

HPSE22-SHL-183670-1

Supporting shelter repair and rehabilitation of vulnerable households in Middle Area, Rafah and Khan Yunis governorates in the Gaza Strip to minimize exposure to harsh weather and protection concerns



Basic Info

Project Name

Supporting shelter repair and rehabilitation of vulnerable households in Middle Area, Rafah and Khan Yunis governorates in the Gaza Strip to minimize exposure to harsh weather and protection concerns

Start Date

01/01/2022

End Date

31/12/2022

Project Summary

The proposed intervention aims to support 400 households (HHs) living in severely or partially damaged/substandard/overcrowded shelters and HHs at risk of exposure to harsh weather, the spread of COVID-19 and protection concerns in the Middle Area, Rafah and Khan Yunis governorates in the Gaza Strip in order to meet their basic needs and enhance their coping capacity. It aims at alleviating the impact of the May-2021 escalation, as well as of COVID-19, and the overall protracted conflict affecting the Shelter sector in the Gaza strip. Through conditional cash assistance and technical assistance/monitoring, ACTED and its implementing partner UFA will support the self-repair and rehabilitation of these shelters as well as the purchasing of NFIs (bedding set, kitchen set and dignity kits), to ensure compliance with SPHERE and Shelter Cluster minimum standards and to alleviate unmet needs that expose these 400 HHs to protection risks.

The project is heavily informed by assessments ACTED undertook under other projects in 2021, MSNA 2021 findings, extensive consultations with key stakeholders, and recommendations from the MoSD and the MoPWH, the Shelter & NFI Cluster and Cash Working Group (CWG) in Gaza.

The proposed intervention is fully aligned with the 2022 HNO and supports the achievement of 2022 HRP for the Shelter Cluster, most notably by contributing to the Shelter Clusters efforts to address the priority humanitarian needs, namely: "Vulnerable households living in substandard shelter exposed to harsh weather and protection concerns are supported to meet basic needs and enhance their coping capacity (winterization, summarization, shelters upgrade and rehabilitation, damaged shelters

repair, COVID-19 shelter related interventions)". Specifically, ACTED and its local implementing partner UFA will implement a multi-pronged approach to increase access of vulnerable HHs to safe and secure shelters through the following means:

- Conducting assessments and verifications of HHs nominated as vulnerable by MoPHW and MoSD and on ACTED CRM's referred lists and waiting lists, defined based on the same criteria, in the targeted governorates to select the 400 most vulnerable HHs as final beneficiaries.

- Facilitating shelter repair and/or adaptation works through a self-repair approach through conditional cash assistance and technical assistance/monitoring to ensure compliance with SPHERE and Shelter Cluster minimum standards and to alleviate unmet needs that expose 400 HHs in severely or partially damaged/sub-standard shelters to protection risks.

- Strengthening existing Community-based Protection Committees (CBPCs) through the provision of trainings (refresher training and new topics) to mainstream protection principles within their communities and ensure community engagement.

Targeted communities will indirectly benefit from the intervention through the enhanced protection delivered by the CBPCs. More specifically, the intervention will directly benefit 400 beneficiary HHs (comprised of 2200 individuals) through the cash assistance to support shelter self-repair/ rehabilitation works and purchase of needed NFIs. In addition, 3 CBPCs (18 members in total) will benefit from trainings (refresher training and new topics) to support their communities and ensure mainstreaming of protection principles including key PSEA messages. As such, there will be 2218 direct beneficiaries in total. The project will be supported by the mainstreaming of an Integrated Protection Approach (IPA), with a specific focus on the most vulnerable groups, including women, girls, boys, the disabled and the elderly. Gender principles will be mainstreamed throughout the entire action and CBPCs will be trained on referral mechanisms of protection cases such as GBV with a particular focus given to women and children. Finally, AAP will be core to the proposed Action by giving account to, taking account of and being held to account by affected populations.

Tags

Organizations

Agency for Technical Cooperation and Development

Implementing Partners

Unlimited Friends Association (UFA)

Contact Info

Ginny HAYTHORNTHWAITE / ginny.haythornthwaite@acted.org / 059 811 1809

Marie SCOTTO / marie.scotto@acted.org / +33635246921

Associated Response Plan

occupied Palestinian territory 2022

Plan Fields

1 - Needs

The Gaza Strip's economy is at breaking point. Subject to recurrent economic shocks due to the protracted conflict, the May-2021 escalation, the impact of the COVID-19 pandemic, the limited ability of international actors to provide assistance, and the blockade on land, air and sea since 2007, economic activity has greatly diminished, leading to impoverishment and de-development of the population. Gaza is also one of the most densely-populated areas in the world: 2.11 million Palestinians are cramped in 365 km² (Gaza's total land area), where population density is 5,800/km² (OCHA). It suffers from a chronic shortage in housing that is expected to exceed 120,000 units in 2022, with an annual average of 14,000 additional housing units needed to meet natural growth. Based on the Multi Sectoral Needs Assessment (MSNA), conducted by REACH and OCHA in July 2021, 14% of the surveyed housing units in Gaza reported living in critical shelter

(damaged buildings, tent, collective shelter, container, makeshift shelter, unfinished/damaged building). 62% reported damage to their shelter (large cracks/opening in the walls and roof, broken/cracked windows, broken exterior doors). In the recent escalation of May 2021, 58,000 housing units were damaged or destroyed, of which 9,500 housing units had moderate to severe damages and 1,255 housing units were destroyed, and rendered uninhabitable, leaving 12,000 people displaced. According to the MSNA, 85% of households that had their homes damaged as a result of hostilities had no capacity to repair their homes. ACTED also conducted an assessment in August 2021 in the Gaza Strip, which revealed that 100% of visited HHs were still damaged. Vulnerable groups (including women, children, persons with disability and elderly) were particularly affected by the impact of the May hostilities. The lack of adequate shelter protection increases their vulnerability, and the health risks in particular for children and elderly household's members who are more vulnerable to harsh weather conditions. In addition, some vulnerable groups such as women and children are more vulnerable to protection concerns when living in overcrowding shelter and need specific intervention to respect their dignity and safety. The housing crisis in Gaza is also driven by over 14 years of Israeli restrictions on the import of building materials and equipment, the deteriorating socio-economic situation, and the recurring waves of hostilities. An assessment ACTED conducted in February 2021, targeting 300 vulnerable HHs living in substandard shelters, showed that all HHs visited were not complying with at least one minimum shelter standard; 33% of them needed urgent winterization interventions; 64% did not have access to at least one room insulated against heat and cold. The COVID-19 pandemic continues to add extra strain to shelter needs. It generates extra pressure for families living in substandard shelters, as members who contract the virus cannot properly isolate, increasing the risk of transmission. Particular focus from the shelter sector is needed for these HHs, in order to adapt some interventions to combat the pandemic, such as by adding extra space, partitioning rearrangements, and/or distributing NFIs. According to the Humanitarian Needs Overview (HNO) 2022, 867,560 persons in Gaza are in need of humanitarian assistance in 2022 to access adequate shelter (including basic households supplies), indispensable to providing people with a minimum level of privacy, protection and dignity. The HNO 2022 also emphasized that for an effective, efficient and timely response to unexpected and frequent escalations as well as unforeseen emergencies, it is necessary to increase the partners' capacities to respond to the emergent needs, notably through community capacity building. The proposed action thus aims at addressing part of the Shelter priorities for the HRP 2022.

2 - Activities

A1: Assessment and verification of HH nominated. ACTED and UFA will conduct assessments and verification of 500 HH nominated as vulnerable by MoPHW and MoSD in the targeted governorates, to select 400 beneficiary (BNF) HH. During this exercise, ACTED will raise their awareness on its Complaint Response Mechanisms (CRM) and key PSEA messages. Using obtained data, ACTED, UFA and CBPCs will score the assessed HHs according to vulnerability, with particular emphasis on female-headed HH, large-size HH, people with disabilities (PwD) and the elderly, and factors like basic NFI needs and exposure to harsh weather. This will allow ACTED to update its waiting list of vulnerable HHs identified through assessments it recently conducted. ACTED's Appraisal, Monitoring and Evaluation Unit (AMEU) will conduct a verification exercise to authenticate the fairness of the selection process. ACTED will share the final list with the MoSD and MoPHW for validation and with other key actors to avoid duplication. UFA engineers will then define precise needs for shelter repair and/or adaptation through the production of Bills of Quantities (BoQs), and subsequent remedy through clear workplans, both tailored to each HH. Whilst visiting HH to design tailored BoQs and workplans, the project team will consult, where applicable, at least 1 male and 1 female per HH to ensure gender-specific needs and concerns are taken into account, as well as those of boys, girls, PwDs, the elderly and other marginalized persons, for assistance to reflect their unique vulnerabilities. A2: Cash for shelter repair and purchase of NFIs for 400 HHs living in severely or partially damaged shelters. ACTED will provide to each selected HH cash assistance of 2,500 USD (8,070 ILS) on average, based on the needs to repair severely or partially damaged houses/substandard shelters and to upgrade shelters to take into account vulnerable groups' specific needs, and respond to protection concerns. This will also allow the upgrade of overcrowded shelters, to limit the spread of COVID-19 and address protection concerns, in order to improve HH living conditions, meet shelter minimum standards, and ensure HH safety, privacy, dignity and protection. While the

precise nature of the works will be determined based on the BoQs and workplan defined under A1, the focus and priority will be given to the following: unsealed window unit, external walls with cracks or holes, or not closed with cement material, housing unit roof which are not sealed or leaks; protection-related items (privacy issues, disability adaptation, crowded living space; child protection concerns; gender-based violence). ACTED will prepare a Beneficiary Support Agreement, including the tailored BoQs, to be signed between ACTED and each BNF HH. Under this agreement, BNF will commit to purchase items mentioned in the BoQs. ACTED will provide cash assistance through 3 instalments (40%, 40%, 20%), that will be released through bank transfer/cheques. During project implementation, ACTED could reduce the number of installments, depending on COVID-19 (to limit the risk of contamination) and on heads of HH's specific needs; particular attention will be given to PwD and female-headed HHs with young children or caring for a HH member with specific needs. Instalments could also be converted to a cash-in-hand modality in the event of restrictions taken by banks or to ensure aid accessibility to the most vulnerable HHs with specific needs. At the beginning of the activity implementation, ACTED will distribute a technical manual to each HH to enhance their autonomy during the repairing period and ensure safety. The 1st and 2nd instalments will be followed by a monitoring field visit to ensure compliance with SPHERE and Shelter Cluster minimum standards and that BNF adhere to the works stipulated in their agreement. Based on this follow-up, ACTED will decide whether to trigger, postpone or cancel subsequent instalments. Through close follow-up, ACTED will identify any technical issues and solve them through complementary training and guidance. BNF will advance 20% of rehabilitation costs; the 3rd instalment will be a reimbursement granted if all rehabilitation works are completed. In exceptional cases, where BNF would not be able to advance 20%, the project team could decide to provide all the cash in only 2 instalments (40%, 60%), after examination and validation by the Project Supervisor. Committees will support HHs unable to perform repair works themselves by nominating community-members to perform works and purchase required materials for them. HHs with specific needs will also have the possibility to request support from a contractor hired by ACTED. Additionally, based on assessed needs, BNF will have to purchase with part of the instalment, NFIs including dignity and repair kits. Finally, ACTED's AMEU will conduct Post-Monitoring Activities including Post-Rehabilitation Monitoring. ACTED will lead this activity with support of UFA and CBPCs. A3: 3 existing CBPCs will be strengthened through refresher training, including on PSEA. UFA will administer training on new topics to be decided upon in consultation with CBPC members. ACTED's Protection Officer will closely monitor the CBPCs throughout the project to ensure they effectively reinforce communities' resilience, report any protection issues, and ensure community engagement. The roles and responsibilities are based on a methodology and ToRs already existing and proven to be successfully working under previous projects. 30% of the CBPC members will be female. ACTED will integrate PSEA activities throughout the intervention, in line with the PSEA network recommendations and according to IASC principles and guidance. Coordination activities will include ACTED's direct engagement with the HCT oPt PSEA network and collaboration with operational partners to establish or strengthen inter-agency and community-based CRM accessible to targeted populations.

3 - Indicators

Project implementation will be supported by a comprehensive monitoring system to gather all relevant data to steer the action, maximize its impact, measure its effects, anticipate and mitigate any challenge. Specifically, ACTED's Appraisal, Monitoring and Evaluation Unit (AMEU) is independent from the Program Department and will be in charge of reinforcing the projects' accountability throughout the project cycle management by regularly assessing project implementation. AMEU is an essential part of ACTED's project management structure, providing a mechanism to crosscheck and give recommendations on the work of the project team and partners. AMEU leads assessment of baseline situations of beneficiaries through data collection, monitors ongoing implementation through regular field visits and consultations with beneficiaries, and evaluates the outcome of the activities. This methodology ensures the AMEU uses an outcome monitoring approach to analyse the effect of the action on target groups. ACTED will measure the following indicators: # of households protected and have improved access to adequate shelter; % of female members are participating actively in the community-based protection committees; # of Community-based protection Committees (CBPCs) reinforced through trainings to scale-up their ability to provide

services to their communities; % of CBPC members who demonstrate improvement in their knowledge after attending the trainings; % of households who report satisfaction with the intervention; % of females, elderly, people with disabilities who report improved safety and dignity after the intervention; # of people/HHs exposed to harsh weather and protection concerns are supported with shelter assistance, and % of assisted families reported improvement in living conditions. ACTED's project management team will use the Project Management Framework (PMF) tool to plan and monitor implementation to assess progress and highlight blocking points. The action will promote the use of best practices in accountability and transparency, in line with Core Humanitarian Standard (CHS) principles, by using ACTED's Complaints Response Mechanism (CRM). The CRM will enable beneficiaries and other stakeholders to provide feedback and suggestions directly to ACTED staff through a phone line, post, email, and complaint boxes in relevant locations, as well as directly to partner's staff members. The CRM should ensure that beneficiaries can easily and without fear of repercussion communicate cases of abuse of power by financial institutions, community leaders and/or other key actors involved in the cash-transfer program and/or aspects of program and/or transfer modality that inadvertently have negative implications. ACTED's AMEU is in charge of handling this mechanism to provide timely response or adequate action to address any concerns. Particular efforts will be dedicated to ensure that BNF are aware of the functioning and use of this tool since the last MSNA (July 2021) revealed that only 18,5% of HHs had access/knowledge of complaint mechanisms in Gaza. Financial monitoring will be undertaken by all project partners and then consolidated by ACTED, with external audits of the action taking place on an annual basis. ACTED staff will request from UFA monthly reporting on activities on top of contractual obligations to ensure all indicators are on track and register the beneficiaries' satisfaction and any difficulties encountered. This monthly reporting will minimise the risk of delays in the activities' implementation, that any change in the implementation of the project is notified and approved by oPt HF and finally that all indicators are on track and if needed corrective measures are taken to reach the target. Finally, it will enable ACTED to provide comprehensive and clear interim and final reports to oPt HF.

Gender wit Age Marker (GAM)

4 - IASC Gender with Age Marker (GAM)

4 (M): The project will significantly contribute to gender equality, including across age groups.

4.1 - Provide the GAM Reference number for this project

H8663-9013-1775

5 - Breakdown by response modality

5.1 - Response modalities

Yes

5.1.b State the percentage of the response delivered by the voucher modality if applicable :

0

5.1.c State the percentage of the response delivered by the cash modality if applicable :

100

5.1.a State the percentage of the response delivered by the service delivery modality if applicable :

0

5.1.d State the percentage of the response delivered by In-kind modality if applicable :

0

5.2 - Please briefly explain why the specific modality/ies for this response were chosen.

As noted in the 2021 MSNA findings, cash assistance is beneficiaries' preferred method, especially for women and PwD, as it provides them with more choice and flexibility, while safeguarding their dignity. In addition to being a cost-efficient method for humanitarian actors, the multiplier effect associated with injecting cash within the local economy will contribute towards restoring the Palestinian economy. Finally, cash assistance ensures multisectoral coverage, while keeping beneficiaries involved all along the activities, as they can choose the more adapted items to cover their multiple needs.

6 - Which Strategic Objective(s) do(es) your project address?

6.1 - Strategic Objective 1 (SO1)

No

6.2 - Strategic Objective 2 (SO2)

Yes

6.2.a - Please estimate the percentage of requirements for SO2

100

6.3 - Strategic Objective 3 (SO3)

Yes

6.3.a - Please estimate the percentage of requirements for SO3

0

7 - Breakdown of requirements by location (%)

7.1 - Gaza

100

7.2 - Area C

0

7.3 - East Jerusalem

0

7.4 - Hebron H2

0

7.5 - Area A&B

0

PROTECTION MAINSTREAMING & PSEA

8 - Participation (Community Engagement)

8.1 - Project needs assessment

Yes

8.1.a - How will beneficiaries be involved in needs assessment?

Surveys,Focus groups,Interviews,Information products and outreach

If not checked, please explain why

8.2 - Project design

Yes

8.2.a - How will beneficiaries be involved in project design?

Surveys,Focus groups,Interviews,Information products and outreach

If not checked, please explain why

8.3 - Implementation (delivering assistance)

Yes

8.3.a - How will beneficiaries be involved in implementation?

Surveys,Focus groups,Interviews,Information products and outreach

If not checked, please explain why

8.4 - Monitoring and evaluation

Yes

8.4.a - How will beneficiaries be involved in M&E?

Surveys,Focus groups,Interviews,Information products and outreach

If not checked, please explain why

8.5 - Representation of community groups

Yes

If you answered no please explain why

Accountability to Affected Populations

9. - Feedback and complaints mechanisms

Yes

9.1a - Specify the mechanisms for feedback and/or complaints

a - Generic email,b - Project hotline,c - Complaint box,d - Satisfaction survey,e - Field visit

9.1b - If 'Other', please specify :

9.1d - Explain how you have ensured that mechanism are accessible to all population groups?

Beneficiaries can access ACTED's CRM through a dedicated phone line, whatsapp, email address, complaints boxes and directly through ACTED staff during field visits. This plurality of means aims to ensure CRM accessibility to all, including vulnerable groups with specific needs. At the first stage of the project, during the assessment, field officers will provide a CRM card to each BNF, including all communication channels mentioned above, and explanations on the CRM, to ensure that all BNF feel comfortable and in measure to reach it if needed. Female staff, part of the team to which BNF will be able to refer to, will notably ensure female BNF feel safe to complain. AME staff will dedicate specific time to vulnerable groups during field visits to re-explain the CRM and emphasise that BNF can directly complain to them during visits - if one person would not have the capacity to use/access a phone/email address or the complaint box (notably children, PwD, and the elderly). ACTED's commitment to accountability to affected populations is fully integrated into its recruitment process, staff inductions, trainings and performance management and partnership agreements. All ACTED staff working for the ACTED oPt mission are trained on the Code of Conduct, on the Policy Against Sexual Exploitation and

Abuse (PSEA) and Child Protection Policies. Trainings on PSEA aim to ensure that all staff understand the Code of Conduct and the PSEA policy, their obligation to report any allegation or suspicion and the sanction measures taken for any breach of the Code of Conduct. Staff are also trained on recognizing sexual exploitation and abuse situations and concrete steps to follow for reporting any concerns or suspicions. In early March 2021, all ACTED staff also participated in the induction session on PSEA organized by the Protection Cluster, to strengthen their capacities to recognize exploitation and abuse situations, as well as adopt a good behaviour to report.

9.1c - How will feedback be used?

The project will be underpinned by ACTED's programmatic approach of meaningful community engagement and participation of the population, in line with the Inter-Agency Standing Committee (IASC) Five Commitments on Accountability to Affected Populations (AAP), namely (1) leadership/governance; (2) transparency; (3) feedback and complaints; (4) participation; (5) design, monitoring and evaluation. More specifically, AAP will be ensured throughout the intervention by taking account of, giving account to, and being held to account by the affected population as follows. ACTED will be held to account by the beneficiaries in line with Core Humanitarian Standard (CHS) principles, by using ACTED's Complaints Response Mechanism (CRM). The CRM is overseen by ACTED's AME Unit, which is independent from the delivery of activities. Beneficiaries can access ACTED's CRM through a dedicated phone line, whatsapp, email address and complaints boxes as well as directly to ACTED staff during field visits. Through this CRM, beneficiaries can raise concerns, make complaints and give feedback on ACTED and co-applicants' work in a secure and confidential way, and receive a response in a timely manner. ACTED's AMEU is in charge of handling this mechanism to provide timely response or adequate action to address any concerns. Having a well-designed and well-managed mechanism for handling beneficiary complaints will improve the quality of the action, enhance the trust and confidence of beneficiaries and identify areas of the project which need to be improved, and ensure that ACTED teams learn from the feedback provided through this process.

If your project does not have mechanisms for feedback and/or complaints, please explain why (narrative text)

10. – Do No Harm

10.1 - Do No Harm

In all programming, ACTED ensures respect and promotion of the rights of all individuals and communities involved, in accordance with the relevant bodies of law (international human rights law and international humanitarian law). In order to take account of affected populations, the action will also take strong consideration of the needs and interests of beneficiary communities, particularly in regard to designing activities with their safety and dignity in mind. As part of protection mainstreaming, ACTED analyzes protection risks; anticipates possible consequences that may arise; and ensures that issues can be reported/referrals can be made to appropriate agencies/host government structures if required. In particular, ACTED and UFA will undertake regular visits to the communities and beneficiary HHs to ensure that protection concerns are incorporated throughout the intervention, thus enhancing safety, security and privacy for women, children and other vulnerable groups. ACTED is firmly committed to the humanitarian principles of humanity, impartiality, independence and neutrality, and strives to ensure the 'Do-No-Harm' approach by making sure that its activities do not inadvertently worsen tensions among different groups due to its mere presence and/or provision of assistance. To this end, all staff will be made aware of and in adherence to the Do-No-Harm principle as outlined in ACTED'S Code of Conduct and related policies including Child Protection; Anti-Fraud, Bribery & Corruption; Anti-Terrorism; and Policy Against Sexual Exploitation and Abuse. Under this framework, ACTED has developed mechanisms that can contribute

to prevent sexual exploitation and abuse such as: signing of the code of conduct by all staff in order to clarify unacceptable behavior and in particular sexual exploitation and abuse; information to the beneficiaries of existing remedies (Complaints and Response Mechanisms); implementation of training and awareness sessions in order to train and empower the teams and identify risk factors on an ongoing basis. Finally, all activities will be conducted in strict adherence of COVID-19 mitigation measures including social distancing and personal protective equipment (PPE) to minimise the risk of COVID-19 transmission among beneficiaries, staff and stakeholder alike.

11. - Equal and impartial access to aid

11.1 - Equal and impartial access to aid

In order to maximize the reach of the intervention, the project will adopt a deeply integrated protection approach (IPA) throughout all stages of the project cycle. ACTED and UFA, will ensure impartial access to assistance through a strictly needs-based approach. After all, different needs lead to different dimensions of risks and resources for various groups, thus resulting in the necessity of a more comprehensive analysis. ACTED AMEU will involve and consult all categories and layers of the affected population in identifying and responding to needs, bearing in mind differing power dynamics. For instance, to ensure the agency of beneficiaries and further local ownership of project outcomes, the affected population will be actively consulted during the assessments to ensure BoQs and the content of NFI kits are responsive to their self-identified most pressing needs. Where applicable, at least one male and one female per HH will be consulted to ensure gender-specific needs and concerns are taken into account, as well as those of boys, girls, PwDs, the elderly and other marginalized persons to ensure assistance reflects their unique vulnerabilities, including the design of shelter repair and/or adaptation works. Protection and privacy-related items will be prioritized for the winterization assistance, taking particular consideration of those exposed to safety and security concerns. Items related to women and girls' safety and privacy will be also prioritized. In addition, CBPC members and ACTED staff will be present to ensure the integration of HH concerns into BoQ and workplan design. In the event beneficiaries are dissatisfied with their respective BoQ and/or workplan an appeal mechanism will be offered through the CBPCs and ACTED's CRM. If the CBPCs or ACTED/UFA staff consider the request justified, a new BoQ will be produced by a different engineer. To mitigate this, all staff involved in the assessment process will undergo extensive refresher training in protection and shelter SPHERE standards prior to the assessments to ensure equal and impartial access to assistance. Detailed data disaggregated by gender, age and diversity will be collected to ensure a gender mainstreaming approach and measure the project outcomes of different targeted groups. ACTED's Protection Officer will ensure that information is provided through accessible channels, formats, languages and community support networks to ensure that the beneficiary community are kept fully informed of the assistance available under the project. ACTED's AMEU will also ensure equal and impartial access to aid by overseeing the CRM, as well as by conducting various verification exercises. For example, ACTED's AMEU will conduct a verification exercise to authenticate the fairness of the selection process and all applicants will be notified of the final decision and provided with the means to raise concerns regarding the selection process through ACTED's CRM.

11.2 Have you considered all the elements of the Disability Mainstreaming Checklist?

Yes

If you answered no, please explain why

12 - PSEA (Prevention of Sexual Exploitation and Abuse)

12.1- Were PSEA activities built into the project?

Yes

12.1.a How ?

1) (MANDATORY) Project has adopted a safe complaint channel(s) for beneficiaries based on consultations with the beneficiaries and accessible to different groups (Number of beneficiaries and percentage against your target group),2) (MANDATORY) Project has built in activities involving development and dissemination of PSEA awareness raising material including information on rights and safe complaint channels available to beneficiaries and that awareness raising targets all project sites. (Number of beneficiaries and percentage against your target group),3) (MANDATORY) Project has built-in clear process for receipt and referral of complaints of PSEA, in accordance with the oPt PSEA SOPs on Inter Agency Referrals,4) Project staff are required to attend a minimum of one PSEA training,5) Project-related contracts include standard clause on PSEA in accordance with IASC principles and guidance,6) Project staff will directly or indirectly engage in the HCT oPt PSEA Network

12.1.b If 'Other' (12.1a No 7.), please specify

If you answered no, please explain why

Country

occupied Palestinian territory

Gaza Strip

Deir Al Balah

Al Bureij Camp, Al Ma'ani, Al Maghazi Camp, Al Musaddar, Al Zahra, An Nuseirat Camp, Az Zawayda, Deir al Balah, Deir al Balah Camp, Wadi as Salqa,

Khan Yunis

Abasan al Jadida (as Saghira), Abasan al Kabira, Al Fukhkhari, Al Mawasi (Khan Yunis), Al Qarara, As Sureij, Bani Suheila, Khan Yunis, Khan Yunis Camp, Khuzaa, Qa al Kharaba, Qa al Qurein, Qizan an Najjar, Umm al Kilab, Umm Kameil,

Rafah

Al Bayuk, Al Mawasi (Rafah), Al Qarya as Suwaydiya, Rafah, Rafah Camp, Shokat as Sufi, Tall as Sultan,

Clusters



Shelter and NFI Cluster

Caseload

Cluster Activities and Indicators

Indicator	Description	Target	Project Target
5 - Rehabilitation of damaged and/or substandard shelters (fully or partially) to meet shelter basic needs and minimum standards, including adaptation of shelters to meet the needs of PWDs and improving the living space for vulnerable groups, in addition to shelter related support to people at higher risk of Covid-19.			

5.1	# OF INDIVIDUALS PROTECTED AND HAVE IMPROVED ACCESS TO ADEQUATE SHELTER. (DISAGGREGATED BY FEMALE/ELDERLIES HEAD OF THE HOUSEHOLD, GENDER, AGE GROUPS, AND PROTECTION CONCERNS SUCH AS OVERCROWDING, PRIVACY, RISKS AND HAZARDS) # OF PWDS HAVE IMPROVED ACCESS TO SHELTER ☑ Includes Disaggregation	2,200
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6 - Provision of timely winterization/summarization assistance or shelter Non-Food Items (NFI) to vulnerable households at risk of exposure or affected by natural or manmade hazards (e.g. winter storms)

6.1	# of people exposed to harsh weather and protection concerns are supported with adequate shelter assistance ☑ Includes Disaggregation	2,200
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7 - Provision of essential shelter NFIs, hygiene and disinfection materials (in kind , voucher or cash) to the families and individuals living in substandard and overcrowded shelters or at higher risk of COVID-19

7.1	# of individuals living in substandard shelters, overcrowded conditions and at risk of being affected from COVID 19 supported with Shelter assistance to meet basic needs and enhance their coping capacities. ☑ Includes Disaggregation	2,200
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9 - Capacity building of local NGO's, community committees, municipal forums, and volunteers, by training and tools for emergency response, self-recovery, or protection measures to be able to support IDPs and affected people during and post emergencies

9.1	# of community members have improved capacity for emergency response ☑ Includes Disaggregation	18
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Budget

Total Cost

\$1,301,000

[View funding to this project on FTS](#)

Line Items

Indirect / Overhead Costs	\$85,112	6.54%
General operating and other running costs	\$33,530	2.58%
Direct inputs and services to beneficiaries (Supplies, Commodities, Materials, Services, and dedicated Staff whose job is considered as project outputs)	\$1,122,788	86.3%
Staff and other personnel costs	\$59,570	4.58%

Comments