRRC recommendations, the NCE period will benefit from the collective efforts made under this new framework, under Theme 11 which has seven key outcomes that focus largely on justice and accountability for SGBV crimes and legal reforms to prevent the re-occurrence of the violations.

Since May 2022, national institutions and CSOs have had opportunity to study the White Paper and make connections on how better to work on SGBV together. For example, through series of meetings held, partners have devised innovative ideas to implement a series of activities and seize every opportunity to popularize the TRRC recommendations and the Government White Paper in their advocacy work. Also, two partners have been able to identify a collaborative activity on a video documentary featuring victims of the witch hunt campaigns to increase awareness of and women's participation in the transitional justice process. Also, these meetings have given time for the project team to map out the project and identify possible areas of synergy in the White paper recommendations, like the support towards the Ministry of Gender and Ministry of Justice to facilitate the establishment of an SGBV court.

The MHPSS and wide post-TRRC project teams are working to ensure close coordination and promote cross-fertilization of ideas on the implementation of the Government's White Paper. For example, the team is working on ways to strengthen witness protection and assistance before and during trial to cope with the psychological and practical obstacles of testifying. Also, efforts are being made to coordinate awareness raising programmes targeting communities, criminal justice authorities, and other actors, and the team is working to provide more feedback mechanisms, for communities to share their feedback on how the TRRC recommendations will bring restitution to victims, their families, and communities. Combined, these efforts will help inform the joint objectives of these project and eliminate gaps. Essentially, allowing the project to continue implementation concurrent to the post-TRRC project gives several partners more time to thoroughly apply synergies and strengthen sustainability of results.

- Enhanced MHPSS knowledge amongst project partners

Whilst partners identified in the project document are deemed to be most suitable to support the implementation of the project, it remains that there are not sufficient mental health specialists to properly deliver psychosocial support

services to SGBV survivors, therefore the MHPSS Consultant continues to work very closely and cautiously with selected partners to ensure that suitable approaches are used to deliver services to survivors.

Overall, the partners have dedicated time to just focus on enhancing their knowledge before the project moves into implementing activities in local communities. This will have a positive effect on the quality of the services provided to survivors, their families, and communities. Partners may need more time to look at the situations in their communities and develop more innovative strategies to implement these confidently, without rush.

The additional six months of activity implement is expected to accompany partners in not only the implementation of activities, but also there'd be ample time for internal reflections and evaluations. For example, thanks to training manuals and sessions on the mental health impacts of SGBV by the MHPSS team, tailored to the local context and delivered in local languages, partners have been more empowered with techniques and strategies to provide trauma informed and community-based approach to dealing with individuals and communities affected by SGBV. It is advantageous to extend the project implementation timespan for partners to both execute and evaluate what they have learned through these trainings, with hopes of strengthening future programming on MHPSS in The Gambia.

*Note: If this is an amendment, show any changes to the project document in RED colour or in TRACKED CHANGES, ensuring a new result framework and budget tables are included with clearly visible changes. Any parts of the document which are not affected should remain the same. New project signatures are required.*



**PROJECT SIGNATURES:**

<p><b>Recipient Organization(s)*</b></p> <p><i>Aissata De</i></p> <p>Signature </p> <p>UNDP Resident Representative</p> <p>Date &amp; Seal</p> 	<p><b>Representative of National Authorities</b></p> <p><i>Hon. Fatou Kinteh</i></p> <p>Signature </p> <p>Minister of Gender, Children and Social Welfare</p> <p>Date &amp; Seal <i>30<sup>th</sup> May 2023</i></p> 
<p><i>Ndeye Rose Sarr</i></p> <p>Signature </p> <p>Representative, UNFPA</p> <p>Date &amp; Seal</p> 	
<p><b>Head of UN Country Team</b></p> <p><i>Seraphine Wakana</i></p> <p>Signature </p> <p>UN Resident Coordinator</p> <p>Date &amp; Seal <i>31/05/2023</i></p> 	<p><b>Peacebuilding Support Office (PBSO)</b></p> <p><i>Elizabeth Spehar</i></p> <p>Signature </p> <p>Assistant Secretary-General, Peacebuilding Support Office</p> <p>Date &amp; Seal <i>19 June 2023</i></p>

## I. Peacebuilding Context and Rationale for PBF support (4 pages max)

- a) A brief summary of **conflict analysis findings** as they relate to this project, focusing on the driving factors of tensions/conflict that the project aims to address and an analysis of the main actors/stakeholders that have an impact on or are impacted by the driving factors, which the project will aim to engage. This analysis must be gender- and age-responsive.

Former President Yahya Jammeh went into exile on 21 January 2017, leaving behind a legacy of human rights abuses and near empty coffers in The Gambia. He ruled for 22 years with an iron fist and little regard for democratic and human rights principles. Following the tension-filled but peaceful alternation of power from former President Jammeh to President Adama Barrow in January 2017, there was an urgent need for reforms to promote democratic governance, respect for the rule of law and human rights, socio-economic recovery, sustainable development, and peace in The Gambia. While considering which human rights and transitional justice mechanisms to establish, the Government set up a Panel of Missing Persons under the Ministry of Interior in February 2017, which over five months received about 40 complaints relating to unlawful killings, sexual violence and enforced disappearances. The Commission of Inquiry into the Financial Activities of Public Bodies, Enterprises and Offices, also known as the Janneh Commission, was established in July 2017 to investigate corruption by the former President Yahya Jammeh, his family members and close associates as related to public bodies. Thereafter, following nationwide consultations during which thousands of Gambians from a cross-section of society had the opportunity to express their views, concerns, and expectations of human rights and transitional justice, the National Assembly in December 2017 passed the Constitutional Review Commission (CRC) Act, the National Human Rights Commission (NHRC) Act and the Truth, Reconciliation and Reparations Commission (TRRC) Act.

The TRRC was mandated was to establish an impartial historical record of human rights violations<sup>8</sup>, grant interim reparations to victims and promote national reconciliation. The Commission commenced its operation in October 2018, following the swearing in of its 11 Commissioners, and is expected to submit its Final Report to the President soon. Section 30 of the TRRC Act lays out the Government's obligations towards the Commission's Final Report, whereby the Government's response to the recommendations made by the TRRC, also known as a "White Paper," must be published for public consumption no later than six months following the TRRC final submission. Considering the revelations made during its public hearings, as well as the nature and scope of its activities, the TRRC is expected to make findings and recommendations on many issues, including reparations for victims, the establishment of a national infrastructure for peace/national reconciliation mechanism(s), memorialization, security sector and other institutional reform, legislative reform, including Constitutional reform, the prosecution of persons responsible for the most serious human rights violations investigated by the TRRC, and amnesties.

In October 2019, the TRRC held its public hearings on SGBV and heard testimonies from 27 witnesses, 23 of whom were women, and all but one of whom testified about SGBV they encountered, from forced nudity and abortion to molestation and rape. The most disturbing incidents examined by the TRRC have included (i) the sexual violence and abuse of young women at scholarship pageant and the employment of State House "protocol girls"; (ii) rape and sexualized torture by state security officials of men and women detainees; (iii) violations committed as part of the infamous purge of "witches" and "wizards" and (iv) sexual violence during "the Presidential Alternative Treatment Program." Besides these themes, SGBV has appeared as a cross cutting issue in most of the 26 investigated themes of the TRRC. In most of these instances, sexual violence was committed against young women, except during the "witch hunt" campaigns, where mostly, elderly women were kidnapped and eventually sexually violated. Sexualized torture by state security officials affected men in The Gambia more than women, yet women were 3 times more likely to experience SGBV during unlawful detentions by state security officials, and these violations were nearly always perpetrated by senior government officials, including President Jammeh himself, according to the TRRC. According to the TRRC expert witness and women's rights advocate, Fatou Mbogge Barrow, SGBV is pervasive in The Gambia, and the previous regime's security apparatus was used as a tool by the State to destroy and instill fear in families and communities, whilst

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<sup>8</sup> [Mandate \(trrc.gm\)](#) Including killings, disappearances, torture and persecution, arbitrary imprisonment, false HIV treatment

perpetuated a dictatorship for over two decades- all in the smallest, and among the poorest country on mainland Africa.

Women and girls all over the world are disproportionately affected by SGBV because of societal norms regarding gender roles, harmful traditional norms, gender inequality and the acceptability of violence, but also in The Gambia, a rampant abuse of power by its former Government. A report from the TRRC indicates that most women lost confidence in ensuring meaningful participation in political processes as those who attempted were almost always harassed, and sometimes detained, tortured, and sexually violated. Combined, this has led to setbacks for gender equality, women, and empowerment in the country and exasperated opportunities for negative coping mechanisms for victims and survivors, such as substance abuse and induced aggressive behavior, which affects not only mental health and psychological wellbeing, but can also undermine the peace and social fabric of communities.

As the TRRC's mandate wraps up and its findings and recommendations are soon due, there is need to reflect and document on the status of SGBV in The Gambia, the contributions of the former regime in institutionalizing these violations, and more importantly, the impact of these violations on survivors, their families, and communities, as they undermine social cohesion and sustainable peace. Silence usually surrounds SGBV, and this leads to impunity. Eventually, the normalization of SGBV impacts negatively on peaceful coexistence. Worldwide, under reporting of sexual violence remains a phenomenon, but the shroud of secrecy surrounding sexual violence in The Gambia between 1994 and 2016 was exacerbated by fear of former President Jammeh regime's brutal suppression of dissent and impunity for violators, as described in an investigative report by TRIAL International, and the expert testimony of Dr. Abdoulaye Saine at the TRRC.

Thus, there are two strong reasons to address SGBV in The Gambia using MHPSS now, during its transitional justice context. Firstly, there is a need to address SGBV, especially against women, as a legacy of the dictatorship, but also because of the opportunities presented by the same transitional and TRRC context, where public discourse around these issues have significantly increased, as demonstrated in the proliferation of young women-led human rights organizations. Secondly, considering the widespread and pervasive nature of SGBV, it is of utmost national importance for peacebuilding that survivors are provided mental health services, rehabilitated, and empowered in their homes, communities, and as members of society. This Project will support mental health services that are community- based and community driven to promote proper reintegration, rehabilitation, reconciliation, and healing. For those survivors who may partake in the prosecution of perpetrators, specialized attention will be afforded to their needs as witnesses, considering the numerous challenges already faced by the justice sector in the prosecution of SGBV cases. Integrating MHPSS as part of the justices and services for SGBV survivors would reduce emotional distress, decrease suffering due to mental illness, improve the ability to function and cope, and strengthen resilience for survivors and their communities. For survivors who may testify before a court, MHPSS services would be essential to reduce stress and other potentially negative impacts of hearings and other interactions with justice sector officials.

- b) A brief description of how the project aligns with/ supports **existing** Governmental and UN **strategic frameworks**<sup>9</sup>, how it ensures **national ownership**. If this project is designed in a PRF country, describe how the main objective advances a relevant strategic objective identified through the Eligibility Process

This Project aligns itself with the UNDAF 2017-2022 and subsequent UN Sustainable Development Cooperation Framework to come in 2023. The Project also aligns itself with the National Development Plan 2018-2021, the National Human Rights Policy 2021-2025, the National Strategy on Transitional Justice, and the National Action Plan on UNSCR 1325 2021 – 2025.

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<sup>9</sup> Including national gender and youth strategies and commitments, such as a National Action Plan on 1325, a National Youth Policy etc.

This Project also aligns with the Government’s commitment to establishing a culture of human rights in The Gambia, by addressing issues of human rights abuses and ensuring the availability of services for survivors of abuses, in line with the work and recommendations of the TRRC.

- c) A brief explanation of how the project fills any strategic gaps and complements any other relevant interventions, PBF funded or otherwise. Also provide a brief **summary of existing interventions** in the proposal’s sector by filling out the table below.

This Projects complements the recently concluded PBF funded Transitional Justice and Human Rights Project, jointly implemented by OHCHR and UNDP between May 2017 and July 2021 and aimed at increasing the capacity of the Government to establish and oversee credible transitional justice and human rights mechanisms and processes that promote reconciliation and peacebuilding in The Gambia. This Project also complements a UNDP project on intensifying support to SGBV survivors to participate in the TRRC process, funded by the Government of Ireland and implemented between January 2020 and June 2021. This Project would consolidate gains of these projects, and also act as a follow-up project for both projects, with a focus on continued provision of essential support services for both women and men SGBV survivors, as well as continued engagement with local and national structures to promote and protect the rights of SGBV survivors.

This is a gender equality and women’s empowerment project, focused on the provision of MHPSS and other support services to SGBV survivors by local and national structures, but because it is being implemented in a post-TRRC context, this Project responds as well to the special needs of to support the justice component of a post-TRRC Gambia. Thus, this Project has been closely designed in conjunction with the design of a wider PBF funded post-TRRC project, aimed at supporting the Government to implement the recommendations of the TRRC, to avoid duplication and reinforce synergies. In this regard, this Project would assist the Government in the realization of some TRRC recommendations on the provision of MHPSS for victims and the increased capacity of local and national structures to promote and protect human rights, whilst responding to victims’ needs, and consequently in the case of SGBV survivors, promote gender equality and women’s empowerment in The Gambia.

Further, a large component of the post-TRRC project on implementation of TRRC recommendations pertains to enhancing the capacity of the justice sector (Ministry of Interior (Police), Ministry of Justice (SGBV Unit) and Judiciary) to handle cases recommended for prosecution. In this regard, this Project will work with the same justice sector actors to ensure access to justices for SGBV survivors, enhanced capacity of justice actors to manage the special needs of SGBV survivors, and provision of critical MHPSS services to SGBV survivors to interface with justice sector actors. This Project thus carves out a niche within the wider post-TRRC project’s justice interventions insofar as the handling of SGBV cases and survivors are concerned.

<b>Project name (duration)</b>	<b>Donor and budget</b>	<b>Project focus</b>	<b>Difference from/ complementarity to current proposal</b>
Strengthening community access to justice, community policing and effective SGBV Response (UNDP, UNFPA, UNICEF)  (March 2020 – March 2022)	PBF funded \$1,649,988	One of this project’s main components focuses on ensuring effective response to SGBV survivors. In this regard, structures were put in place to ensure integrated and standardized response to SGBV survivors, which included psychosocial support.	This project will further consolidate and build on the gains and lessons learnt through the access to justice project by strengthening institutions and providing quality services on MHPSS to survivors of SGBV. The already existing One Stop Centers will be further strengthened and capacitated to

		One Stop Centers were piloted and supported to provide integrated and holistic services to survivors. A standardized GBV Case management training was also provided to service providers to ensure a survivor centered approach is instituted.	provide quality MHPSS services.
Support to the monitoring and implementation of the Truth, Reconciliation and Reparations Commission (TRRC) recommendations in The Gambia (jointly implemented by UNDP and OHCHR)  (November 2021 – May 2024)	PBF funded. \$3,500,000	Support the Government to establish frameworks required for TRRC recommendations to be implemented, support the actual implementation of some recommendations, in relation to reparations, reconciliation and memorialization. Support the justice sector to handle cases emanating from the TRRC recommendations.  Support the NHRC and CSOs to disseminate, advocate, monitor and report on TRRC recommendations and status of implementation.	This Project is different but complements this greater post-TRRC project. This Project is more focused- on gender equality and women’s empowerment and not the promotion and protection of human rights generally, on SGBV survivors and not the whole victim community, in specific communities and not the whole country, in the provision of MHPSS and no other support services, and implementation of the TRRC recommendations insofar as they relate to the handling of SGBV cases by the justice sector.

**II. Project content, strategic justification and implementation strategy (4 pages max Plus Results Framework Annex)**

- a) A brief **description of the project** focus and approach – describe the project’s overarching goal, the implementation strategy, and how it addresses the conflict causes or factors outlined in Section I (must be gender- and age- responsive).

This is a gender-equality, and women’s empowerment project aimed at reducing the prevalence and impact of SGBV against women in The Gambia by firstly, promoting and protecting the mental health and psychosocial wellbeing of SGBV survivors through knowledge sharing and learning, and strengthening institutional efforts and capacities (local and national) to address SGBV. Equally, the Project seeks to seize opportunities presented by the ongoing transitional justice process and respond to the unique experiences of SGBV survivors of the



previous regime, to provide adequate and effective MHPSS to enhance their meaningful participation in prosecutions and support their socio-economic rehabilitation into their homes and communities. Consequently, the Project would respond to UPR recommendations for The Gambia, including - Ensure access to basic health care to all, in cities as well as in rural areas. - Strengthen implementation of legislation and policies aimed at combating violence against women and domestic violence, including through the establishment of programmes to provide psychosocial, medical, police and legal services to survivors of gender-based violence.

The long-term goal of this project is to contribute to peacebuilding and social cohesion by reducing the short- and long-lasting impact of SGBV on the mental health and psychosocial wellbeing of survivors, their families, and communities. Interventions are designed and will be implemented to do no harm, and to mitigate against the doing of no harm by project actors. Attention will be paid to addressing stigma-related concerns SGBV survivors face in accessing and participating in justice processes, as well as improving community reintegration. This Project will also adopt a community-based approach in building resilient communities and foster sustainable peace, by strengthening the capacity of local dispute resolution mechanisms to be more inclusive, participatory, representational, transparent, and accountable. Finally, project interventions will strike a balance between community sensitization, including availability of services for survivors, capacity building for a wide array of relevant actors, and increase opportunities for concrete solutions for economic empowerment, through community driven skill transfer SGBV survivors, designed to create alternative livelihood and diversification of economic options without exposing SGBV survivors to prejudice and harm.

- b) Provide a **project-level ‘theory of change’** – explain the assumptions about why you expect the project interventions to lead to changes in the conflict factors identified in the conflict analysis. What are the assumptions that the theory is based on? Note, this is not a summary statement of your project’s outcomes.

Results	Assumptions
Improved mental health of SGBV survivors to enhance their meaningful participation in prosecutions and support their socio-economic rehabilitation into their homes and communities	Improved mental Health enhances meaningful participation in the justice process and in turns leads to peace.
Survivors of SGBV’s mental health and wellbeing improved and institutions and community structures strengthened with capacities, skills, and knowledge to promote community MHPSS	A well capacitated institution and community with basic mental health and counselling skills will be a great support system in the health process for the survivors of all human right abuse and in building a sustainable peace in the communities.
MHPSS is integrated as part of the justice systems and ensures availability of critical services for SGBV survivors hereby reducing stress and other potentially negative impacts of hearings and other interactions with justice sector officials.	The justices/legal systems and institutions with incorporated MHPSS support services will greatly reduce stress and psychological trauma survivors pass through in the hearing process.  Improved justice systems will be strong tools for peacebuilding in the communities

*(Note: Change may happen through various and diverse approaches, i.e. social cohesion may be fostered through dialogue or employment opportunities or joint management of infrastructure. The selection of which approach should depend on context-specific factors. What basic assumptions about how change will occur have driven your choice of programming approach?)*

- c) **Provide a narrative description of key project components** (outcomes and outputs), ensuring sufficient attention to gender, age and other key differences that should influence the project approach. In describing the project elements, be sure to indicate important considerations related to sequencing of activities.

**Outcome 1: SGBV survivors fully participate in the transitional justice process, including justice initiatives and reparations, due to increased access to MHPSS services.**

**Output 1.1.** Key institutions, structures and platforms and stakeholder's capacities strengthened to promote mental health, provision of quality and comprehensive GBV and psychosocial services for the survivors.

- 1) Support the capacities of National Human Rights Commission, CSOs and community structures to monitor and report SGBV. **ongoing**
- 2) Capacity building for social and health workers on MHPSS and case management. **completed**
- 3) Promote safe community spaces to provide MHPSS using peer to peer support, inter-generational dialogues, awareness raising, and peacebuilding activities. **ongoing**
- 4) Review of policies, frameworks and procedures on promotion and protection of mental health and psychosocial support services to survivors of SGBV. **ongoing**
- 5) Support the development of comprehensive policy framework SOPs for providing MHPSS to survivors of SGBV. **ongoing**

**Output 1.2** Capacity of multidisciplinary service providers that deal with cases of SGBV are strengthened to provide coordinated services and promote and protect the mental health and psychosocial needs of SGBV survivors.

- 1) Provision of MHPSS and GBV services using group and "one-on-one" counselling sessions at services delivery points and within the communities. **ongoing**
- 2) Conduct GBV services mapping in project locations and produce pictorial MHPSS and GBV referral pathways. **ongoing**
- 3) Provision of specialized trainings to all actors who interact with SGBV survivors (police officers, lawyers, judges, medical personnel, formal and informal psycho-social support actors, staff of the One Stop Centers, the SGBV Unit of the Ministry of Justice, investigators, and case workers at the National Human Rights Commission. **ongoing**
- 4) Procure essential materials, dignity kits, logistic support, and other risk mitigation items in ensuring equitable participation in the access to justices' processes. **completed**
- 5) Support coordination platforms at the Ministry of Gender, the Ministry of Justice SGBV Unit and Ministry of Health in improving MHPSS response. **ongoing**

**Output 1.3:** The livelihoods of selected SGBV survivors and communities are supported to promote resilience and improve wellbeing.

- 1) Conduct assessment of the livelihood needs of SGBV survivors in generating baseline evidence. **completed**
- 2) Development of a gender sensitive framework, rooted in the do no harm principle, that supports the provision of services for SGBV survivors. **completed**
- 3) Empower vulnerable women and girls, including SGBV survivors, using models that empower the survivors' economic sustainability. **completed**

**Outcome 2: Peaceful co-existence is enhanced at community level by integrating MHPSS in community and justice structures.**

**Output 2.1.** Local peace structures to increase access to mental health and psychosocial support for SGBV survivors are enhanced.

- 1) Trainings for local peace structures, including community police, on SGBV and its impact on the mental health of survivors, children, and communities, reducing stigma and promoting community-based approaches to psychosocial support. **ongoing**
- 2) Special attention to women-led local peace structures engagement with community, traditional, religious leaders, influential youth, and the media to build their knowledge on SGBV and mental health. **ongoing**
- 3) Engagement of traditional communicators, most of whom are women, to conduct community sensitizations on SGBV that shifts the narrative from victim blaming and focuses more on access to support services and holding perpetrators accountable. **pending**
- 4) Identification of champions and establishment of informal anti-SGBV networks linking community leaders, to champion the cause in each region of the country and provide sustainable support to such networks. **pending**

**Output 2.2.** Local peace structures have adequate capacities to incorporate MHPSS into peacebuilding initiatives.

- 1) Research and training of local peace structures on the impact of trauma, SGBV on community cohesions, including training of informal actors (community leaders) providing MHPSS **ongoing**.
- 2) Support the implementation of community-based initiatives (with particular focus on those spearheaded by women) that seek to restore relationships and the social fabric that binds and supports people within their communities as a means of ending cycles of violence. **ongoing**

**Use Annex C to list all outcomes, outputs, and indicators.**

- d) **Project targeting** – provide a justification for geographic zones, criteria for beneficiary selection, expected number and type of stakeholders/beneficiaries (must be disaggregated by sex and age). Indicate whether stakeholders have been consulted in the design of this proposal. Do not repeat all outputs and activities from the Results Framework.

Communities and regions were selected based on the needs and locations of the survivors who testified at the TRRC. The selection of the beneficiaries will use a mix of approaches, which include vulnerability mapping outcomes, safety mapping exercises, gender age markers, needs assessment and identified needs of survivors based on the TRRC reports and recommendations. The project plans to target 350 direct beneficiaries (women, girls, men, and boys) and 650 indirect beneficiaries. The direct beneficiaries include SGBV survivors, social workers who will be trained, stakeholders from different ministries trained to provide basic counselling services and women and girls capacities with skills on alternative sources of livelihood. The indirect beneficiaries will comprise of the community members, religious and traditional institutions.

### **III. Project management and coordination (4 pages max)**

- a) **Recipient organizations and implementing partners** – list all direct recipient organizations and their implementing partners (international and local), specifying the Convening Organization, which will coordinate the project, and providing a brief justification for the choices, based on mandate, experience, local knowledge and existing capacity.

Agency	Total budget in previous calendar year	Key sources of budget (which donors etc.)	Location of in-country offices	No. of existing staff, of which in project zones	Highlight any existing expert staff of relevance to project



<p>Convening Organization: UNDP</p>	12,1 million USD	<p>PBF</p> <p>UNDP Core Resources</p> <p>Government of The Gambia</p> <p>GEF</p>	UN House	54	<p>Programme Specialist – Head of Governance</p> <p>Programme Analyst – Governance</p> <p>Chief Technical Adviser – Rule of Law</p> <p>M&amp;E Specialist</p>
<p>Implementing partners:</p> <p>Ministry of Justice</p> <p>National Human Rights Commission</p> <p>Women in Leadership and Liberation (CSO)</p> <p>Women Association for Victims’ Empowerment (CSO)</p> <p>Victims Centre (CSO)</p>					
<p>Recipient Organization: UNFPA</p>	3.2 million USD	<p>PBF</p> <p>UNFPA Core Resource</p> <p>Government of Italy</p> <p>UNTFHS</p> <p>MPTF</p>	UN House	20	<p>Gender/ GBV Programme Specialist</p> <p>PBF Programme Manager</p> <p>(The CSO Peace of Mind also boosts of a clinical psychologist, psychotherapist, social workers, SGBV case manager and students of psychology under supervision)</p>
<p>Implementing partners:</p> <p>Ministry of Gender, Children and Social Welfare</p> <p>Ministry of Health</p> <p>Local Government Authorities</p> <p>Peace of Mind (CSO)</p> <p>Network Against Gender Based Violence (CSO)</p> <p>Paradise Foundation (CSO)</p> <p>Organization for social Innovation (CSO)</p>					

- b) **Project management and coordination** – Indicate the project implementation team, including positions and roles and explanation of which positions are to be funded by the project (to which percentage). Explicitly indicate how the project implementation team will ensure sufficient gender or youth expertise. Explain project coordination and oversight arrangements and ensure link with PBF Secretariat if it exists. Fill out project implementation readiness checklist in **Annex A.1** and attach key staff TORs.

UNDP will recruit a Gender Specialist / Project Coordinator covered 100% by Project funds, to ensure smooth implementation of UNDP led project activities, complement technical input by the UNFPA GBV Gender Specialist (P4) and ensure project quality assurance. The Project will cover 100% of the salary of a Project Assistant to be recruited by UNDP, to support administrative and financial processes. UNDP will also recruit one OHCHR National Human Rights Officer, whose salary (100%) will be charged to this Project, and who will work across all project activities and lead on human rights capacity building initiatives, particularly on monitoring and reporting by the NHRC and CSOs. All costs associated with this OHCHR staff's management (office rent, computer, furniture, phone, access to UN House Clinic etc.), will be catered for from funds received by UNDP. Finally, UNDP will recruit one national intern under this Project.

UNFPA's GBV Gender Specialist (P4) will provide technical guidance, ensure overall project quality assurance, including that gender issues are well mainstreamed at all levels of implementation, with 50% of salary charged to this Project. UNFPA's National PBF Project Manager will also support Project coordinate activity implementation, with 50% of salary also charged to this Project.

This Project team will meet monthly to review project implementation and progress. The Project team will work closely with other national technical experts, as well as the PBF Secretariat during the project implementation and monitoring processes to support coordination with other PBF projects, and joint PBF monitoring and evaluation.

A project steering committee will be constituted, comprising of key stakeholders, including UN, Government, and civil society. This Committee will meet at least twice annually to review project outcome progress, assess continuing relevance of project strategy and theory of change, and make decisions on any significant deviations as well as approval of annual work plans.

- c) **Risk management** – Identify project-specific risks and how they will be managed, including the approach to updating risks and making project adjustments. Include a Do No Harm approach and risk mitigation strategy.

<b>Project specific risk</b>	<b>Risk level (low, medium, high)</b>	<b>Mitigation strategy (including Do No Harm considerations)</b>
Availability of comprehensive MHPSS services	Low	Deploy currently trained social workers and build the capacities of health and social workers, and communities to provide basic mental health services
Trust is built between community and services providers and human right agencies  Community leaders will be identified and selected/elected at regional level to be part of the process	Medium	Focused and continuous engagement and dialogue with traditional and religious leaders especially traditional chiefs and elders using lessons learned.  Sensitization and empowerment of women traditional and political leaders to understand, mobilize against, and desist from engaging in women

		protection issues including gender equality.  Dissemination of information on strategy and advantages on addressing Mental health needs of SGBV survivors
Stakeholders especially government will commit to the process	Low	Direct participation of civil society and all national partners  Regular monitoring and technical support provision.
GBV Risk mitigation measures are integrated into the livelihood empowerment programme	Low	Adapt modality of livelihood that empower the individual through community systems.
Inadequate MHPSS protection policy/legal framework	Low	Ensure the availability of SOPs and framework supporting the management of MHPSS in the country
Challenges in implementation and delivery of results	Low	Adopt clear implementation, monitoring, and reporting deliverables. Regular monitoring, evaluation to take corrective action jointly by government, partners, and UN

- d) **Monitoring and evaluation** – Describe the M&E approach for the project, including M&E expertise in the project team and main means and timing of collecting data? Include: a budget break-down for both monitoring and evaluation activities, including collection of baseline and end line data and an independent evaluation, and an approximate M&E timeline. Fund recipients are obligated to reserve at least 5-7% of the project budget for M&E activities, including sufficient funds for a quality, independent evaluation.

The Project team will develop and implement a Monitoring and Evaluation (M&E) Plan with dedicated support from M&E Specialists from UNDP and the PBF Secretariat, and the Project Steering Committee will oversee the successful implementation of this Plan by holding bi-annual meetings to discuss the status of project implementation, and to ensure efficient resource utilization, accountability, transparency, and integrity.

UNFPA has the technical lead and will provide the expertise needed in providing quality MHPSS services in ensuring standards. Tracking the achievement of planned results for each activity within the annual work plan and reporting progress to the Project Board and giving feedback to the implementing partners will be the responsibility of the UNFPA PBF Project Manager. The Project Manager, in collaboration with the Steering Committee will ensure that selected implementing partners will develop a results-based monitoring plan. The plan will have gender-sensitive SMART indicators, which will facilitate effective monitoring. The Project Manager will provide semi-annual reports to the Project Board or as often as the Steering Committee requires. The Project will be subject to an independent evaluation within 3 months of project closure. At this venture, a final report will be prepared by the Project Manager, which includes lessons learned and good practices derived from the independent evaluation, submitted for review and consideration during the final Project Steering Committee meeting.

- e) **Project exit strategy/ sustainability** – Briefly explain the project’s exit strategy to ensure that the project can be wrapped up at the end of the project duration, either through sustainability measures, agreements with other donors for follow-up funding or end of activities which do not need further support. If support from other donors is expected, explain what the project will do concretely and proactively to try to ensure this support from the start. Consider possible partnerships with other donors or IFIs.

The Project has sustainability and exit plans built into its implementation at outcome and output levels, by strengthening human resource capital and institutional capacities of government and the communities to promote sustainability of the achieved results during the project.

Under Outcome 1, the Project will strengthen the capacity of critical stakeholders and trained active members of local communities, including health workers, community leaders, social workers, and other government officials in various areas to ensure sustainability of the achieved results during the project. The provision of MHPSS services will be institutionalized into the integrated One Stop Centers and community health centers, with a strengthened referral mechanism in place.

The Project will adopt community sustainable economic empowerment initiatives. The Village Saving and Loading (VISLA) model will be adapted, which involves training of women and girls on livelihood skills, financial management, and small grants to beneficiaries and establishment of community cooperatives. This will ensure sustainability, promote social cohesion, and the do no harm principle, and mitigate against risks associated with dealing with survivors. The community livelihood programmes are self-sustaining and will continue to generate income after the end of the programmes. The empowerment programme will be contextualized via local market-based assessments. This will be done to ensure the vocational skills acquired are compatible with local markets and needs.

To ensure safe, dignified, and meaningful access to services for SGBV survivors, UNFPA will ensure inclusiveness during the design of the skill empowerment programme and promote participation at all levels to enable community-based decision-making. In addition, to decrease stress, further promote self-esteem, and strengthen the sense of control, UNFPA will integrate psychosocial support as part of the skill empowerment. This activity will promote resilience at a community-level by injecting cash into the local market, facilitate enhanced income of affected people and create skilled human capital.

Under Outcome 2, the Project will work closely with the justice sector, including community policing systems to integrate monitoring and reporting of human rights abuse into their routine response to crime within the community. The proposed interventions are in tandem with the recommendations of the TRRC and will be contribute to the Government’s broader response to the needs of SGBV survivors.

#### **IV. Project budget**

Provide brief additional information on project costs, highlighting any specific choices that have underpinned the budget preparation, especially for personnel, travel or other indirect project support, to demonstrate value for money for the project. Proposed budget for all projects must include sufficient funds for an independent evaluation. Proposed budget for projects involving non-UN direct recipients must include funds for independent audit. Fill out **Annex A.2** on project value for money.

Please note that in nearly all cases, the Peacebuilding Fund transfers project funds in a series of performance-based tranches. PBF’s standard approach is to transfer project funds in two tranches for UN recipients and three tranches for non-UN recipients, releasing second and third tranches upon demonstration that performance benchmarks have been met. All projects include the following two standard performance benchmarks: 1) at least 75% of funds from the first tranche have been committed, and 2) all project reporting obligations have been met. In addition to these standard benchmarks and depending on the risk rating or other context-specific factors, additional benchmarks may be indicated for the release of second and third tranches.

Please specify below any context-specific factors that may be relevant for the release of second and third tranches. These may include the successful conduct of elections, passage of key legislation, the standing up of key counterpart units or offices, or other performance indicators that are necessary before project implementation may advance. Within your response, please reflect how performance-based tranches affect project sequencing considerations.

Fill out two tables in the Excel budget **Annex D**.

In the first Excel budget table in Annex D, please include the percentage towards Gender Equality and Women's Empowerment (GEWE) for every activity. Also provide a clear justification for every GEWE allocation (e.g. training will have a session on gender equality, specific efforts will be made to ensure equal representation of women etc.).

## **Annex A - Addendum**

***How will the Project outputs and activities (especially under Outcome 1) be adapted during implementation to accompany the transitional justice and post-TRRC process?***

Outcome 1 of this Project will enhance interventions under Outcome 2 of the post-TRRC project by ensuring that specialized capacity is provided for justice sector actors to handle SGBV cases expected to emanate from TRRC recommendations, and that SGBV survivors themselves are prepared to undergo interactions with this sector, thanks to the provision of adequate mental health, psychosocial and other support. Discussions around SGBV arose in nearly all the TRRC's 22 thematic hearings, which confirms that these violations and abuses were amongst the most re-occurring during the former regime. Yet the TRRC has been criticized for not questioning alleged or confessed perpetrators on the issue as much as it should have, particularly when it involved the violation of women in detention. Outcome 1 of this Project aims to remedy this gap, and overall, this Project will accompany the post-TRRC process and timeline to ensure the full participation of SGBV survivors and advocates at all stages, whilst reinforcing national and local capacities to respond to or prevent SGBV. To ensure close coordination of both projects, and promote cross-fertilization of ideas, best practices and lessons learnt, whilst aligning activities, these two projects will commence at the same time (January 2022) and share the same Technical Committee and Project Steering Committee members.

***What pre-cautions/do no harm approaches will the project take given the sensitivity of the support provided?***

Victim and women-led associations have been instrumental in this Project's design and will remain as key driving partners throughout implementation, providing the critical role of employing a case-by-case approach to activity roll out and, being a conglomerate of direct and indirect victims themselves, providing critical feedback and observations from victims' perspectives. Project staff and identified national MHPSS providers will from the onset undergo a series of trainings, workshops, and mentorship programmes before interfacing with identified SGBV survivors or their communities. Whilst building on already existing capacities within the Ministry of Health, Ministry of Gender, justice sector actors (Ministry of Justice, Police, Prisons and Judiciary), and CSOs, these trainings would seek to align standards with those prescribed in UN Policies and Protocols on Preventing Sexual Exploitation and Abuse, including the Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse, and the Protocol on Allegations of Sexual Exploitation and Abuse Involving Implementing Partners. Where found to be lacking, appropriate guidelines, manual, protocols, or standard operating procedures will be developed for MHPSS providers, drawing from a long list of useful documents on various types of support for SGBV survivors by UNFPA, OHCHR and UNDP.

***Does UNDP or UNFPA have any expertise in providing mental health support or would expert advice be sought from the World Health Organisation?***

Though neither agencies have expertise in providing mental health support, UNDP, OHCHR and UNFPA do have strong partnerships with national authorities and organizations that do, and one of the project's do no harm approaches is to work with national experts who are familiar with the various local contexts to provide MHPSS for SGBV survivors. UNDP and OHCHR have worked closely with social workers and counsellors at the Department of Mental Health (Ministry of Health), as well as the Department of Social Welfare (Ministry of Gender) on the provision of MHPSS for TRRC victims during the TJHR Project. UNFPA in addition, frequently engages the organization Peace of Mind, which is led by an in-house clinical psychologist who provides treatment to SGBV survivors and trainings to other providers through UNFPA's other programmes. Nonetheless, and despite the absence of a WHO mental health adviser in The Gambia, the Project will seek expert advice and support from the WHO Office in The Gambia, particularly in identifying, engaging, and building the capacity of existing national mental health workers and providers.

**Annex A.1: Checklist of project implementation readiness**

Question	Yes	No	Comment
<b>Planning</b>			
1. Have all implementing partners been identified? If not, what steps remain and proposed timeline	X		
2. Have TORs for key project staff been finalized and ready to advertise? Please attach to the submission			Attaching OHCHR Human Rights Officer's ToR.
3. Have project sites been identified? If not, what will be the process and timeline	X		
4. Have local communities and government offices been consulted/ sensitized on the existence of the project? Please state when this was done or when it will be done.	X		Government and grassroots CSOs have been consulted, including victims' organizations. Further engagements and sensitization will occur at project onset.
5. Has any preliminary analysis/ identification of lessons learned/ existing activities been done? If not, what analysis remains to be done to enable implementation and proposed timeline?	X		Preliminary analysis and lesson learnt exist from the TRRC, but baseline assessment will be conducted before the start of the project
6. Have beneficiary criteria been identified? If not, what will be the process and timeline.	X		Furthermore, the beneficiaries will be selected based on need
7. Have any agreements been made with the relevant Government counterparts relating to project implementation sites, approaches, Government contribution?	X		
8. Have clear arrangements been made on project implementation approaches between project recipient organizations?	X		
9. What other preparatory activities need to be undertaken before actual project implementation can begin and how long will this take?		N/A	
<b>Gender</b>			
10. Did UN gender expertise inform the design of the project (e.g. has a gender adviser/expert/focal point or UN Women colleague provided input)?	X		The UN Gender Focal point are leading the writing and design of the project

11. Did consultations with women and/or youth organizations inform the design of the project?	X		
12. Are the indicators and targets in the results framework disaggregated by sex and age?	X		
13. Does the budget annex include allocations towards GEWE for all activities and clear justifications for GEWE allocations?	X		Project outputs and outcomes will contribute to advancing gender equality and women's empowerment. The project provides opportunity for advancing an enabling environment for legislative actions against GBV and other human right abuses, which will promote better transparency and accountability to achieving gender equality and women's empowerment

#### Annex A.2: Checklist for project value for money

Question	Yes	No	Project Comment
1. Does the project have a budget narrative justification, which provides additional project specific information on any major budget choices or higher than usual staffing, operational or travel costs, so as to explain how the project ensures value for money?	X		
2. Are unit costs (e.g. for travel, consultancies, procurement of materials etc) comparable with those used in similar interventions (either in similar country contexts, within regions, or in past interventions in the same country context)? If not, this needs to be explained in the budget narrative section.	X		
3. Is the proposed budget proportionate to the expected project outcomes and to the scope of the project (e.g. number, size and remoteness of geographic zones and number of proposed direct and indirect beneficiaries)? Provide any comments.	X		



4. Is the percentage of staffing and operational costs by the Receiving UN Agency and by any implementing partners clearly visible and reasonable for the context (i.e. no more than 20% for staffing, reasonable operational costs, including travel and direct operational costs) unless well justified in narrative section?	X		
5. Are staff costs proportionate to the amount of work required for the activity? And is the project using local rather than international staff/expertise wherever possible? What is the justification for use of international staff, if applicable?	X		The UNFPA Gender Specialist (P4) is already in the country and an integral part of the UNFPA's support to the Government on MHPSS. The P4 is already mainstreaming gender in all aspects of UNFPA's interventions and is in an ideal position to ensure quality assurance of this Project.
6. Does the project propose purchase of materials, equipment and infrastructure for more than 15% of the budget? If yes, please state what measures are being taken to ensure value for money in the procurement process and their maintenance/ sustainable use for peacebuilding after the project ends.		X	
7. Does the project propose purchase of a vehicle(s) for the project? If yes, please provide justification as to why existing vehicles/ hire vehicles cannot be used.		X	
8. Do the implementing agencies or the UN Mission bring any additional non-PBF source of funding/ in-kind support to the project? Please explain what is provided. And if not, why not.		X	Should the need arise and core resources available, UNDP will consider the allocation of additional funds for this Project. The Project Team will actively resource mobilize during project lifespan.

## **Annex B.1: Project Administrative arrangements for UN Recipient Organizations**

*(This section uses standard wording – please do not remove)*

The UNDP MPTF Office serves as the Administrative Agent (AA) of the PBF and is responsible for the receipt of donor contributions, the transfer of funds to Recipient UN Organizations, the consolidation of narrative and financial reports and the submission of these to the PBSO and the PBF donors. As the Administrative Agent of the PBF, MPTF Office transfers funds to RUNOS on the basis of the signed Memorandum of Understanding between each RUNO and the MPTF Office.

### **AA Functions**

On behalf of the Recipient Organizations, and in accordance with the UNDG-approved “Protocol on the Administrative Agent for Multi Donor Trust Funds and Joint Programmes, and One UN funds” (2008), the MPTF Office as the AA of the PBF will:

- Disburse funds to each of the RUNO in accordance with instructions from the PBSO. The AA will normally make each disbursement within three (3) to five (5) business days after having received instructions from the PBSO along with the relevant Submission form and Project document signed by all participants concerned;
- Consolidate the financial statements (Annual and Final), based on submissions provided to the AA by RUNOS and provide the PBF annual consolidated progress reports to the donors and the PBSO;
- Proceed with the operational and financial closure of the project in the MPTF Office system once the completion is completed by the RUNO. A project will be considered as operationally closed upon submission of a joint final narrative report. In order for the MPTF Office to financially closed a project, each RUNO must refund unspent balance of over 250 USD, indirect cost (GMS) should not exceed 7% and submission of a certified final financial statement by the recipient organizations’ headquarters);
- Disburse funds to any RUNO for any cost extension that the PBSO may decide in accordance with the PBF rules & regulations.

### **Accountability, transparency and reporting of the Recipient United Nations Organizations**

Recipient United Nations Organizations will assume full programmatic and financial accountability for the funds disbursed to them by the Administrative Agent. Such funds will be administered by each RUNO in accordance with its own regulations, rules, directives and procedures.

Each RUNO shall establish a separate ledger account for the receipt and administration of the funds disbursed to it by the Administrative Agent from the PBF account. This separate ledger account shall be administered by each RUNO in accordance with its own regulations, rules, directives and procedures, including those relating to interest. The separate ledger account shall be subject exclusively to the internal and external auditing procedures laid down in the financial regulations, rules, directives and procedures applicable to the RUNO.

Each RUNO will provide the Administrative Agent and the PBSO (for narrative reports only) with:

Type of report	Due when	Submitted by
Semi-annual project progress report	15 June	Convening Agency on behalf of all implementing organizations and in consultation with/ quality assurance by PBF Secretariats, where they exist

Annual project progress report	15 November	Convening Agency on behalf of all implementing organizations and in consultation with/ quality assurance by PBF Secretariats, where they exist
End of project report covering entire project duration	Within three months from the operational project closure (it can be submitted instead of an annual report if timing coincides)	Convening Agency on behalf of all implementing organizations and in consultation with/ quality assurance by PBF Secretariats, where they exist
Annual strategic peacebuilding and PBF progress report (for PRF allocations only), which may contain a request for additional PBF allocation if the context requires it	1 December	PBF Secretariat on behalf of the PBF Steering Committee, where it exists or Head of UN Country Team where it does not.

#### Financial reporting and timeline

Timeline	Event
<b>30 April</b>	Annual reporting – Report <b>Q4 expenses</b> (Jan. to Dec. of previous year)
<i>Certified final financial report to be provided by 30 June of the calendar year after project closure</i>	

UNEX also opens for voluntary financial reporting for UN recipient organizations the following dates

<b>31 July</b>	Voluntary Q2 expenses (January to June)
<b>31 October</b>	Voluntary Q3 expenses (January to September)

Unspent Balance exceeding USD 250, at the closure of the project would have to be refunded and a notification sent to the MPTF Office, no later than six months (30 June) of the year following the completion of the activities.

#### Ownership of Equipment, Supplies and Other Property

Ownership of equipment, supplies and other property financed from the PBF shall vest in the RUNO undertaking the activities. Matters relating to the transfer of ownership by the RUNO shall be determined in accordance with its own applicable policies and procedures.

#### Public Disclosure

The PBSO and Administrative Agent will ensure that operations of the PBF are publicly disclosed on the PBF website ([www.un.org/peacebuilding/fund](http://www.un.org/peacebuilding/fund)) and the Administrative Agent's website ([www.mptf.undp.org](http://www.mptf.undp.org)).

## Annex B.2: Project Administrative arrangements for Non-UN Recipient Organizations

*(This section uses standard wording – please do not remove)*

### **Accountability, transparency and reporting of the Recipient Non-United Nations Organization:**

The Recipient Non-United Nations Organization will assume full programmatic and financial accountability for the funds disbursed to them by the Administrative Agent. Such funds will be administered by each recipient in accordance with its own regulations, rules, directives and procedures.

The Recipient Non-United Nations Organization will have full responsibility for ensuring that the Activity is implemented in accordance with the signed Project Document;

In the event of a financial review, audit or evaluation recommended by PBSO, the cost of such activity should be included in the project budget;

Ensure professional management of the Activity, including performance monitoring and reporting activities in accordance with PBSO guidelines.

Ensure compliance with the Financing Agreement and relevant applicable clauses in the Fund MOU.

### **Reporting:**

Each Receipt will provide the Administrative Agent and the PBSO (for narrative reports only) with:

Type of report	Due when	Submitted by
Bi-annual project progress report	15 June	Convening Agency on behalf of all implementing organizations and in consultation with/ quality assurance by PBF Secretariats, where they exist
Annual project progress report	15 November	Convening Agency on behalf of all implementing organizations and in consultation with/ quality assurance by PBF Secretariats, where they exist
End of project report covering entire project duration	Within three months from the operational project closure (it can be submitted instead of an annual report if timing coincides)	Convening Agency on behalf of all implementing organizations and in consultation with/ quality assurance by PBF Secretariats, where they exist
Annual strategic peacebuilding and PBF progress report (for PRF allocations only), which may contain a request for additional PBF allocation if the context requires it	1 December	PBF Secretariat on behalf of the PBF Steering Committee, where it exists or Head of UN Country Team where it does not.

Financial reports and timeline

<b>Timeline</b>	<b>Event</b>
<b>28 February</b>	Annual reporting – Report <b>Q4 expenses</b> (Jan. to Dec. of previous year)
<b>30 April</b>	Report <b>Q1 expenses</b> (January to March)
<b>31 July</b>	Report <b>Q2 expenses</b> (January to June)
<b>31 October</b>	Report <b>Q3 expenses</b> (January to September)
<i>Certified final financial report to be provided at the quarter following the project financial closure</i>	

Unspent Balance exceeding USD 250 at the closure of the project would have to be refunded and a notification sent to the Administrative Agent, no later than three months (31 March) of the year following the completion of the activities.

### **Ownership of Equipment, Supplies and Other Property**

Matters relating to the transfer of ownership by the Recipient Non-UN Recipient Organization will be determined in accordance with applicable policies and procedures defined by the PBSO.

### **Public Disclosure**

The PBSO and Administrative Agent will ensure that operations of the PBF are publicly disclosed on the PBF website ([www.un.org/peacebuilding/fund](http://www.un.org/peacebuilding/fund)) and the Administrative Agent website ([www.mptf.undp.org](http://www.mptf.undp.org)).

### **Final Project Audit for non-UN recipient organization projects**

An independent project audit will be requested by the end of the project. The audit report needs to be attached to the final narrative project report. The cost of such activity must be included in the project budget.

### **Special Provisions regarding Financing of Terrorism**

Consistent with UN Security Council Resolutions relating to terrorism, including UN Security Council Resolution 1373 (2001) and 1267 (1999) and related resolutions, the Participants are firmly committed to the international fight against terrorism, and in particular, against the financing of terrorism. Similarly, all Recipient Organizations recognize their obligation to comply with any applicable sanctions imposed by the UN Security Council. Each of the Recipient Organizations will use all reasonable efforts to ensure that the funds transferred to it in accordance with this agreement are not used to provide support or assistance to individuals or entities associated with terrorism as designated by any UN Security Council sanctions regime. If, during the term of this agreement, a Recipient Organization determines that there are credible allegations that funds transferred to it in accordance with this agreement have been used to provide support or assistance to individuals or entities associated with terrorism as designated by any UN Security Council sanctions regime it will as soon as it becomes aware of it inform the head of PBSO, the Administrative Agent and the donor(s) and, in consultation with the donors as appropriate, determine an appropriate response.

### **Non-UN recipient organization (NUNO) eligibility:**

In order to be declared eligible to receive PBF funds directly, NUNOs must be assessed as technically, financially and legally sound by the PBF and its agent, the Multi Partner Trust Fund Office (MPTFO). Prior to submitting a finalized project document, it is the responsibility of each NUNO to liaise with PBSO and MPTFO and provide all the necessary documents (see below) to demonstrate that all the criteria have been fulfilled and to be declared as eligible for direct PBF funds.

The NUNO must provide (in a timely fashion, ensuring PBSO and MPTFO have sufficient time to review the package) the documentation demonstrating that the NUNO:

- Has previously received funding from the UN, the PBF, or any of the contributors to the PBF, in the country of project implementation.
- Has a current valid registration as a non-profit, tax exempt organization with a social based mission in both the country where headquarter is located and in the country of project implementation for the duration of the proposed grant. (**NOTE:** If registration is done on an annual basis in the country, the organization must have the current registration and obtain renewals for the duration of the project, in order to receive subsequent funding tranches).
- Produces an annual report that includes the proposed country for the grant.
- Commissions audited financial statements, available for the last two years, including the auditor opinion letter. The financial statements should include the legal organization that will sign the agreement (and oversee the country of implementation, if applicable) as well as the activities of the country of implementation. (**NOTE:** If these are not available for the country of proposed project implementation, the CSO will also need to provide the latest two audit reports for a program or project-based audit in country.) The letter from the auditor should also state whether the auditor firm is part of the nationally qualified audit firms.
- Demonstrates an annual budget in the country of proposed project implementation for the previous two calendar years, which is at least twice the annualized budget sought from PBF for the project.<sup>10</sup>
- Demonstrates at least 3 years of experience in the country where grant is sought.
- Provides a clear explanation of the CSO's legal structure, including the specific entity which will enter into the legal agreement with the MPTF-O for the PBF grant.

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<sup>10</sup> Annualized PBF project budget is obtained by dividing the PBF project budget by the number of project duration months and multiplying by 12.

**Annex C: Project Results Framework (MUST include sex- and age disaggregated targets)**

Outcomes	Outputs	Indicators	Means of Verification/ frequency of collection	Indicator milestones
<p>Outcome 1:</p> <p>Outcome 1: Increased access to MHPSS and GBV services for SGBV survivors to be able to fully participate in the transitional justice process, including justice initiatives and reparations.</p> <p><b>SDG 5 Target 5.2</b> Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation</p> <p>(Any Universal Periodic Review of Human Rights (UPR) recommendation that this Outcome helps to implement and if so, year of UPR)</p> <p>2019 UPR Recommendations</p> <ul style="list-style-type: none"> <li>- Eliminate violence against women in</li> </ul>		<p>Outcome Indicator 1a: Number of comprehensive SGBV services delivery points (equipped with skilled personnel, and required materials to provide MHPSS, counselling and legal services) in the country</p> <p>Baseline:5 Target:10</p>	<p>Services Data Report</p> <p>Number of cases accessing justices after receiving care</p>	<p>Services delivery points equipped to provide GBV/MHPSS services</p>
		<p>Outcome Indicator 1b Number of key justice institutions (police, MOJ, courts) that have specialized services that are in line with minimum standards for SGBV cases (trained personnel, specialized procedures etc.)</p> <p>Baseline:0 Target: 30</p>	<p>Programme Report</p>	<p>Number of social and health workers trained on MHPSS</p>
		<p>Outcome indicator 1c</p> <p>Level of satisfaction with MHPSS and GBV services provided to SGBV survivors, including those supporting justice sector actors in post-TRRC prosecutions and other processes</p>	<p>Questionnaire, Interviews, Focus Group Discussions</p>	

private and public sphere Eliminate violence against women including trafficking and sexual violence		Baseline: NA Target: 80% of interviewees are satisfied (75% of whom are women)		
	<b>Output 1.1.</b> Key institutions, structures and platforms and stakeholder's capacities strengthened to promote mental health, provision of quality and comprehensive GBV and psychosocial services for the survivors	<b>Output Indicator 1.1.1:</b> Number of CSOs, partners and Government agencies trained to promote mental health and comprehensive GBV services.  Baseline: 0 Target:5	Quarterly Programs reports	Number of CSOs and local organization trained and equipped with skills conduct sensitization on mental health services



	<p><b>Activities</b></p> <ol style="list-style-type: none"> <li>1. Support the capacities of National Human Right Commission, CSO and community structures to monitor and report SGBV.</li> <li>2. Capacity Building for social and Health worker on MHPSS and Case management</li> <li>3. Promote safe community spaces in the provision of MHPSS using peer to peer support, inter-generational dialogues, awareness raising, and peacebuilding activities.</li> <li>4. Review of policies, frameworks and procedures on promotion and protection of mental health and psychosocial support services to survivors of SGBV</li> <li>5. Support the development of comprehensive policy framework SOPs for providing MHPSS to survivors of</li> <li>6. Advocacy for establishment of a specialized court</li> </ol>	<p><b>Output Indicator 1.1.2:</b> Number of SGBV survivors provided with MHPSS and GBV services</p> <p>Baseline: 30 Target: 150</p> <p><b>Output Indicator 1.1.3:</b> Number of human right defender equipped with skills, knowledge and resource to monitor and report SGBV cases in the community</p> <p>Baseline: TBD but few Target: 25</p> <p><b>Output Indicator 1.1.4:</b> Special court for GBV cases established and functional</p> <p>Baseline: 0 Target: 1</p>		
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	<p>7. Support to amendment of existing legislation to factor for a specialized court</p> <p>8. Training of personal of the specialized court</p> <p>9. Provision of equipment to the specialized court</p>			
	<p>Output 1.2 The coordination mechanisms of multidisciplinary service providers that deal with cases of SGBV are strengthened to provide coordinated services and promote and protect the mental health and psychosocial needs of SGBV survivors.</p> <p><b>Activities</b></p>	<p><b>Output Indicator 1.2.1:</b> Number Mental health coordination platform strengthened to improve quality multidisciplinary services provision across other sectors.</p> <p>Baseline: 0 Target: 1 (Ministry of Health)</p>	Meeting Reports	Monthly coordination meeting held

	<ol style="list-style-type: none"> <li>1. Provision of MHPSS and GBV services to “TRRC” SGBV survivors using group and “one-on-one” counselling sessions at services delivery points and within the communities.</li> </ol>	<p><b>Output Indicator 1.2.2:</b> Availability of Community referral pathway for MHPSS services</p> <p>Baseline: No Target: Yes</p>	Printed Referral pathway	Referral pathway developed
	<ol style="list-style-type: none"> <li>2. Conduct GBV Services mapping in project locations and produce pictorial MHPSS and GBV referral pathways.</li> <li>3. Provision of specialized trainings to all actors who interact with SGBV survivors (police officers, lawyers, judges, medical personnel, formal and informal psycho-social support actors, staff of the One Stop Centers, the SGBV Unit of the Ministry of Justice, investigators, and case workers of the National Human Rights Commission.</li> <li>4. Procure essential materials, dignity kits, logistic support and other risk mitigation items in ensuring equitable participation in the access to justice processes.</li> <li>5. Support coordination platforms at the Ministry of Gender, the Ministry of Justice SGBV Unit and</li> </ol>	<p><b>Output Indicator 1.2.3:</b> Number of Health, Social and community focal point trained to provide basic and specialized mental health services</p> <p>Baseline:0 Target: 40</p>	Services Reports	Number trained to provide basic and specialized MHPSS services

	Ministry of Health in improving MHPSS response.			
	<p><b>Output 1.3:</b> The livelihoods of selected SGBV survivors and communities are supported to promote resilience and improve wellbeing.</p> <p><b>Activities</b></p> <ol style="list-style-type: none"> <li>1. Conduct assessment of the livelihood needs of SGBV survivors in generating baseline evidence</li> <li>2. Development of a gender sensitive framework that support the provision of services for SGBV survivors</li> <li>3. Empower vulnerable women and girls including SGBV survivors using model that empower the survivors' sustainability.</li> </ol>	<p><b>Output Indicator 1.3.1:</b> Number of women provided with livelihood support through community empowerment programme to improve their wellbeing.</p> <p>Baseline:0 Target:25</p>	Quarterly programme reports, pictures and activities sheets	Women identified for training
		<p><b>Output Indicator 1.3.2:</b> Availability of a baseline assessment report</p> <p>Baseline:0 Target:1</p>	Assessment reports	Consultant identified to conduct the assessment
		<p><b>Output Indicator 1.3.3:</b> Number of frameworks, SOPs and manual developed to improve MHPSS services</p> <p>Baseline:0 Target: 2</p>	Printed SOPS, Manual or guideline on MHPSS	
<b>Outcome 2:</b> Promote local peace structures and integrate MHPSS into community and Justice structure		<p><b>Outcome Indicator 2a:</b> Improved Peace architecture, Justice systems with integrated mental health</p> <p>Baseline: No</p>	Questionnaire, Interviews, Focus Group Discussions	

<p>SDG Goal 16</p> <p>SDG Targets:</p> <p><b>16.1</b> Significantly reduce all forms of violence and related death rates everywhere</p> <p><b>16.2</b> End abuse, exploitation, trafficking and all forms of violence against and torture of children</p> <p>(Any Universal Periodic Review of Human Rights (UPR) recommendation that this Outcome helps to implement and if so, year of UPR)</p>		<p>Target: Yes</p> <p>Increased access to quality of services through proportion of user satisfaction.</p> <p>Baseline: NA Target: 40%</p>		
		<p>Outcome Indicator 2b.: Number of Peace, Mental Health and SGBV Advocate Networks advocating on stigma around mental health in their communities</p> <p>Baseline:0 Target:20</p> <p>Reduced Mental Health and SGBV related stigma in supported communities/Level of acceptance of SGBV survivors openly involved in post-TRRC processes</p> <p>Baseline: NA <b>Target:</b> 80% of interviewees have not experienced stigma (75% of whom are women)</p>	<p>Questionnaire, Interviews, Focus Group Discussions</p>	
	<p><b>Output 2.1.</b> Local peace structures have adequate capacities to promote mental health and psychosocial support for survivors of SGBV.</p>	<p>Output Indicator 2.1.1: Number of the local peace institutions strengthened to promote mental health and psychosocial support for survivors of SGBV.</p>	<p>Training Reports and picture</p>	

	<b>Activities</b> 1. Trainings for local peace structures, including community police, on SGBV and its impact on the mental health of survivors, children and communities, reducing stigma and promoting community-based approaches to psychosocial support 2. Special attention to women-led local peace structures engagement with community, traditional, religious leaders, influential youth and the media to build their knowledge on SGBV and mental health 3. Engagement of traditional communicators, most of whom are women, to conduct community sensitizations on SGBV that shifts the narrative from victim blaming and focuses more on access to support services and holding perpetrators accountable 4. Identification of champions and establishment of informal anti-SGBV networks linking community leaders, to champion the cause in each region of the country and	Baseline:0 Target:3		
		Output Indicator 2.1.2: Number of women led organization, peace structure, religious and community leaders trained on peacebuilding social cohesion and Mental Health  Baseline:0 Target: 50	Programme reports and activities	
		Output Indicator 2.1.3: Number of community members reached with information and awareness raising on peacebuilding, de-stigmatization of mental health and the need to access services.  Baseline:0 Target: 250	Programme meeting and pictures	

	provide sustainable support to such networks.			
	<p><b>Output 2.2.</b> Local peace structures have adequate capacities to incorporate MHPSS into peacebuilding initiatives.</p> <p>Activities</p> <ol style="list-style-type: none"> <li>1. Research and training of local peace structures on the impact of trauma, SGBV on community cohesions, including training of informal actors (community leaders) providing MHPSS</li> <li>2. Support the implementation of community-based initiatives (with particular focus on those spearheaded by women) that seek to restore relationships and the social fabric that binds and supports people within their communities as a means of ending cycles of violence.</li> </ol>	<p>Output Indicator 2.2.1: Number of operational research, knowledge management and data gathering on impact of trauma, SGBV on social cohesion and peacebuilding</p> <p>Baseline:0 Target: 1</p>	<p>Research Reports</p> <p>Programme Reports</p>	
		<p>Output Indicator 2.2.2: Number of women trained and engaged in community actions that restore social fabric and build peace</p> <p>Baseline:0 Target: 30</p>	<p>Research Reports</p> <p>Programme Reports</p> <p>Picture</p>	
		<p>Output Indicator 2.2.3</p> <p>Baseline: Target:</p>		

