

Requesting Organization :	ACF - USA			
Allocation Type :	2nd Round Standard Allocation			
Primary Cluster	Sub Cluster	Percentage		
WATER, SANITATION AND HYGIENE		100.00		
		100		
Project Title :	Humanitarian Emergency Response in South Sudan improving access to Water, Sanitation and Hygiene (WASH) to contribute to the health and nutritional status of vulnerable people in Northern Bar el Ghazal and Jonglei			
Allocation Type Category :	Frontline services			
OPS Details				
Project Code :	SSD-16/WS/89438	Fund Project Code :	SSD-16/HSS10/SA2/WASH/INGO/3586	
Cluster :	Water, Sanitation and Hygiene (WASH)	Project Budget in US\$:	444,000.00	
Planned project duration :	6 months	Priority:	2	
Planned Start Date :	01/10/2016	Planned End Date :	31/03/2017	
Actual Start Date:	01/10/2016	Actual End Date:	31/03/2017	
Project Summary :	<p>The current proposal proposes WASH activities fully integrated with the nutrition intervention carried on by ACF in 18 OTPs sites in two priority locations in South Sudan: Fangak County (Old Fangak and Toch), Jonglei state and Aweil Est and North Counties, NBeG state. Both counties still remain a priority locations due to the ongoing conflict and the critical nutrition situation with Global Acute Malnutrition (GAM) prevalence far above the 15% emergency threshold is persisting in NBeG and Jonglei States. The proposed activities aim to reduce vulnerability malnourished children through targeted WASH interventions in ACF nutrition facilities in Old Fangak and Toch, Jonglei state and Aweil Est, North and center, NBeG state.</p> <p>During the ongoing ACF CHF projects in Fangak, Aweil Est, North and center counties, ACF have identified remaining WASH needs, a lack of institutional capacity to continue meeting needs and /or a lack of WASH partners to meet needs. Thus, ACF proposes to continue covering the areas mentioned above through the emergency WASH intervention and to stabilize the factors which contribute to mortality and morbidities in the target IDP and host populations in Old Fangak Fangak County, Jonglei State and Aweil Est, North and Center, NBeG State. This response will increase the ability for populations to</p> <ul style="list-style-type: none"> - ensure a basic WASH access in nutrition sites with potable water, through water treatment and storage in health centers, latrine construction/rehabilitation - train the caregivers of undernourished children to treat drinking water at household level through filtering and boiling and ensure improved hygiene practices. - Improve sanitation and hygiene practices through various participatory channels hygiene promotion sessions using such as PHAST and CHAST approaches with targeted support to caregivers of SAM & MAM children at OTPs and SC sites - Train and provide of latrine 100 kits to caregivers of SAM children willing to build their own latrine at household level <p>Ensuring safe water supply to affected populations remains one of the main priorities for the WASH Cluster strategy and in Jonglei, this project, using CHF funds, will continue to work through a gender sensitive approach to improve access to safe water sources for the communities by distribution of water transporting containers to reduce number of trips to water sources.</p> <p>The response is integrated with the life-saving nutrition projects being undertaken by ACF and local partners in same target area through WASH activities that will target vulnerable malnourished children and caregivers in the same catchment area. Specifically this WASH intervention ensures a minimum package of WASH for households of malnourished children under 5 and caregivers and will target to increase the basic access to WASH services through improving the ability for populations to treat and store drinking water and increase the hygiene practices through a combined approach of age and gender specific messaging and community mobilization campaigns. The WASH minimum package is a cross sectorial approach to prevent and treat causes of under nutrition and will be executed in both targeted locations.</p> <p>Across both locations hygiene and sanitation actions will be taken to improve knowledge, behavior and practices through appropriate behavior change approaches and messaging. Mother to mother support groups will be formed and trained to continue the hygiene promotion activities in the villages and ensure sustained good hygiene practices linked with malnutrition status. The intervention in Jonglei and NBeG will also contribute to increasing community preparedness for cholera outbreaks training of staff and community workers on AWD and cholera response prevention activities.</p>			
Direct beneficiaries :				
Men	Women	Boys	Girls	Total

12,025	13,128	18,864	20,168	64,185
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Other Beneficiaries :

Beneficiary name	Men	Women	Boys	Girls	Total
Children under 5	0	0	3,877	4,036	7,913
Pregnant and Lactating Women	0	1,609	0	0	1,609
Trainers, Promoters, Caretakers, committee members, etc.	66	310	0	0	376
Other	11,959	10,404	13,090	14,157	49,610

Indirect Beneficiaries :

Catchment Population:

Link with allocation strategy :

This project will contribute to:

SO1 of the HRP for South Sudan project by delivery water, sanitation and hygiene (WASH) services to affected population and will address all 3 of the WASH cluster objectives. These activities will aim to ensure that a minimum WASH package is provided to households of SAM and MAM children, as well as ensuring WASH standards at nutrition sites through:

SO1 WATER: Improving access to safe drinking water through the rehabilitation of hand pumps in Fangak County (Old Fangak and Toch) with the participation of water user committees, conducted capacity building activities through trainings on operation and maintenance (O&M), gender balance through the participation of women for sustainability and provision of spare parts. Within the nutrition sites, rain water harvesting systems will be installed for the storage and treatment of rain water in order to improve access to safe water to caregivers of malnourished children during OTP/TSFP sessions, and the operation and maintenance of sanitation infrastructures (latrines, hand washing stations). Furthermore, water treatment kits will be provided to caregivers of SAM and MAM cases to increase consumption of treated water at household level and mitigate risk of diarrhea diseases to malnourished children;

SO2 SANITATION: In all ACF nutrition sites, basic sanitation infrastructures will be install to increase access to safe latrines and hand washing stations to caregivers of malnourished children, while triggering events will be done at community level to increase awareness on the impact of open defecation and sensitize on the construction of latrine at household level. In Jonglei, hundred (100) caregivers of SAM cases will be supported with plastic sheet, slab and digging kit to construct their own latrines;

SO3 HYGIENE PROMOTION: Behavior change activities will be conducted throughout the project to promote water treatment at household level, hand washing practices, and construction, proper use and maintenance of latrines. These awareness activities will be done at household level, in hospital and will mainly target caregivers of malnourished children to reduce risks of diarrhea diseases and mitigate potential diarrhea outbreak within the community. Trainings on Participation Hygiene and Sanitation Transformation (PHAST) will be conducted for Community Hygiene Volunteers and model mothers groups to ensure the diffusion of key messages to the population. Furthermore, a KAP survey will be realized at the beginning to measure the current practices, and the end to measure the impact. Finally, based on lack of access to key items for proper management of female personal hygiene, menstrual hygiene management kits will be provided to targeted caregivers of malnourished children in Fangak County (Jonglei).

Sub-Grants to Implementing Partners :

Partner Name	Partner Type	Budget in US\$

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

Other Funding Source	Other Funding Amount

Organization focal point :

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Guy Halsey	Country Director	cd.ssd@acf-international.org	+211 (0) 911 072 91
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BACKGROUND

1. Humanitarian context analysis

ACF has been operational in what is now South Sudan since 1985 and currently has operations in Northern Bar el Ghazal, Warrup and Jonglei. Since 2007 ACF has been running a static nutrition program in Northern Bar el Ghazal and since 2014 ACF has been operational in Jonglei responding to both chronic and acute needs.

According to Integrated Food Security Phase Classification (IPC) 2015 report, an estimated 3.9 million people were classified as severely food and nutrition insecure in September (3,065,000 population in Crisis, 830,000 in Emergency and 30,000 in Famine phases) and need urgent humanitarian assistance. This is an 80% increase compare to the same period last year despite the fact that August-September period is marked as the start of "green harvest" in South Sudan.

The overall nutrition situation remains "Critical" with GAM rate above the emergency threshold of 15% not only in the conflict affected states of Jonglei but also chronically high burden states NBeG. Projections for the period Jan – March 2016 (lean season) indicate 2.6 m people (2,170,000 in Crisis and 440,000 in Emergency) will be severely food and nutrition insecure. In NBeG, 940,000 population live in Stressed and Crisis phases (category 2 & 3 respectively); in Jonglei a staggering 385,000 and 125,000 population in Crisis and Emergency phases (category 3 & 4 respectively). According to recent Food Security and Nutrition Monitoring Report (FSNMS) of Sep 2015, NBeG has the highest level of undernutrition (GAM-24.2%, SAM-5.0%) in the country. Additionally these two states also registered very high level of child morbidity and wasting among women (NBeG-39.9% and Warrap-37.7%). In November 2015, ACF conducted a post-harvest SMART nutrition survey in Aweil East county of NBeG state and found 25.6% GAM and 7.2% SAM prevalence in the county. From past nutrition surveys done in Gogrial West as well as in Aweil East where a Nutrition Causal Analysis was performed in 2011, there are clear indications that poor child care practices, inadequate hygiene practices, lack of sanitation, and limited access to food and basic primary healthcare services are the main drivers of undernutrition. Among additional factors contributing to this critical nutrition situation: seasonal changes in food security, flash floods, violence and disease burden. The highest prevalence of malnutrition is currently experienced as the lean period combines with peak of malaria cases as well. Recurring violence causing displacement and destroying livelihoods, preventing the populations from planting at the right time led to inadequate food intake that directly affected further the nutrition situation in the past months. ACF is currently implementing nutrition interventions in Aweil Center (Aweil town), Aweil East and North and Fangak Counties of NBeG and Jonglei states and will continue to build on gains and lessons learned to further enhance quality services and expand the coverage of the CMAM, IYCF interventions, capacity building, nutrition surveillance, cluster coordination support and emergency nutrition response. ACF will continue with its projects and will endeavor to work in a coordinated manner with MoH partners, INGO and Local NGOs. This project will also strengthen state coordination for capacity building and effective nutrition surveillance. Integration with other sectors within ACF and the other clusters will be strengthened to ensure holistic nutrition response.

2. Needs assessment

SO1 WATER: ACF intend to address access to safe water and prevent waterborne diseases in targeted areas. In Fangak, currently, most of the population still have access to water either from the river or swamp. Recent water quality testing conducted in 64 households shown that more than 81% are highly contaminated (>100FC/100ml). Data collected from MSF France hospital have demonstrated more than 1,741 diarrhea cases from January to July 2016, and 82 ITFC cases received for the same period. Due to flooding that occurred recently in Toch and Old Fangak, people have been forced to displace to highest locations and are not able to access to improved water points. Thus, the proposed strategic WASH intervention will link to nutrition caseloads, targeting vulnerable households of malnourished children with a minimum package of WASH services aimed to increase consumption of treated water and reduce severe malnutrition, while working with water user committees to improve existing water pumps.

SO2 SANITATION: ACF will respond to affected populations to enable safe excreta disposal. Regarding to main sanitation risk represented by filled community latrines in Old Fangak, ACF has decommissioned more than 90% of those latrines to mitigate any risk of diarrhea outbreak within the area. Moreover, due to constraints related to the rainy season, the few existing latrines were fallen and the population has displaced due to the recent flooding. Since, this has critically increase open defecation practices in bush, next to the river or swamp. ACF intends to increase access to decent toilets at all nutrition sites, while conducting triggering session at community level for construction of household latrines during the dry season. Furthermore, training and materials support will be provided to selected caregivers of SAM cases in Fangak County.

SO3 HYGIENE PROMOTION concerns prevention and mitigation of WASH related diseases through improved knowledge and practices in affected populations, mainly caregivers of malnourished children. ACF will use communication for behavior change techniques to address certain behavioral determinants for hygiene and sanitation practices, including knowledge and attitudes, as well as environmental and contextual factors that render malnourished children extremely vulnerable to WASH related morbidities and health issues, which included lack of consumption of treated water.

3. Description Of Beneficiaries

For this current CHF project, ACF will target 65,185 beneficiaries: 54,315 individuals will be reach in Aweil East and Center counties, NBeG state and 9,870 will be reached in Fangak county, Jonglei state. The population of NBeG is 92% rural with 8% living in small townships interspersed in the various counties. Though NBeG has remained relatively stable during recent violence outbreaks, the state has recorded extremely levels of malnutrition and food insecurity due to its heavy market dependence. The WASH situation mirrors that of much of South Sudan, however due to operational and maintenance issues, much of the water infrastructure lies in a state of disrepair resulting in poor access to safe drinking water by the communities. Food insecurity in the first quarter of 2016 reportedly caused population movement to Sudan from NBeG.

In this regard, ACF will ensure equal access to WASH services for men, women boys and girls targeted in the project areas. In particular will implement the activities in NBeG and Jonglei. In NBeG, the activities will contribute to mitigate risk of severe malnutrition through increasing access to safe water ,through provision of water treatment kits, access to basic sanitation services inat nutrition sites and mass awareness hygiene activities. toDuring the activities implementation 10,177 men, 11,109 women, 15,963 boys and 17,066 girls (54,315 individuals). In Jonglei, the activities will improve access to potable through the improvement of water pumps, provision of water treatment kits, access to basic sanitation at in nutrition sites and household levels and mass awareness hygiene activities. The target population will includeis 1,849 men, 2,019 women, 2,901 boys and 3,101 girls (9,870 individuals).

Old Fangak and Toch Payams of Fangak County are home for IDPs living host communities. The IDPs are dispersed among all 2 payams where ACF plans to implement this project, but more concentrated in Old Fangak town, where they have been sharing available resources with the host community since the first outbreak of violence in December 2013. The most recent data from Old Fangak and Toch, collected by several partners and government in the ground , indicates respectively 25,971 individuals and 19,350 individuals. Both IDPs and host communities belong to the same Nuer tribe. The IDPs fled from Unity state after conflict in 2013/2014 and in May 2015 with no possessions and have very low coping capacity in terms of ability to respond to new shocks and stresses. There is little opportunity for livelihoods and IDPs gain income from selling food rations on local market. The Payams have been flooded in August 2016 and lots of diarrhea cases reported.

4. Grant Request Justification

The following points detail the rationale that justifies why ACF should be funded to undertake emergency WASH programming in Fangak, Aweil Est, North and Center Counties.

1. ACF remain strategically well positioned and established in all the locations, with existing nutrition programs in Aweil center, North and Est and WASH programs in Old Fangak and Toch and close collaboration with local nutrition partners in Old Fangak. There remains a good level of humanitarian access to this area and ACF will be able to start activities immediately as agreements with local authorities and coordination with implementing partners has already been established.
2. ACF is a leader in the WASH sector in South Sudan, with a high level of participation and coordination in the WASH Cluster as well as continued coordination between with other sectors. In both locations CHF funding will add value to nutrition programming, by ensuring key WASH actions support ACF nutrition projects in NBeG and through local partners in Jonglei. 3. ACF are also Co-coordinators of Nutrition cluster at State level and have capacity and expertise to deliver integrated multi-sectorial WASH activities to address underlying causes of under-nutrition. Proposed ACF WASH programming greatly increases the effectiveness of Nutrition programming by reducing causal factors that are drivers of malnutrition. Diarrhea, as the principal symptom of water related disease, inhibits nutrient absorption as any food that is ingested passes out of the body so rapidly. This is compounded by water related disease usually reducing appetite at a time when due to the infection, metabolic requirements are actually greater than normal and consequently the body requires more rather than less sustenance. Furthermore there is a vicious cycle relationship between malnutrition and water related disease. As much as water related disease can lead to malnutrition (as described previously), malnutrition can impair the immune functions which in turn make someone who is malnourished more susceptible to water related diseases. Consequently the link between WaSH and malnutrition is very significant, and the lifesaving work that is already done by ACF's treatment of malnutrition in NBeG and Jonglei (through partners) states will be significantly complemented by this proposed WaSH action. Life-saving will also come from the emergency response component that will meet the critical WaSH needs in Jonglei caused by displacement due to the fighting in the neighboring states.
3. The overall outcomes, outputs and activities of the proposed project are closely in-line with the WASH Cluster strategy outlined in the 2015 Humanitarian Response Plan (mid-year review) and the CHF-SA1 strategy paper. The activities respond to two priority needs intended to be addressed through CHF funding. Firstly ACF focus on maintaining adequate WASH service delivery at nutrition facilities level in areas of high and prolonged displacement, where populations are dependent on humanitarian assistance. Secondly, responding to high malnutrition rates in non-conflict states by addressing underlying causes and by implementing a minimum WASH package targeted at household of malnourished children.
4. ACF has a significant capacity and experience with cholera preparedness. ACF ensures that a capable WASH partner is present in this high risk area.

5. Complementarity

The overall project objective aim mannerly integrate wash activities within nutrition intervention to contribute in the reduction of water borne diseases, in particular diarrhea reduction, for malnourished children through access to safe water and to reinforce behavioral changes for diarrhea prevention at household and community levels.

Since November 2015, ACF has implemented WASH activities under CHF funding covering 3 Payam Keew, Toch and Old Fangak and the initial plan was to hand over WASH activities in Old Fangak and Toch to another international no-government organization by April 2016, though due to financial constraints faced by the proposed INGO, ACF kept responding to WASH needs in Old Fangak and Toch. In NBeG, ACF implements nutrition interventions in 13 OTSs responding to high malnutrition rate through direct support to caregivers of SAM and MAM cases with water treatment kits and awareness activities on good hygiene practices.

The proposed ACF interventions are targeted in communities with high levels of malnutrition and associated high vulnerabilities to WASH diseases contributing to poor nutritional status. Aweil Est, North and Center present GAM >33.3%, the highest at national level, and Fangak >17.7% based on priority location for nutrition intervention provided by the nutrition cluster in August 2016. Since the beginning of the year, more than 82 malnourished children have been referred by ACF stabilization center and hospitalized in MSF France in Fangak, while NBeG ACF keeps admitting on average 29 children under five per month in the stabilization center for the same period.

As already mentioned above, the propose intervention aims to improve access to safe water and sanitation and contribute the improvement of health outcomes. Based on this perspective ACF intends to embed the WASH response which complements the nutrition programming implemented directly by ACF or through nutrition partners. WASH Interventions and monitoring of a 'minimum package' at nutrition site includes access to safe water and basic sanitation infrastructures. Households will also be enabled with handwashing knowledge, including use of soap or ash and critical times. Lastly, access to sanitation and practice safe disposal of children feces will be managed. These interventions for malnourished children provide an opportunity to target and assist the most vulnerable families proactively. Compliance of households to minimum package will be monitored through follow up households' surveys and also included in Endline and baseline surveys.

LOGICAL FRAMEWORK

Overall project objective

The objectives aims to improve access to safe water in terms of quality and quantity available, improve access to safe sanitation options and hygiene practices through supporting enabling environment and integrated participatory approaches which seek to increase the impact of the intervention on the overall the health status and reduce vulnerabilities of the beneficiaries to WASH related diseases. The project seeks to target the most vulnerable beneficiaries at OTP sites and community level who are most vulnerable to WASH related diseases or protection and gender related health and hygiene issues. The overall project objective is to provide quality WASH programming within the nutrition intervention to respond to urgent humanitarian needs.

WATER, SANITATION AND HYGIENE

Cluster objectives	Strategic Response Plan (SRP) objectives	Percentage of activities
CO1: Affected populations have timely access to safe and sufficient quantity of water for drinking, domestic use and hygiene (SPHERE)	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	32
CO2: Affected populations are enabled to practice safe excreta disposal with dignity in a secure environment	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	12
CO3: Affected populations have knowledge and appropriate behaviors to prevent and mitigate WASH related diseases and practice good hygiene	HRP 2016 SO1: Save lives and alleviate suffering through safe access to services and resources with dignity	56

Contribution to Cluster/Sector Objectives : ACF will contribute to access to safe water, improved access to sanitation and improved hygiene behaviors in both target locations. ACF will achieve this through provision of life saving WASH interventions to the vulnerable communities affected by food insecurity. ACF will also conduct participatory hygiene sessions aimed to improve hygiene behaviors and contribute to reduction in transmission of waterborne diseases and reduction of malnutrition among children under 5 years and lactating mothers.

The project will contribute to the following cluster objectives;

- Improved timely access to safe, and sufficient quantity of water for drinking, cooking, and personal and domestic hygiene through rehabilitation of existing water points, emergency water treatment and storage systems
- Improved access to safe, sanitary, and hygienic living environment through provision of sanitation services that are secure, sanitary, user-friendly and gender-appropriate through construction of communal latrines
- Improved access to improved hygienic practices, hygiene promotion and delivery of hygiene products and services on a sustainable and equitable basis through distribution of WASH emergency NFI and hygiene/sanitary kits.

ACF's proposed response will contribute to WASH Cluster Objective 1 through the rehabilitation of four boreholes in Jonglei, capacity building of one WUC per borehole and pump mechanics to ensure sustainability. In addition, where people access water from the river, ACF will promote point of use water treatment technologies and distribute PUR sachet, buckets and filter cloth to the target beneficiaries. ACF will contribute to WASH Cluster Objective 2 through the construction/repair of 18 gender segregated latrines in Nutrition sites in both Jonglei and NBeG, in line with community feedback on design, to ensure maximum dignity and security. ACF, will contribute to WASH Cluster Objective 3 through distribution of WASH Kits in both locations as well as training on their appropriate use. To ensure proper knowledge, training will be provided to 166 Hygiene Promoters jointly with Unicef, who then will train community hygiene volunteers and 200 model mothers and conduct house to house visits and participatory sessions to promote hygiene. Hygiene promoters will specifically target the mothers and caretakers of malnourished children and the pregnant and lactating women. ACF will also conduct PHAST training for the hygiene promoters to lay a foundation for uptake of sanitation by the target households of malnourished children.

Outcome 1

Targeted population have improved access to safe water and enabled to improve water quality at household level through promotion of household water treatment and safe storage and repair of non-functional boreholes.

Output 1.1

Description

A total of 9,522 households of malnourished children and pregnant and lactating women in Northern Bahr el Ghazal and Jonglei states have improved access to safe potable water through training and distribution of emergency WASH kits and rehabilitation of nonfunctional water points.

Assumptions & Risks

Cooperation with Nutrition partners for active case finding
 Access to population remains the same and security is OK
 Population accept our hygiene promotion messages
 Core pipeline can supply items as required – plastic buckets with taps, aquatabs/PUR, soap and collapsible jerrycans

Activities

Activity 1.1.2

Training of 166 Hygiene promoters in coordination with Unicef (66 in NBeG and 100 in Jonglei)

Activity 1.1.3

Conduct 16 hygiene promotion campaigns for treatment of water using aquatabs/PUR on a weekly basis at 13 OTPs in Northern Bahr el Ghazal and 5 OTPs in Jonglei.

Activity 1.1.4

Conduct two Post Distribution Monitoring for distribution of NFI items, one in Northern Bahr el Ghazal and one in Jonglei.

Activity 1.1.5

Conduct 190 Water Quality monitoring tests for water samples collected at HH level at baseline and endline, 166 in Northern Bahr el Ghazal and 24 Jonglei.

Activity 1.1.1

Distribution of 9,522 WASH Kits (water storage containers (bucket with taps), aquatabs/PUR, filter cloth, collapsible jerry can and soap to caregivers of malnourished children and pregnant and lactating women for safe water storage at household level in NBeG and Jonglei states.

Activity 1.1.6

Conduct 6 monthly project monitoring visits by the ACF technical team in Jonglei and NBeG.

Indicators

Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.1.1	WATER, SANITATION AND HYGIENE	Frontline # of emergency affected people enabled to practice safe water at the household level.	12,025	13,128	18,864	20,168	64,185
Means of Verification : Activity Progress Reports (APR), Monthly Reports, PDM, Beneficiary data, Distribution reports, Water Quality Monitoring Database Analysis, training reports							
Indicator 1.1.2	WATER, SANITATION AND HYGIENE	Frontline # of community based hygiene promoters trained	66	100			166
Means of Verification : Activity Progress Reports (APR), Monthly Reports, PDM, Beneficiary data, Distribution reports, Water Quality Monitoring Database Analysis, training reports							
Output 1.2							
Description							
Improvement of 4 existing water points in Jonglei and establishment of 8 rain water harvesting systems in 8 OTPs in NBeG							
Assumptions & Risks							
Boreholes require rehabilitation at time of intervention Roof structure of the 8 OTPs (only 8 out of the 13 sites have CGI roofs) strong enough to hold gutters. Access to population remains the same and security is OK Community accept to participate in rehabilitation works and be trained in community O & M Core pipeline can supply BH repair items as required							
Activities							
Activity 1.2.1							
Construction of 8 rainwater harvesting systems with storage facilities at OTP sites in NBeG.							
Activity 1.2.2							
Rehabilitation of 4 existing water points (boreholes) in Jonglei.							
Activity 1.2.3							
Installation of 13 plastic tanks (5,000litres each) for water storage in OTPs in Northern Bahr el Ghazal.							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 1.2.1	WATER, SANITATION AND HYGIENE	Frontline # Number of emergency affected people with access to improved water sources	375	409	588	628	2,000
Means of Verification : Works completion report							
Indicator 1.2.2	WATER, SANITATION AND HYGIENE	Frontline # of water points/boreholes rehabilitated					4
Means of Verification : APR, Work completion/handover reports, Monthly reports.							
Outcome 2							
18 nutrition sites (5 in Jonglei, 11in Aweil East, 1 in Aweil Center and 1 in Aweil North)are provided with latrines and handwashing facilities to meet minimum WASH in Nutrition standards.							
Output 2.1							
Description							
Construction/repairation of 18 latrines with handwashing stations in 18 nutrition sites in NBeG (Aweil East, Center and North) and Jonglei (Fangak).							
Assumptions & Risks							
Rainy Season does not impede access and activities in the nutrition sites. Risk of insecurity exists along the route from Wau to Aweil, important when transporting supplies that are not available in project locations							
Activities							
Activity 2.1.1							
Construction of 18 hand washing stations (13 in NBeG and 5 in Jonglei) .							
Activity 2.1.2							
Construction/repairation of 18 latrines (13 in NBeG and 5 in Jonglei).							
Indicators							

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 2.1.1	WATER, SANITATION AND HYGIENE	Frontline # of hand washing facilities constructed					18
Means of Verification : Site inspection and works completion report							
Indicator 2.1.2	WATER, SANITATION AND HYGIENE	Frontline # of new latrines constructed					18
Means of Verification : APR/Monthly reports, Work completion reports,							
Outcome 3							
Households of undernourished children and pregnant and lactating women in Jonglei state (Old Fangak and Toch) and NBeG state (Aweil East/Center/North) have improved capacity to practice good hygiene behavior leading to reduction in diarrhea in target households.							
Output 3.1							
Description							
108 community level PHAST sessions leading to improved sanitation and hygiene practices demonstrated by improved knowledge, attitudes and behaviour change at household level in Northern Bar el Ghazal and Jonglei.							
Assumptions & Risks							
Nutrition caseload remains relevant Project sites remain accessible Security remains stable							
Activities							
Activity 3.1.2							
108 PHAST sessions conducted at all nutrition sites in the form of integrated WASH/Nutrition sensitization with weekly follow up at household level.							
Activity 3.1.3							
3 Mass sensitization events held for celebration of World Toilet Day and Global Handwashing Day and World Water Day on key messages.							
Activity 3.1.4							
Support to 100 extremely vulnerable mothers/caretakers of malnourished children in Jonglei with latrine construction kit.							
Activity 3.1.5							
KAP baseline and endline conducted on WASH minimum package at household level.							
Activity 3.1.1							
Training on PHAST techniques and development of IEC materials for use in 13 nutrition sites in Northern Bar el Ghazal and 5 nutrition sites in Jonglei.							
Indicators							
Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.1.1	WATER, SANITATION AND HYGIENE	Frontline # of emergency affected people equipped to practice good hygiene behaviors through participatory hygiene promotion	12,025	13,128	18,864	20,168	64,185
Means of Verification : KAP survey, HH survey, PDM, APR,							
Indicator 3.1.2	WATER, SANITATION AND HYGIENE	Frontline # of emergency affected people enabled to safely dispose of excreta in an emergency setting	112	123	176	189	600
Means of Verification : KAP survey, HH survey, PDM, APR,							
Output 3.2							
Description							
1,176 vulnerable young women are able to practice improved menstrual hygiene management with dignity and reducing vulnerabilities to health and protection related issues with key items distributed through model mother groups in Jonglei.							
Assumptions & Risks							
Rainy season does not impede activities Community accept modality of distribution Materials are available from the core pipeline Security remains stable							
Activities							
Activity 3.2.1							
Distribution of 1,176 MHM kits with targeted messaging.							
Indicators							

Code	Cluster	Indicator	End cycle beneficiaries				End cycle
			Men	Women	Boys	Girls	Target
Indicator 3.2.1	WATER, SANITATION AND HYGIENE	Frontline # of emergency affected women & girls enabled to practice safe, dignified menstrual hygiene management.	0	1,176	0	0	1,176

Means of Verification : Distribution Reports,, Monthly Reports, PDM report

Additional Targets :

M & R

Monitoring & Reporting plan

Indicators such as beneficiaries reached will be used to guide progress in activities and will therefore act a process and output indicators. Progress toward the target value will allow program managers to prioritize works or not. The tracking of quantitative data will be gathered from primary paper records at field level, for example weekly distribution sheets or weekly hygiene promotion attendance records. These records are simple to manage at field level and provide accurate and instant information that can updates progress toward overall targets. The indicator may also be used to guide procurement planning or human resource needs.

In general tracking of activities will be recorded on a weekly basis by supervisors and activity managers at field level. The program manager will submit this information monthly and update an activity progress reporting format along with narrative detail on project performance. This will be conducted on a monthly basis. The project manager will be responsible for collecting the necessary information from various team members, including specifically field supervisors or directly from the hygiene supervisors. The program manager may engage with logistics to track details regarding number of items distributed for example.

Data collected should be utilized by all members of the program team, most importantly by the project manager and decision makers involved in work planning and activity planning.

Specific tools such as water quality monitoring using del agua kits will be used twice during project cycle, as a baseline and endline for assessing impact on water quality at household level. Also the water quality tool will be used case by case to ensure acceptable water quality after a particular activity at the water source. Post distribution monitoring will be conducted as one-off assessment after monitoring.

Other tools such as gender analysis, using focus groups discussions and key interviews will be used to collect qualitative data and discursive information which will guide the project manager and technical coordinators regarding integrative and holistic areas of the program intervention. This will be ongoing monitoring throughout the project cycle to gauge ACF's contribution and efficacy to gender mainstreaming in WASH activities.

Workplan

Activitydescription	Year	1	2	3	4	5	6	7	8	9	10	11	12
Activity 1.1.1: Distribution of 9,522 WASH Kits (water storage containers (bucket with taps), aquatabs/PUR, filter cloth, collapsible jerry can and soap to caregivers of malnourished children and pregnant and lactating women for safe water storage at household level in NBeG and Jonglei states.	2016										X	X	X
	2017	X											
Activity 1.1.2: Training of 166 Hygiene promoters in coordination with Unicef (66 in NBeG and 100 in Jonglei)	2016										X	X	
	2017												
Activity 1.1.3: Conduct 16 hygiene promotion campaigns for treatment of water using aquatabs/PUR on a weekly basis at 13 OTPs in Northern Bahr el Ghazal and 5 OTPs in Jonglei.	2016										X	X	X
	2017	X	X	X									
Activity 1.1.4: Conduct two Post Distribution Monitoring for distribution of NFI items, one in Northern Bahr el Ghazal and one in Jonglei.	2016												
	2017		X	X									
Activity 1.1.5: Conduct 190 Water Quality monitoring tests for water samples collected at HH level at baseline and endline, 166 in Northern Bahr el Ghazal and 24 Jonglei.	2016										X	X	
	2017			X									
Activity 1.1.6: Conduct 6 monthly project monitoring visits by the ACF technical team in Jonglei and NBeG.	2016										X	X	X
	2017	X	X	X									
Activity 1.2.1: Construction of 8 rainwater harvesting systems with storage facilities at OTP sites in NBeG.	2016										X	X	X
	2017	X											
Activity 1.2.2: Rehabilitation of 4 existing water points (boreholes) in Jonglei.	2016											X	X
	2017	X											
Activity 1.2.3: Installation of 13 plastic tanks (5,000litres each) for water storage in OTPs in Northern Bahr el Ghazal.	2016											X	X
	2017	X											

Activity 2.1.1: Construction of 18 hand washing stations (13 in NBeG and 5 in Jonglei) .	2016																		X	X	X	
	2017	X	X	X																		
Activity 2.1.2: Construction/repairation of 18 latrines (13 in NBeG and 5 in Jonglei).	2016																			X	X	
	2017	X	X	X																		
Activity 3.1.1: Training on PHAST techniques and development of IEC materials for use in 13 nutrition sites in Northern Bar el Ghazal and 5 nutrition sites in Jonglei.	2016																			X	X	X
	2017	X																				
Activity 3.1.2: 108 PHAST sessions conducted at all nutrition sites in the form of integrated WASH/Nutrition sensitization with weekly follow up at household level.	2016																			X	X	X
	2017	X	X	X																		
Activity 3.1.3: 3 Mass sensitization events held for celebration of World Toilet Day and Global Handwashing Day and World Water Day on key messages.	2016																			X	X	
	2017			X																		
Activity 3.1.4: Support to 100 extremely vulnerable mothers/caretakers of malnourished children in Jonglei with latrine construction kit.	2016																			X	X	X
	2017	X																				
Activity 3.1.5: KAP baseline and endline conducted on WASH minimum package at household level.	2016																			X		
	2017			X																		
Activity 3.2.1: Distribution of 1,176 MHM kits with targeted messaging.	2016																				X	X
	2017	X	X																			

OTHER INFO

Accountability to Affected Populations

Globally, ACF follow the 2010, Humanitarian Accountability Partnership (HAP) guidelines for accountability to affected populations. In practice this focuses on 5 key commitments for how ACF works with affected populations.

1. Transparency: Provide accessible and timely information to affected populations on organizational procedures, structures and processes that affect them to ensure that they can make informed decisions and choices, and facilitate a dialogue between an organisation and its affected populations over information provision.
 2. Feedback and complaints: Actively seek the views of affected populations to improve policy and practice in programming, ensuring that feedback and complaints mechanisms are streamlined, appropriate and robust enough to deal with (communicate, receive, process, respond to and learn from) complaints about breaches in policy and stakeholder dissatisfaction.
 3. Participation: Enable affected populations to play an active role in the decision-making processes that affect them through the establishment of clear guidelines and practices to engage them appropriately and ensure that the most marginalised and affected are represented and have influence.
 4. Design, monitoring and evaluation: Design, monitor and evaluate the goals and objectives of programmes with the involvement of affected populations, feeding learning back into the organisation on an ongoing basis and reporting on the results of the process.
 5. Leadership/Governance: Demonstrate their commitment to accountability to affected populations by ensuring feedback and accountability mechanisms are integrated into country strategies, programme proposals, monitoring and evaluations, recruitment, staff inductions, trainings and performance management, partnership agreements, and highlighted in reporting.
- We also understand that working to implement these commitments can be particularly challenging when humanitarian access is limited or absent. For example, communication and information flow can be intermittent and difficulties can emerge in ensuring participation or representation; basic elements of an accountable response. Therefore we will work closely with other partners in the affected areas to ensure that a harmonized approach to the key aspects of HAP guidelines can be adapted.

Implementation Plan

ACF will target households of malnourished children for distribution of WASH NFI's. Being a WASH/Nutrition integrated project, the WASH team will collaborate with the nutrition team for target beneficiaries' identification from line lists of patients and will conduct targeted distributions. Hygiene promoters and CHVs will follow up with house to house visits and hygiene messaging to ensure the items are used correctly.

ACF will make an appropriate selection of suitable point of use (POU) water treatment methods and to evaluate the impact of the PoU in targeted households, ACF will conduct baseline and endline bacteriological water quality monitoring at household level and will also form part of the community mobilization to demonstrate actual faecal contamination to target households.

ACF in collaboration with Unicef will train the 166 hygiene promoters on hygiene promotion methodologies. The hygiene promoters will then facilitate sessions at the nutrition sites targeting mothers/caretakers of malnourished children and pregnant and lactating women. ACF will train hygiene promoters on PHAST who will in turn conduct sessions with community groups of around 20 households from a community together. The sessions will be facilitated by Hygiene Promoters together with the CHVs and model mothers trained in PHAST techniques. The sessions will be held to allow the community analyse their own community needs and risks in terms of water, sanitation and hygiene practices. The ACF team will encourage discussion through activities such as transect walks, observation and use of pocket charts, and IEC materials such as 3-pile sorting. This will take place during the days earmarked by nutrition teams for field activities at village level. The community hygiene volunteers will receive a nominal monetary reward in line with payments of local nutrition partners. In line with current nutrition and WASH programming, model mothers receive in kind incentives of sugar, soap or similar items. ACF will use the Model Mothers methodology for hygiene promotion. The Mother to Mother Model is a tool used to implement health and nutrition promotion and education at community level, where communities own the implementation model. It relies on the desire of the community itself to improve health, nutrition and general wellbeing of its members. This promotes sustainability even after the NGOs exit, as well as ensuring the messages and communication techniques are as culturally appropriate as possible, and so hopefully most effective in bringing about behaviour changes, as they are developed and delivered by members of the target community.

The model mothers approach enables the community volunteers to mobilize mothers to take their children for immunization services, to take in IYCF messages and most importantly for the communities to access public health promotion messages.

All training (Pump Mechanic, Water user associations, Nutrition, etc.) shall be participatory, interactive and learner-centered and shall incorporate suitable participatory methods such as group discussions, plenary sessions, case studies and innovative examples from the target community setting.

Coordination with other Organizations in project area

Name of the organization	Areas/activities of collaboration and rationale
Hold the Child	Jonglei (Old Fangak and Toch)/Nutrition activities/ACF will complement the nutrition activities with WASH interventions.

Environment Marker Of The Project

A+: Neutral Impact on environment with mitigation or enhancement

Gender Marker Of The Project

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

Justify Chosen Gender Marker Code

During the overall project implementation ACF will pay attention to:

- the need of the targeted population in terms of gender equality (gender roles, relationship and potential barrier experienced by women, girls, men and boys in different age groups)
- the type of activities tackle the need of the selected beneficiaries: mother to mother group discussion will be particularly encouraged among mothers with malnourished
- All the data will be collected in order to have sex and age dis-aggregation
- Ensure to detect and referred to the concerned stockholders GBV cases
- Adequate participation of beneficiaries in each and every step of the program in order to ensure accountability and transparency
- The existence of feedback mechanisms to check users satisfaction, benefits and potential barriers that they may face during the implementation of the project

Particular attention will be also given to encourage equal representation for men and women during all the activities related to training :

- For water user committees on water point management and hand pump maintenance for pump mechanics;
- On PHAST techniques and hygiene promotion messages in NBeG in 13 nutrition sites and Jonglei in 5 nutrition sites;
- On the use of latrine kits to caregivers of SAM children willing to build their own latrine at household level

Wash interventions will target directly children under 5 and their care takers without discrimination between boys and girls. Variations of numbers between the 2 groups will be monitored to ensure immediate action is taken.

Protection Mainstreaming

ACF will ensure the follow minimum package for protection mainstreaming in WASH is implemented in accordance with global and national standards for protection. This includes the following actions.

- Identify local authorities responsible for WASH programmers and strengthen and support their role where possible
 - Ensure that the beneficiaries are aware of their rights to equitable and safe water
 - Monitor whether any individuals or groups control WASH facilities and/or discriminate against certain individuals or groups gaining access to facilities or hygiene promotion programmers
 - Include representatives of different groups in participatory processes and committees
 - Support provision of WASH facilities for all infrastructure, including learning or meeting sites and health centers
- Country

Country Specific Information

Safety and Security

The overall security situation in South Sudan drastically deteriorated especially after the escalation of violence happened in July 2016 at Juba level with repercussions in other states like Jonglei. Fangak County, Jonglei state still remained under the control of SPLA-IO and is mostly inaccessible by road. ACF works closely with the local authorities to ensure that up to date information is gathered about the situation in Fangak county and as well participates in the weekly humanitarian coordination meetings held in Old Fangak Town. ACF will routinely assess the overall security situation, including recent troop activity in Pibor county. In the target areas security assessment will be systematic including minimum standard operating procedures being followed to ensure that safety of the field staff and workers can be ensured and that unnecessary risks are not taken. NBeG state remain one of the main epicenters of the humanitarian crisis especially related to nutrition and WASH needs. ACF is currently run 13 nutrition activities (OTP/SC/TSFP/BSFP) which continued to run even during the recent crisis with a few interruptions in commodity distribution due to break in supply pipeline. Efforts are being made by all actors to ensure sufficient nutrition stock is prepositioned in case future evacuation is required. Local staff's capacity to run programs independently is being assessed and additional training will be implemented to safeguard smooth and uninterrupted programming at field level.

Access

The targeted areas outlined in the proposal can be access by regular UNHAS flights when it comes to Aweil Est, North and Center, NBeG state and by boat when it comes to Old Fangak All the sites are provide with VSAT, HF kits and solar electrical systems with battery back up so communications and internet access are reliable. ACF currently has nutrition operations in Aweil Est, Center and North and WASH activities funded by CHF in Old Fangak, where ACF is operating from the base of Hold the Child which is the nutrition partner in the area.

BUDGET

Code	Budget Line Description	D / S	Quantity	Unit cost	Duration Recurrence	% charged to CHF	Total Cost
Staff and Other Personnel Costs							
1.1	JNG WASH Program Manager	D	1	7,267.00	6	100.00	43,602.00
	<i>1 International staff will be fully dedicated to the overall implementation of the program activities in Jonglei state. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.2	JNG WASH Officer	D	1	2,248.57	6	100.00	13,491.42
	<i>1 National delocalized staff will be fully dedicated to the implementation of specific program activities in Jonglei state. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.3	JNG WASH Field Supervisor	D	2	1,404.19	6	100.00	16,850.28
	<i>2 National local staff will be fully dedicated to the supervision of specific program activities in Jonglei state. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.4	JNG Logistics Officer	D	1	2,248.57	6	100.00	13,491.42
	<i>1 National delocalized staff will be fully dedicated to support logistically the implementation of the program activities in Jonglei state. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.5	JNG NATIONAL SUPPORT CASUAL WORKERS	D	6	45.00	6	100.00	1,620.00
	<i>6 National local staff : 1 cook, 1 cleaner/water carrier, 4 guards will be fully dedicated to support the implementation of the program activities in Jonglei state. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.6	NBEG WASH Program Manager	D	1	3,144.84	6	100.00	18,869.04
	<i>1 National delocalized will be fully dedicated to the overall implementation of the program activities in Northern Bahr al Ghazal state. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.7	NBEG WASH Officer	D	2	1,404.19	6	100.00	16,850.28
	<i>2 National local staff will be fully dedicated to the implementation of specific program activities in Northern Bahr al Ghazal state. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.8	NBEG Field Coordinator (Shared)	D	1	6,559.00	6	10.00	3,935.40
	<i>1 International staff will be partially dedicated to the overall coordination, supervision and guidance of the program operations at Northern Bahr al Ghazal State level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.9	NBEG Deputy Field Coordinator - Support Services (Shared)	D	1	5,692.00	6	10.00	3,415.20

	<i>1 International staff will be partially dedicated to the overall Support Services coordination, supervision and guidance of the program operations at Northern Bahr al Ghazal State level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.10	Country Director (Shared)	D	1	9,797.00	6	10.00	5,878.20
	<i>1 International staff will be partially dedicated to the overall coordination, supervision and guidance of the program operation at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.11	Deputy Country Director - Program (Shared)	D	1	9,109.00	6	10.00	5,465.40
	<i>1 International staff will be partially dedicated to the overall Technical coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.12	Finance Coordinator (Shared)	D	1	8,145.00	6	10.00	4,887.00
	<i>1 International staff will be partially dedicated to the overall Finance coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.13	Deputy Finance Coordinator (Shared)	D	1	6,910.00	6	10.00	4,146.00
	<i>1 International staff will be partially dedicated to support the overall Finance coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.14	HR Coordinator (Shared)	D	1	7,484.00	6	10.00	4,490.40
	<i>1 International staff will be partially dedicated to the overall HR coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.15	Logistics Coordinator (Shared)	D	1	8,134.00	6	10.00	4,880.40
	<i>1 International staff will be partially dedicated to the overall Logistics coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.16	Security Manager (Shared)	D	1	8,026.00	6	10.00	4,815.60
	<i>1 International staff will be partially dedicated to the overall Security coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.17	WASH Coordinator (Shared)	D	1	8,026.00	6	20.00	9,631.20
	<i>1 International staff will be partially dedicated to the overall WaSH coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits which account for approximately 50% of total compensation package, include food and accommodation allowances, travel allowances, R & R flights and insurance.</i>						
1.18	NBEG National Finance/HR Team	D	3	1,617.19	6	10.00	2,910.94
	<i>3 National staff will be partially dedicated to support from a HR and Finance side the implementation of the program activities in Northern Bahr al Ghazal state. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.19	NBEG National Logistics Team	D	14	798.67	6	10.00	6,708.83
	<i>14 National staff will be partially dedicated to support logistically the implementation of the program activities in Northern Bahr al Ghazal state. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.20	CRD National Finance/HR Team	D	8	1,266.01	6	10.00	6,076.85
	<i>8 National staff will be partially dedicated to support the overall Finance/HR coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.21	CRD National Logistics Team	D	8	1,712.66	6	10.00	8,220.77
	<i>8 National staff will be partially dedicated to support the overall Logistic Coordination, supervision and guidance of the program operations at Country level. This cost covers salary and fringe benefits, which account for approximately 25% of salary, include food & accommodation when in the field , allowances , and national social insurance.</i>						
1.22	NATIONAL STAFF CAPACITY BUILDNG	D	3	1,000.00	1	100.00	3,000.00
	<i>3 trainings to capacity build key ACF national staff, supporting or/and operating the implementation of the program activities.</i>						
Section Total							203,236.63

Supplies, Commodities, Materials							
2.1	NBEG - ACCESS TO WATER	D	10	2,500.00	1	100.00	25,000.00
	<i>10 water tanks will be procured (capacity 5,000 Litres each) at 1,500 USD each. In addition rain water harvesting gutters and pipes will be procured and together with installation will cost 1,000 USD for each of the 10 sites.</i>						
2.2	JNG - ACCESS TO WATER	D	4	111.25	1	100.00	445.00
	<i>445 USD includes 200 USD pump mechanics, 145 for water user committee and pump mechanics training and 100 USD for cement for water points rehabilitation.</i>						
2.3	NBEG - SANITATION	D	13	750.00	1	100.00	9,750.00
	<i>750 USD includes material for latrines, hand washing station and labor for construction of 13 latrines at OTPs level</i>						
2.4	JNG - SANITATION	D	5	750.00	1	100.00	3,750.00
	<i>750 USD includes material for latrines, hand washing station and labor for construction of 5 latrines at OTPs level</i>						
2.5	NBEG - HYGIENE PROMOTION	D	13	209.43	6	100.00	16,335.54
	<i>540 USD includes incentives for 6 hygiene promoters for 6 months;5445 USD includes incentives for 66 CHVs for 6 months; 1950 USD includes the cost of design and production of IEC material in Jonglei; 3300 USD for hygiene promotion volunteers and activities including NFI distribution; 4500USD wages for 20 enumerators working 30 days during the project period;600USD includes the cost for establishing accountability and feedback mechanisms in NBeG</i>						
2.6	JNG - HYGIENE PROMOTION	D	5	587.09	6	100.00	17,612.70
	<i>1800 USD includes incentives for 10 hygiene promoters for 120 days; 9000 USD includes incentives for 100 CHVs for 72 days; 4600 USD includes the cost of design and production of IEC material in including material for PHAST sessions in Jonglei; 1163 USD as material and cost for models mothers PHAST sessions ; 650 USD wages for 20 enumerators working 30 days during the project period;300USD includes the cost for establishing accountability and feedback mechanisms in NBeG</i>						
2.7	DOMESTIC FREIGHT OF SUPPLIES AND EQUIPMENT	D	5	5,462.88	1	100.00	27,314.40
	<i>4 charters for Jonglei and 1 charter for Northern Bahr al Ghazal, to transport key supplies to field locations for the implementation and support of program activities. Essential given the remotes locations of intervention and insecurity affecting roads.</i>						
2.8	NBEG PROGRAM VEHICLE RENTAL & RUNNING COSTS	D	1	6,600.00	6	100.00	39,600.00
	<i>1 rental vehicle fully dedicated to support the implementation of the program activities in Northern Bahr al Ghazal state. This cost covers the vehicle rental, driver, fuel and maintenance for the full program implementation period.</i>						
2.9	VISIBILITY	D	1	1,000.00	1	100.00	1,000.00
	<i>1000 USD for production of project visibility materials for CHF logo.</i>						
	Section Total						140,807.64
Equipment							
3.1	Radio HF kit	D	2	5,000.00	1	100.00	10,000.00
	<i>This cost covers 2 complete kit at 5,000 USD/kit totaling 10,000 USD, consisting of 9350 codan antenna and NGT SRx transceiver.</i>						
3.2	SECURITY EQUIPMENT	D	1	1,695.00	1	100.00	1,695.00
	<i>This cost covers 1 complete hibernation and first aid kit, anti snake venom, 5 torch lights and 10 pairs of heavy duty batteries.</i>						
	Section Total						11,695.00
Travel							
5.1	DOMESTIC FREIGHT OF PASSENGER BY AIR	D	12	550.00	1	100.00	6,600.00
	<i>This cost covers 12 UNHAS flights : 6 NBEG and 6 JNG. 10 to transport program staff to the program activities locations activities and 2 for support staff monitoring visits.</i>						
5.2	JNG DOMESTIC FREIGHT OF PASSENGER BY BOAT	D	5	147.50	6	100.00	4,425.00
	<i>This cost covers 5 days of boat rental per month including fuel and driver to transport program staff in Jonglei.</i>						
	Section Total						11,025.00
General Operating and Other Direct Costs							
7.1	JNG BASE SET UP AND RUNNING COSTS	D	1	1,300.00	6	100.00	7,800.00

	<i>This costs cover the Jonglei program fully dedicated base maintenance and rehabilitation, stationeries, supplies and communication charges (internet, mobile phone, satellite) for the program implementation period.</i>						
7.2	NBEG OFFICE RUNNING COSTS (Shared)	D	1	10,350.00	6	10.00	6,210.00
	<i>This cost covers partially the monthly running costs of the Maluakon Base in Northern Bahr al Ghazal, which include office/warehouse running costs and maintenance, generator and communication charges.</i>						
7.3	CRD OFFICE RUNNING COSTS (Shared)	D	1	44,925.00	6	10.00	26,955.00
	<i>This cost covers partially the monthly running costs of the Coordination Office in Juba, which include office/warehouse running costs and maintenance, generator and communication charges.</i>						
7.4	NBEG SUPPORT VEHICLE RUNNING COSTS (Shared)	D	2	2,500.00	6	10.00	3,000.00
	<i>This cost covers partially the monthly road transportation costs of the Maluakon Base support staff in Northern Bahr al Ghazal, which include fuel and maintenance for 2 ACF vehicles.</i>						
7.5	CRD SUPPORT VEHICLE RENTAL & RUNNING COSTS (Shared)	D	4	1,760.00	6	10.00	4,224.00
	<i>This cost covers partially the monthly road transportation costs of the Coordination Office in Juba, which include 4 rental vehicles, drivers, fuel and maintenance.</i>						
	Section Total						48,189.00
SubTotal			146.00				414,953.27
Direct							414,953.27
Support							
PSC Cost							
PSC Cost Percent							7.00
PSC Amount							29,046.73
Total Cost							444,000.00
Grand Total CHF Cost							444,000.00

Project Locations

Location	Estimated percentage of budget for each location	Estimated number of beneficiaries for each location					Activity Name
		Men	Women	Boys	Girls	Total	
Jonglei -> Fangak	48	1,849	2,019	2,901	3,101	9,870	<p>Activity 1.1.1 : Distribution of 9,522 WASH Kits (water storage containers (bucket with taps), aquatabs/PUR, filter cloth, collapsible jerry can and soap to caregivers of malnourished children and pregnant and lactating women for safe water storage at household level in NBeG and Jonglei states.</p> <p>Activity 1.1.2 : Training of 166 Hygiene promoters in coordination with Unicef (66 in NBeG and 100 in Jonglei)</p> <p>Activity 1.1.3 : Conduct 16 hygiene promotion campaigns for treatment of water using aquatabs/PUR on a weekly basis at 13 OTPs in Northern Bahr el Ghazal and 5 OTPs in Jonglei.</p> <p>Activity 1.1.4 : Conduct two Post Distribution Monitoring for distribution of NFI items, one in Northern Bahr el Ghazal and one in Jonglei.</p> <p>Activity 1.1.5 : Conduct 190 Water Quality monitoring tests for water samples collected at HH level at baseline and endline, 166 in Northern Bahr el Ghazal and 24 Jonglei.</p> <p>Activity 2.1.1 : Construction of 18 hand washing stations (13 in NBeG and 5 in Jonglei) .</p> <p>Activity 2.1.2 : Construction/repairation of 18 latrines (13 in NBeG and 5 in Jonglei).</p> <p>Activity 3.1.1 : Training on PHAST techniques and development of IEC materials for use in 13 nutrition sites in Northern Bar el Ghazal and 5 nutrition sites in Jonglei.</p> <p>Activity 3.1.2 : 108 PHAST sessions conducted at all nutrition sites in the form of integrated WASH/Nutrition sensitization with weekly follow up at household level.</p> <p>Activity 3.1.3 : 3 Mass sensitization events held for celebration of World Toilet Day and Global Handwashing Day and World Water Day on key messages.</p> <p>Activity 3.1.4 : Support to 100 extremely vulnerable mothers/caretakers of malnourished children in Jonglei with latrine construction kit.</p> <p>Activity 3.1.5 : KAP baseline and endline conducted on WASH minimum package at household level.</p> <p>Activity 3.2.1 : Distribution of 1,176 MHM kits with targeted messaging.</p>

Northern Bahr el Ghazal -> Aweil Centre	7	509	555	798	853	2,715	<p>Activity 1.1.1 : Distribution of 9,522 WASH Kits (water storage containers (bucket with taps), aquatabs/PUR, filter cloth, collapsible jerry can and soap to caregivers of malnourished children and pregnant and lactating women for safe water storage at household level in NBeG and Jonglei states.</p> <p>Activity 1.1.2 : Training of 166 Hygiene promoters in coordination with Unicef (66 in NBeG and 100 in Jonglei)</p> <p>Activity 1.1.3 : Conduct 16 hygiene promotion campaigns for treatment of water using aquatabs/PUR on a weekly basis at 13 OTPs in Northern Bahr el Ghazal and 5 OTPs in Jonglei.</p> <p>Activity 1.1.4 : Conduct two Post Distribution Monitoring for distribution of NFI items, one in Northern Bahr el Ghazal and one in Jonglei.</p> <p>Activity 1.1.5 : Conduct 190 Water Quality monitoring tests for water samples collected at HH level at baseline and endline, 166 in Northern Bahr el Ghazal and 24 Jonglei.</p> <p>Activity 1.2.1 : Construction of 8 rainwater harvesting systems with storage facilities at OTP sites in NBeG.</p> <p>Activity 2.1.1 : Construction of 18 hand washing stations (13 in NBeG and 5 in Jonglei) .</p> <p>Activity 2.1.2 : Construction/repairation of 18 latrines (13 in NBeG and 5 in Jonglei).</p> <p>Activity 3.1.1 : Training on PHAST techniques and development of IEC materials for use in 13 nutrition sites in Northern Bar el Ghazal and 5 nutrition sites in Jonglei.</p> <p>Activity 3.1.2 : 108 PHAST sessions conducted at all nutrition sites in the form of integrated WASH/Nutrition sensitization with weekly follow up at household level.</p> <p>Activity 3.1.3 : 3 Mass sensitization events held for celebration of World Toilet Day and Global Handwashing Day and World Water Day on key messages.</p> <p>Activity 3.1.5 : KAP baseline and endline conducted on WASH minimum package at household level.</p>
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Northern Bahr el Ghazal -> Aweil East	45	9,668	10,554	15,165	16,213	51,600	<p>Activity 1.1.1 : Distribution of 9,522 WASH Kits (water storage containers (bucket with taps), aquatabs/PUR, filter cloth, collapsible jerry can and soap to caregivers of malnourished children and pregnant and lactating women for safe water storage at household level in NBeG and Jonglei states.</p> <p>Activity 1.1.2 : Training of 166 Hygiene promoters in coordination with Unicef (66 in NBeG and 100 in Jonglei)</p> <p>Activity 1.1.3 : Conduct 16 hygiene promotion campaigns for treatment of water using aquatabs/PUR on a weekly basis at 13 OTPs in Northern Bahr el Ghazal and 5 OTPs in Jonglei.</p> <p>Activity 1.1.4 : Conduct two Post Distribution Monitoring for distribution of NFI items, one in Northern Bahr el Ghazal and one in Jonglei.</p> <p>Activity 1.1.5 : Conduct 190 Water Quality monitoring tests for water samples collected at HH level at baseline and endline, 166 in Northern Bahr el Ghazal and 24 Jonglei.</p> <p>Activity 1.2.1 : Construction of 8 rainwater harvesting systems with storage facilities at OTP sites in NBeG.</p> <p>Activity 2.1.1 : Construction of 18 hand washing stations (13 in NBeG and 5 in Jonglei) .</p> <p>Activity 2.1.2 : Construction/repairation of 18 latrines (13 in NBeG and 5 in Jonglei).</p> <p>Activity 3.1.1 : Training on PHAST techniques and development of IEC materials for use in 13 nutrition sites in Northern Bar el Ghazal and 5 nutrition sites in Jonglei.</p> <p>Activity 3.1.2 : 108 PHAST sessions conducted at all nutrition sites in the form of integrated WASH/Nutrition sensitization with weekly follow up at household level.</p> <p>Activity 3.1.3 : 3 Mass sensitization events held for celebration of World Toilet Day and Global Handwashing Day and World Water Day on key messages.</p> <p>Activity 3.1.5 : KAP baseline and endline conducted on WASH minimum package at household level.</p>
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Documents

Category Name	Document Description