Annex – 2 Project Summary

Project Plan Overview								
Program	South Sudan Emergency Re	Emergency R	gency Response Period)					
Project	Humanitarian Assistance to Conflict-Affected People in Jubek and Torit States							
Start date	March 30, 2020	End date	March 29, 2021	Days	365 days			

Project objective	The objective of the project is to improve the environment to enable project beneficiaries to access safe water, have a hygienic and healthy living, and secure a safe and dignified living environment using the protection provided. To achieve this objective, we will: provide support to meet the water and sanitation needs of UN Protection of Civilians (POC) sites in Juba, Jubek State, and Internally Displaced Persons (IDP) camps; and provide water and sanitation support as well as protection assistance to meet the needs of returnee host communities in Jubek and Torit States.							
Project overview Project overview Net Mathematication of the Conflict in South Sudan ("R- ARCSS") was officially agreed. A humanitarian crisis however continues due to persistent local armed conflicts, an exacerbated food crisis, threats of Ebola hemorrhagic fever originally from the Democratic Republic of the Congo ("DRC"), and an influx of returnees. According to the Integrated Food Security Phase Classification ("IPC"), in the beginning of 2019, many counties were in the Emergency or Famine phase of acute food insecurity, and 80% of the population were below the absolute poverty line. Two-thirds of the population are now in need of humanitarian assistance. There are 1.96 million IDPs and 860,000 returnees. Our project targets UN House POC sites and two IDP camps near Juba in Jubek State. The goal is to secure safe water and a hygienic environment by providing water and sanitation support, building water and sanitation equipment, improving solid waste treatment, and implementing hygiene awareness activities. In Torit State, to which refugees and IDPs are returning, we will ensure that local residents can receive water and sanitation support. We will secure safe water and enhance the community hygienic level by building tube wells and implementing hygiene awareness activities. In protection assistance, we will help strengthen the protection of those who need assistance in Torit State by providing education on sexual and gender-based violence ("SGBV") and support for menstrual hygiene management.								
	Project description (Describe main points only.)	Beneficiaries (Who, How many)						
At UN How will repair toilets, clear	nent 1: Water and sanitation support (POC sites and IDP camps) use POC sites and the Don Bosco IDP Camp in Juba, Jubek State, we water stations, repair temporary wash stalls, repair temporary public an vault toilets regularly, transport solid waste, and provide training es against infectious diseases such as cholera and Ebola.	 IDPs in Juba, Jubek State UN House POC sites: 35,000 Mahad IDP Camp: 7,752 Don Bosco IDP Camp: 10,000 						
2. Comport In Torit St Well Mana	Host communitiesTorit and Magwi Counties, Torit State: 310,134							
	hold hygiene awareness activities, train elementary school Hygiene Club members, and hold elementary school Hygiene Club activities.							
3. Comport In Torit S support me	Host communityMagwi County, Torit State: 28,134							

		Logical Framework		
Overall project objective (expected outcomes)		ter and sanitation support to POC sites and IDP camps in Jubek State and provide w unities that accept returnees in order to improve the environment to enable project be gnified living.		ensure hygienic,
Current situation (before the start of the project)	Expected outcomes (at the end of the project)	Target (indicators of project outcomes) and means of verification	Activities to achieve project outcomes	 ✓ Prerequisites ♦ Risks and external factors
1. Water and sanitation support (POC sites and IDP camps) There are 1.96 million IDPs, of which 190,000 of them stay at POC sites across the country. Long-term operation of POC sites and IDP camps in Juba has led to the need for humanitarian assistance. All camp sites have exceeded their designated capacities, and overcrowding is blocking access to safe water and sanitation equipment. There are strong needs for preventing development of cholera and Ebola hemorrhagic fever symptoms. Note that the water and sanitation sector of Mahad and Don Bosco IDP Camps have not met the Sphere standards.	sanitation support (UN POC sites and Mahad and Don Bosco IDP Camps) Individuals who need extra consideration, including new	 Water supply equipment overhaul 1-1. Water stations: We will overhaul 3 water stations in POC sites. (There are 37 in total, of which 24 are functioning, and 10 will be overhauled by other organizations.) We will overhaul 2 water stations in the Don Bosco IDP Camp. (These will be the only water stations there.) 1-2. Temporary wash stalls: We will overhaul 100 stalls in POC sites. (There are 205 in total, and none of them are functioning. 105 will be overhauled by other organizations.) The number and percentage of households with access to a main water source of safe drinking water increases. 5 water stations × 11 taps × 250 people = 13,750 people secure access to safe water. 100 wash stalls × 100 people = 10,000 people secure access to wash stalls. Among the households that use water supply equipment as their main water source, 60% respond that they have improved access to a water station. 60% respond that they have a shorter wait time at a water station (less than 30 minutes). 40% respond that they are now use a safe and hygienic wash stall. <u>60% respond that they have improved access to a wash stall.</u> <u>60% respond that they annow use a safe and hygienic wash stall.</u> <u>60% respond that they annow use a safe and hygienic wash stall.</u> <u>60% respond that they to verhaul</u> <u>21. Temporary public toilets: We will overhaul 280 toilets in POC sites. (There are 1,400 in total, of which 28 are functioning. 644 will be overhauled by other organizations.) We will overhaul 10 toilets in the Don Bosco IDP Camp. (There are currently 38 in total, of which 50 are functional. No other organizations will be involved.)</u> <u>2-2. Regular cleaning of vault toilets: 5 times in the Mahad IDP Camp (currently 200 in total, of which 50 are functional. No other organizations will be involved.)</u> 	1. Water supply equipment overhaul 1-1. Water stations: Repair of 5 stations (3 at POC sites and 2 at the Don Bosco IDP Camp) 1-2. Temporary wash stalls: Repair of 100 stalls (at POC sites) 2. Sanitation equipment overhaul 2-1. Temporary public toilet repair (7 in POC sites, 1 in the Mahad IDP Camp, and 2 in the Don Bosco IDP Camp): a total of 340 toilets in 10 buildings.	 ✓ Stable security ✓ Stable security ✓ Cooperation from the local government, area leaders, and beneficiary communities ✓ Beneficiaries participating in activities without causing conflicts ✓ Worsening security ♦ Reduction in support funds (UNICEF, WHO, and the local government) ♦ A protest or riot by IDPs ♦ Economic collapse and skyrocketing prices ♦ Stealing and robbing of supplies ♦ Submerging or
		2-2. Regular cleaning of vault toilets: 5 times in the Mahad IDP Camp (currently no cleaning by other organizations) and 5 times in the Don Bosco IDP Camp		 Submerging or damage of

 (currently no cleaning by other organizations). 2-3. Solid waste transportation: 6 times/year from the Mahad IDP Camp (currently no transportation by other organizations) and 6 times/year from the Don Bosco IDP Camp (currently no transportation by other organizations). 20 people × 340 toilets = 6,800 people secure safe access to toilets. Check the state of solid waste treatment. <u>Among the households that use toilets</u>, 45% respond that they have improved access to toilets. 45% respond that less children relieve themselves outdoors. 45% respond that there is more privacy in sanitation equipment for people with disabilities. 	 2-2. Regular vault toilet cleaning: 5 times each in the Mahad IDP Camp and Don Bosco IDP Camp. 2-3. Solid waste transportation for disposal: 6 times each from the Mahad IDP Camp and Don Bosco IDP Camp. 	water and sanitation equipment due to natural disasters (e.g., downpours and flooding)
 <u>3. Hygiene awareness activities</u> <u>3-1. In POC sites, Nile Hope carries out activities in POC1, and JPF member NGO in POC3.</u> In the Mahad IDP Camp and Don Bosco IDP Camp, JPF member NGO is the only acting organization. There are no cholera or Ebola outbreaks. <u>Among the households that participated in hygiene awareness activities.</u> 60% respond that they relieve themselves outdoors less often. 60% respond that their awareness of appropriate water use heightened and have observed behavioral changes (i.e., wash the body). Verification methods: Interviews with members of randomly sampled households (370-380 individuals), builder reports, work completion documents, delivery documents, usage monitoring, and female FGDs 	 <u>3. Hygiene awareness activities</u> <u>3-1. Training on measures against</u> infectious diseases such as cholera and Ebola: 30 people (14 in POC sites, 8 in the Mahad IDP Camp, and 8 in the Don Bosco IDP Camp) <u>3-2. Sterilization activities as</u> measures against infectious diseases such as cholera and Ebola (in POC sites, Mahad IDP Camp, and Don Bosco IDP Camp): 30 people × 3 months <u>4. Monitoring and evaluation</u> 	

2. Water and sanitation	2. Water and	1. Water supply equipment overhaul	1. Water supply support
support (host	sanitation support	1-1. Tube well digging: We will dig 5 tube wells for Magwi and Torit Counties,	1-1. Tube well digging: 5
communities)	(Torit State)	Torit State. (There are 52 in total, of which 47 can be used. No other organizations	locations
communicesy	(Tone State)	will be involved.)	1-2. Repair of tube wells with a
In South Sudan, 5.6	Residents in the	1-2. Repair of tube wells with a hand pump: We will repair one for Magwi and	hand pump: 1 location
million people need	target area have	Torit Counties, Torit State. (There are 56 in total, of which 47 can be used. Other	1-3. Well Management
water and sanitation	safe and equal	organizations will repair the remaining ones in 8 locations.)	Committee member training: 42
support. Torit State has	access to a	• 500 people \times 52 tube wells = 26,000 people secure access to safe water.	trainees
one of the regions	sufficient amount	Among the households that use water supply equipment as their main water source,	trainces
where water supply	of safe water. They	• 60% respond that they now have access to safer water.	
facilities suffered the	also have safe and	• 80% of Well Management Committee members respond that they gained skills	
most damage during	equal access to a	and knowledge on well repair.	
conflicts, and	sufficient number	2. <u>Hygiene awareness activities</u>	2. Hygiene awareness activities
according to the IPC	of safe sanitation	2. <u>Hygiene awareness activities</u> 2-1. Hygiene awareness instructor training	2-1. Hygiene awareness instructor
standard the state is in	facilities. They	Target: 18 people in Torit State (none by other organizations)	training: 18 trainees \times 2 sessions
the Emergency phase.	gain necessary	2-2. Hygiene awareness activities	2-2. Hygiene awareness activities:
Note that Magwi	knowledge on		
County has the fifth	sanitation and have	Target: 16 people in Torit State (none by other organizations)	16 people \times twice a week \times 8 months
-		2-3. Elementary school Hygiene Club member training	
largest number of	higher awareness	We will discuss with the Torit State Ministry of Education to select two elementary	2-3. Elementary school Hygiene
returnees.	of it.	schools with strong needs for hygiene.	Club member training: 26 trainees
		In post-hygiene awareness activity surveys.	× 2 sessions
		• 60% of residents respond that they relieve themselves outdoors less often.	<u>2-4. Baseline survey</u>
		• 60% of households respond that their awareness of appropriate water use	8 researchers \times 14 days
		heightened and have observed behavioral changes (i.e., wash the body, store water	
		using appropriate methods, and wash clothes).	3. Monitoring and evaluation
		• 60% of households respond that their awareness of cleaning heightened and have	
		observed behavioral changes (i.e., clean the home).	
		\cdot 60% of the subject women respond that they gained more knowledge on	
		menstrual hygiene.	
		After elementary school Hygiene Club member training.	
		\cdot 60% of club members respond that they engaged in activities at least once a	
		month.	
		• 80% of students respond that school Hygiene Club activities improved their hand	
		washing methods.	
		Verification methods: Interviews with members of randomly sampled households	
		(370-380 individuals), procurement lists, payment history, distribution approval	
		lists, trainee lists, activity records, and onsite checks	

3. Protection assistance	3. Greater ability	1. Percentage of responses listed below by participants of SGBV training and	1. SGBV training: 72 people
(host communities)	of the communities	subsequent monitoring	(Torit State)
	subject to	Respondents: 72 people in Torit State (no training by other organizations)	2. Distribution of the menstrual
In South Sudan, 5.7	protection	• 60% respond that they understand the concept of protection well.	hygiene management and dignity
million people need	assistance (Torit	• After the training 60% can give an appropriate answer for what to do if they	kit: 400 people (Torit State)
protection, and there	State) to handle	become victims of SGBV.	
are 300,000 refugees.	SGBV, and		3. Monitoring and evaluation
In total, there are 6	menstrual hygiene	consequences of SGBV.	
million people to be	management by	• 30% respond they have seen message T-shirts.	
protected. 19,000	girls and women in	2. Percentage of participants' responses listed below provided during the	
children are used in	the target age	monitoring period after the menstrual hygiene management and dignity kit was	
armed forces, and 50%	range improves.	distributed	
of girls marry before		Target: 400 people in Magwi County, Torit State (In some parts of the county,	
they become 18 years		the local NGO Magwi Stewart distributed the kit.)	
old. GBV is observed		• 60% respond that they understand the concept of menstrual hygiene.	
extensively. Several		\cdot 60% respond that they feel their menstrual hygiene management has improved.	
thousand children are			
separated from their			
parents and exposed to			
violence, exploitation,			
and abuse. 25% of			
victims of sexual			
violence are children,			
and 50% of women are			
the victim of violence			
by their partners. GBV			
is the most serious			
threat to the protection			
and welfare of women			
and children.			

				Project I	Progress	Control I	List					
Activities to achieve	Month	Month		Month		Month		Month	Month	Month	Month	Month
project outcomes	1	2	3	4	5	6	7	8	9	10	11	12
1. Component 1: Water	and sani	tation su	oport (PC	OC sites a	nd IDP ca	amps)						
1-1. Water station												
repair												
1-2. Temporary wash												
stall repair												
2-1. Temporary public												
toilet repair												
2-2. Regular vault											▶	
toilet cleaning												
2-3. Solid waste												
transportation for disposal											►	
3-1. Training on												
measures against												
infectious diseases												
such as cholera and	►											
Ebola												
3-2. Sterilization												
activities as measures												
against infectious												
diseases such as												
cholera and Ebola												
4. Monitoring and												>
evaluation												
2. Component 2: Water	and sani	tation sup	pport (ho	st commu	inities)	-			-			
1-1. Tube well												
digging												
1-2. Repair of tube												
wells with a hand												
pump 1-3. Well												
Management												
Committee member												
training												
2-1. Hygiene												
awareness instructor												
training												
2-2. Hygiene												
awareness activities												
2-3. Elementary												
school Hygiene Club												
member training												
2-4. Baseline survey	├											
3. Monitoring and												
evaluation												
3. Component 3: Protection assistance (host communities)												
1. SGBV training												
2. Distribution of the												
menstrual hygiene												
management and			┝									
dignity kit												
3. Monitoring and												
evaluation												