

actalliance

APPEAL



Emergency Assistance to the Rohingya Community in Cox's Bazar, Bangladesh

BGD172 (Revision 1)

Photo credit: Paul Jeffrey

Appeal Target: US\$ 5,646,538

Balance requested: US\$ 5,646,538

SECRETARIAT: 150, route de Ferney, P.O. Box 2100, 1211 Geneva 2, Switz. **TEL.:** +4122 791 6434 – **FAX:** +4122 791 6506 –

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Project Summary Sheet																							
Project Title	Humanitarian Assistance to displaced Myanmar nationals and host community in Bangladesh																						
Project ID	BGD172 (Revision 1)																						
Location	Ukhiya, Cox's Bazar, Bangladesh; Spontaneous Rohingya Settlements / Host Community).																						
Project Period	From 15 October 2017 to 14 October 2019 Total duration: 24 (months)																						
Modality of project delivery	<input checked="" type="checkbox"/> self-implemented <input type="checkbox"/> CBOs <input type="checkbox"/> Public sector <input checked="" type="checkbox"/> local partners <input type="checkbox"/> Private sector <input type="checkbox"/> Other																						
Forum	The ACT Bangladesh Forum																						
Requesting members	<ul style="list-style-type: none"> • Christian Aid (CA) • ICCO Cooperation (ICCO) • DanChurchAid (DCA) • Diakonia • Christian Commission for the Development of Bangladesh (CCDB) (new requesting member in this revision) 																						
Local/Implementing partners	<ul style="list-style-type: none"> • CA: DSK, GUK, CCDB • ICCO: CCDB, GUK • DCA: COAST Trust • Diakonia: United Theatre for Social Action (UTSA) • CCDB: Self-implementing 																						
Thematic Area(s)	<table border="1"> <tbody> <tr> <td><input checked="" type="checkbox"/></td> <td>Shelter / NFIs</td> <td><input checked="" type="checkbox"/></td> <td>Protection / Psychosocial</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Food Security/Livelihoods</td> <td><input checked="" type="checkbox"/></td> <td>DRR (Additionally included and repeated from DRR/Climate Change below)</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>WASH</td> <td><input type="checkbox"/></td> <td>Early Recovery/ Childhoods Education Unconditional cash</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Health/ Nutrition (Missing)</td> <td><input checked="" type="checkbox"/></td> <td>Advocacy</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>DRR/Climate change</td> <td><input checked="" type="checkbox"/></td> <td>Resilience</td> </tr> </tbody> </table>			<input checked="" type="checkbox"/>	Shelter / NFIs	<input checked="" type="checkbox"/>	Protection / Psychosocial	<input checked="" type="checkbox"/>	Food Security/Livelihoods	<input checked="" type="checkbox"/>	DRR (Additionally included and repeated from DRR/Climate Change below)	<input checked="" type="checkbox"/>	WASH	<input type="checkbox"/>	Early Recovery/ Childhoods Education Unconditional cash	<input type="checkbox"/>	Health/ Nutrition (Missing)	<input checked="" type="checkbox"/>	Advocacy	<input checked="" type="checkbox"/>	DRR/Climate change	<input checked="" type="checkbox"/>	Resilience
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Project Impact	Provide life-saving assistance to vulnerable Rohingya refugees and host communities, and ensure their protection, wellbeing and dignity.																						
Project Outcome(s)	<p>A: Affected communities are food secure and have increased opportunities for self-sufficiency</p> <p>B: Refugees, people in need, and vulnerable host households live in resilient shelter structures and have access to appropriate NFIs. (Original: increased access to shelter needs – similar need response)</p> <p>C. Affected communities have access to improved WASH facilities (Original: communal hygiene, safe water and sanitation facilities – similar need response).</p> <p>D. Increased protection and psychosocial support available to vulnerable and traumatised communities.</p>																						

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	E. Site structures are improved and Rohingya refugees are better prepared to deal with natural disasters																
Target beneficiaries	<table><tr><th colspan="4">Beneficiary profile</th></tr><tr><td><input checked="" type="checkbox"/></td><td>Refugees</td><td><input type="checkbox"/></td><td>IDPs</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Host population</td><td><input type="checkbox"/></td><td>Returnees</td></tr><tr><td><input type="checkbox"/></td><td colspan="3">Non-displaced affected population</td></tr></table> <p>Estimated total number of direct beneficiaries by sector of intervention:</p> <ul style="list-style-type: none">• Food Security and livelihoods: 8,910 HH• Shelter/NFI: 20,100 HH• 61,200 HH for survival kits• WASH: 66,316 HH• Protection/ Psychosocial: 20,350 HH• DRR: 2,360 HH <p>According to IOM and ISCG Demographic data male to female ratio is 36:54</p>	Beneficiary profile				<input checked="" type="checkbox"/>	Refugees	<input type="checkbox"/>	IDPs	<input checked="" type="checkbox"/>	Host population	<input type="checkbox"/>	Returnees	<input type="checkbox"/>	Non-displaced affected population		
Beneficiary profile																	
<input checked="" type="checkbox"/>	Refugees	<input type="checkbox"/>	IDPs														
<input checked="" type="checkbox"/>	Host population	<input type="checkbox"/>	Returnees														
<input type="checkbox"/>	Non-displaced affected population																
Project Cost (USD)	5,565,970.67																

Reporting Schedule

Type of Report	Due date
Situation report	First SitRep due 31 November 2017 Monthly (12 th day of the month)
Final narrative and financial report (60 days after the ending date)	October 2019
Audit report (90 days after the ending date)	15 January 2020

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Please kindly send your contributions to either of the following ACT bank accounts:

US dollar

Account Number - 240-432629.60A

432629.50Z

IBAN No: CH46 0024 0240 4326 2960A

Euro

Euro Bank Account Number - 240-

IBAN No: CH84 0024 0240 4326 2950Z

Account Name: ACT Alliance

UBS AG

8, rue du Rhône

P.O. Box 2600

1211 Geneva 4, SWITZERLAND

Swift address: UBSWCHZH80A

Please note that as part of the revised ACT Humanitarian Mechanism, pledges/contributions are **encouraged** to be made through the consolidated budget of the country forum, and allocations will be made based on agreed criteria of the forum. For any possible earmarking, budget details per member can be found in Annex 5 (Summary Table), or upon request from the ACT Secretariat. For pledges/contributions, please refer to the spreadsheet accessible through this link <http://reports.actalliance.org/http://reports.actalliance.org/>. The ACT spreadsheet provides an overview of existing pledges/contributions and associated earmarking for the appeal.

Please inform the Head of Finance and Administration, Line Hempel (Line.Hempel@actalliance.org) and Senior Finance Officer, Lorenzo Correa (Lorenzo.Correa@actalliance.org) with a copy to the Regional Programme Officer James Munpa (James.Munpa@actalliance.org), of all pledges/contributions and transfers, including funds sent direct to the requesting members.

We would appreciate being informed of any intent to submit applications for EU, USAID and/or other back donor funding and the subsequent results. We thank you in advance for your kind cooperation.

For further information please contact:

ACT Regional Representative, Anoop Sukumaran (ask@actalliance.org)

ACT Regional Programme Officer, James Phichet Munpa (jmu@actalliance.org)

ACT Web Site address: <http://www.actalliance.org>

Alwynn Javier

Global Humanitarian Coordinator

ACT Alliance Secretariat

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BACKGROUND

1.1. Context

After generations of statelessness and marginalization, extreme violence in Rakhine State, Myanmar has forcibly displaced almost 700,000 Rohingya refugees across the border in August 2017. This sudden influx is adding to the existing Rohingya population of more than 200,000 in Cox's Bazar (CXB), Bangladesh, who have been seeking shelter there for years. The people of CXB and the Government of Bangladesh have been very welcoming to the Rohingya, but the influx of refugees puts a heavy burden on the host community. CXB is an economically disadvantaged district and the influx has exacerbated existing vulnerabilities and put enormous pressure on already scarce resources. As a result, tension between the host community and Rohingya is building and both groups are in need of assistance. During the monsoon and cyclone season needs are expected to increase drastically.

1.2. Needs

The Government and people of Bangladesh have displayed extraordinary generosity towards Rohingya refugees. However, the speed and scale of the refugee influx exceeds the capacity of the host country and humanitarian community stepped up its support to respond to the immense needs on the ground. Months after the influx, the refugees remain forced to rely upon humanitarian assistance for their basic needs and survival. The Joint Response Plan for the Rohingya Humanitarian Crisis (JRP), requests US\$951 million to respond to the needs of 1.3 million people this year¹. However, funding for the JRP remains at only 16% with notable funding gaps in Food Security and Health. With the monsoon and cyclone season the needs of the Rohingya and host community have increased further, as access to food is more challenging and the congested campsites of the Rohingya are ill-equipped to handle the torrential rains and landslides.

According to the requesting members (based on the JRP, ISCG Situation Reports, recent needs assessments and field information) most urgent needs are currently within the Shelter and NFI, Food Security, Health, WASH, Protection, and Site Management sectors.

Shelter and Non-Food Items (NFIs): Refugees are residing in makeshift shelters that are severely below basic humanitarian standards, overcrowded, and will not withstand seasonal climatic conditions. The low quality of the shelters and poor terrain as well as the lack of privacy within these shelters has a serious impact on the physical and psychological well-being of the refugees, especially for women, children, elderly and people with disabilities. Upgrades to shelters and site improvements are urgently required prior to the next monsoon and cyclone season. Space in settlements is critically limited. Lacking adequate land, refugees have built shelters on hills which are at risk of landslides and in areas prone to flooding. The sector's joint needs assessment revealed that 40% of surveyed people in host communities paid rent for land or houses. The same assessment revealed that essential household needs vary considerably according to distributions to date and geographical location of HHs. Refugees are requesting support with replenishment of items which have been distributed before as well as some non-typical NFIs. Clothes, lighting, stoves and kitchen sets are amongst those commonly requested items. Until recently, the Government of Bangladesh restricted construction of semi-permanent shelters in refugee camps and settlements. As makeshift

¹ <https://www.humanitarianresponse.info/en/node/161981>

shelters and upgrades have a limited lifespan and do not meet standards to withstand high wind events, there is a need to adopt more viable solutions.

Food security and livelihoods: According to the food security sector, 12,200 metric tonnes of food are needed per month to sustain the refugee population. As of April 2018 the food security cluster reported that only 9% of reported funding requirements have been met. The refugee influx saw a huge population growth that local agricultural activities cannot sustain the food needs of. This signals disaster for both the host and Rohingya community. Both communities must have access to reliable and diverse food sources, and livelihood opportunities must be created to build capacity and move towards self sufficiency. There is a shift towards restricted voucher-based approaches for food and fresh food, which is currently led by WFP but also sought out by other FSL actors pending government acceptance.

Water, sanitation and health (WASH): WASH facilities in settlements are under immense strain and based on field observations, the current rate of construction for latrines does match the rate at which they are becoming full and therefore unusable. All latrines must be constructed according to DPHE emergency and semi-permanent standards. Nearly 50% new arrival don't have easy access to safe drinking water; some have to walk on average 0.5 kilometres to collect safe drinking water. Less than 25% new arrival have access to safe sanitary latrine and wash rooms. Lack of basic personal hygiene and dignity items including menstrual hygiene products coupled with lack of awareness and hygienic practice is increasing the risks and likelihood of disease outbreak. Women of reproductive age need menstrual hygiene kits and awareness.

Protection: Rohingya women and girls have experienced significant sexual violence and abuses while fleeing from Myanmar. In addition, women and girls are continuously at high risk of violence and harassment in the current settlements. Community consultations have confirmed the existence of various forms of violence including intimate partner violence, rape, sexual harassment, forced and early marriage (child marriage) and high risks of trafficking. While present before the displacement. The practice of early marriage has increased to lessen the financial burden of the family household. According to various assessments, survivors of GBV are largely blamed for putting themselves at risk and face stigma for the violence they have suffered by community members. Moreover, women and girls are restricted in their movement partly due to the fear of stigma and harassment as well as due to some restrictive cultural traditions and gender barriers that restrict women and adolescent girls' movement and interaction with their wider communities.

Disaster risk reduction (DRR) and site improvement: The settlement areas for Rohingya refugees are extremely vulnerable to natural hazards and disasters in particular in the monsoon and cyclone periods. This leads to risk of landslides and flooding while storms and cyclones have devastating effects on infrastructures such as pathways, bridges, land, shelter and communal spaces. Awareness raising, community risk assessments, technical initiatives and strengthening of infrastructures and contingency plans are urgently needed. Furthermore, activities to support the population in resettling post-disaster need to be in place. Community disaster risk committees are vital for timely and localised response especially as NGOs will not have access to the camps at all times.

1.3. Capacity to respond

The requesting members (Christian Aid, ICCO Cooperation, DanChurchAid, Diakonia, and Christian Commission for the Development of Bangladesh) with their local implementing partners (Christian Commission for the Development of Bangladesh (CCDB), Coast Trust, United Theatre for Social

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Action (UTSA), DSK, and GUK) are all already working on the Rohingya response and have a strong presence on the ground. They have managed to establish trust and acceptance within the refugee camps and host community. And they have built strong relationships with the Government of Bangladesh, the UN and other humanitarian actors at both local and national level. Coordination amongst the requesting members as well as with other actors, ensure an effective and harmonized response in terms of geographical coverage and sectoral needs.

Requesting members work with local implementing partners as part of their commitment to Charter for Change for localisation of Humanitarian Aid, whereby embedding the commitments of funding, partnership, transparency, recruitment, advocacy, equality, support and promotion in programming in collaboration with local implementing partners. The proposed project builds on current interventions of the requesting members and their implementing partners. All organizations working under this appeal have extensive experience in providing life-saving assistance in Cox's Bazar and other parts of Bangladesh.

Christian Aid (CA)

CA is a UK humanitarian and development agency supporting the poorest regardless of creed, ethnicity, caste, class, sexual orientation or gender. Globally, CA operates through local offices, works with partner organizations across 39 countries worldwide and has extensive experience managing and monitoring emergency relief and rehabilitation actions, both with local partners and directly. CA has worked in Bangladesh since 1972 through local partners and, in 1999, set up a country office. Over its last four decades of work in the country, CA has worked extensively to provide humanitarian aid and empower communities to access their rights. CA has been working in Cox's Bazar for the last 6 years with host communities and the Rohingya population. After the August influx in 2017, it has scaled up its operations and provides assistance in the areas of WASH, Health, FSL, Shelter, Protection and Site Management, running a 10 million euro operation. Since November 2017, CA is the site manager of Camp 15/Jamtoli, , coordinating with government, military, the community to ensure provision of quality and appropriate services. CA works together with its long-standing partner DSK. CA and DSK have been implementing projects since the beginning of the Rohingya crisis. CA also works with GUK, which has over 25 years of experience of working in Bangladesh. CA and GUK have worked together on the Rohingya response with funds from DEC and the UN.

ICCO Cooperation (ICCO)

ICCO Cooperation is an international organization working in 36 countries with a track record of more than 50 years globally and 42 years in Bangladesh. As early as the country's birth in 1971, ICCO has actively supported the institutional build-up of the civil society to reach marginalized communities in rural areas of Bangladesh to support food security and livelihoods. ICCO's programs are co-created and co-implemented in partnership with cooperative members in the Netherlands and local Bangladeshi partner organizations, reaching more than 1.5 million people in the country till date. In Cox's Bazar, ICCO has experience working in the areas of FSL and WASH. ICCO has been involved in blanket food distribution with WFP, emergency WASH and capacity building of local partners by providing them training on how to use entertainment as a form of psycho-social support. ICCO works with implementing partner CCDB because of their long-term experience of working in

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the Cox Bazar district. We have chosen GuK for our livelihood projects because of their specific experience in this field when working in the Rohingya camps.

DanChurchAid (DCA)

DanChurchAid has worked in Bangladesh since 1971 through local partners in development programming. Since September 2017, DCA began its emergency response to the Rohingya emergency and established a base in Cox's Bazar by working with partners as well by directly implementing GBV programming with integrated hygiene promotion and disaster risk reduction components. This included constructing two women and girls' safe spaces directly funded by UNICEF, while focusing on building the capacity of staff and simultaneously building the trust and rapport within the targeted communities. DCA works with implementing partner COAST Trust, because of its experience working with disadvantaged population of the coastal areas in Bangladesh and specifically women and children. COAST are providing support to mainly adolescent girls in 2 locations of Camp 1, Kutupalong through Women Friendly Spaces with informal education and life skills development. COAST Trust is also maintaining tube wells and providing hygiene promotion sessions. COAST Trust is well established and recognised in the host and refugee community and furthermore a strong advocacy partner in relation to especially Grand Bargain commitments on localisation. Hence, supporting the same values, DCA continues to support COAST in their work in Cox's Bazar.

Diakonia

Diakonia has an extensive track record of humanitarian work and since its foundation in 1966, gained substantial experience in helping people affected by disasters and conflict. Diakonia has been working in Bangladesh since 1970, when a devastating cyclone hit the southern parts of the country, which it the first organization registered under the government's NGO Affairs Bureau. For three decades, Diakonia has been working with local partners on the Thailand-Myanmar border to provide humanitarian aid to Burmese refugees in 9 camps. Diakonia's partner UTSA has long-term experience in addressing any humanitarian crisis as it responded to SIDR, AILA, Rana plaza, Rangamati landslide, and the Miressorai tragedy. UTSA is a specialized organization who can provide psychosocial care to the survivors at individual as well as group level and through interactive popular theatre. Diakonia partner UTSA is an expert organization on mental health and psychosocial care, through playback-theatre/ Theater Therapy psychotherapy, professional psychosocial counsellor for women, girls who are victims of torture, rape and GVB. It has also work on Theater for Development (TfD) in providing education for kids. UTSA will also able to provide NFIs, wash kits of the affected people with maintaining standards. Another expertise of UTSA is in the field of Interactive Popular Theater (IPT). It has their own team, volunteers and they can produce drama/ theatre shows by the community where community people take the lead in selecting performance and issues. IPT shows will depict different problems in the camp particularly those related to health, hygiene, and gender equality, negative social practices such as violence against women, polygamy, and male dominance.

Christian Commission for the Development of Bangladesh (CCDB)

Christian Commission for Development in Bangladesh (CCDB), one of the leading national NGO was initiated in 1973, as a continuation of Bangladesh Ecumenical Relief and Rehabilitation Services (BERRS) that was initiated in 1972, after the War of Independence in 1971; with a vision of building a just and caring society, where poor people live in peace; with dignity and harmonious relationship

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with all of God's creation. Until 1975 CCDB was mainly involved with relief and rehabilitation program with the people returning from Indian refugee camps after the war of independence.

During the late 1980s CCDB focused on (i) Participatory Process for Poverty Reduction, (ii) Formal and Non-Formal Education and . In mid 1990s CCDB introduced (i) People Managed Savings and Credit Program; (ii) Community Based Health Care Development and (iii) Community Based Disaster Management Program. Climate change issue is considered as one of the foremost challenges to ensure sustainable economic growth and to achieve SDGs and other development aspirations especially in countries like Bangladesh. Considering the context, CCDB has started to implement dedicated projects & programs since 2009. The long term aspiration of CCDB is to promote pro-poor climate resilient low carbon sustainable development. From the last year, CCDB has been involved in implementing program on Rohingya Response. CCDB received supports from CA, Icco Cooperation, DKH Germany, WR Canada, NCA and UNICEF and Tear Fund. We touched almost all sectors. We have distributed supplemental food, WASH Kits, Shelter and other NFIs. We constructed latrines, street lights, Women Friendly Space, Installation of desludging unit.

2. PROJECT RATIONALE (*Logical Framework [Annex 3]*)

2.1. *Intervention strategy and theory of change*

To reach the most vulnerable people, and ensure their protection, wellbeing and dignity, a multi-sectoral approach is needed. The requesting members propose to respond to needs in the Food Security; Shelter and NFI; Health; WASH; Protection; and Site Management and DRR. These sectors are selected on the basis of current needs, gaps in the response and the track records of the requesting members. Moreover, these sectors are expected to be highly affected by the monsoon. The sectors are linked to each other and together bring about a complementary and holistic approach to improve the living conditions of the Rohingya refugees and the host communities. Implementing partners will be supported in preparing implementation plans, ensuring community participation, and establishing social inclusion in the beneficiary selection process.

The scale of this response requires a high level of coordination in the field. To ensure high quality alongside an effective response, the intervention will be guided by the Core Humanitarian Standard (CHS) and adhere to minimum SPHERE standards, and promote coordination with other actors by setting objectives that compliment those set out in the ISCG join response plan. For efficiency, ACT Alliance members have committed to targeting their operations to certain sectors and coordinating together to deliver direct results in the following sectors:

Food Security and Livelihoods: We promote self reliance in our interventions. 4,050 HH with livelihood restoration activities, and 3,950 HH will receive income through the creation of cash for work opportunities. Where food security is an immediate need, 910 Households will receive food, food parcels or food supplements directly.

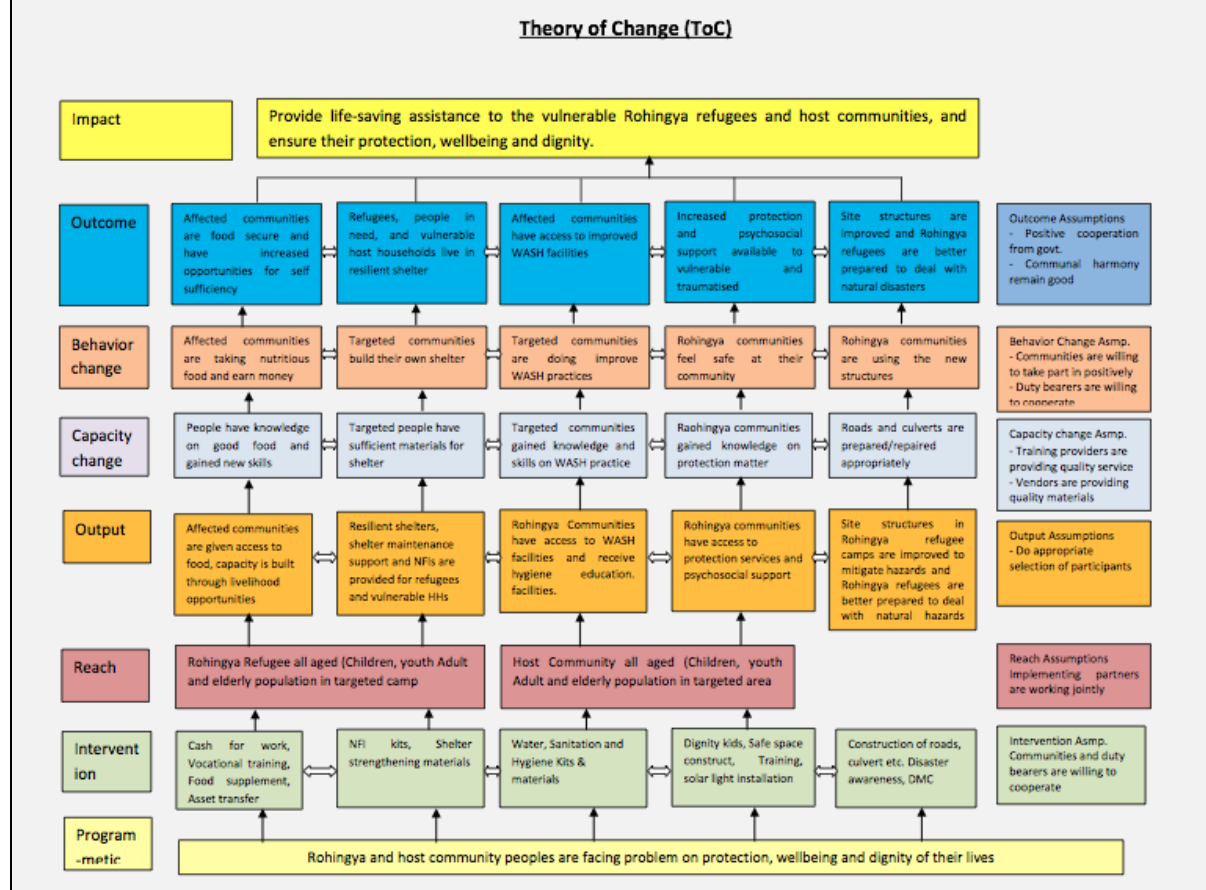
Shelter and NFI: 18,100 HH will be provided with a variety of NFI kits that meet the immediate needs of beneficiaries. Alongside this, 2,000 HH will have their shelters strengthened against the coming monsoon and cyclone season.

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WASH: The spread of communicable disease is a huge risk in the camps. 20,988 HH will receive direct hygiene promotion, and 19,420 HH will receive hygiene kits. 4,130 HH will be given access to a functioning latrine. 6,200 HH will have water points constructed and 15,578 HH will be provided with the means to access a source of safe drinking water.

Protection and Psychosocial: 78 specialist spaces that provide services to women, girls, children or families will be built and run. 15,800 individuals will benefit from improvement to services provided by existing spaces that offer protection and psychosocial support. 8,800 individuals will benefit from initiatives that increase safety, and 17,000 women and girls will receive gender appropriate hygiene kits.

DRR: 1,360 HHs have increased awareness about their risks and how to deal with them; 5000 people benefit from site improvements and mitigation measures, 17 block-level disaster management committees are trained (benefit 11,000+ HHs), functional and have contingency measures in place; 17 blocks have early warning systems established (benefit 11,000+ HHs indirectly)



2.2. Impact

Overall objective/Impact: Provide life-saving assistance to the vulnerable Rohingya refugees and host communities, and ensure their protection, wellbeing and dignity.

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2.3. Outcomes

- A: Affected communities are food secure and have increased opportunities for self sufficiency
- B: Refugees, people in need, and vulnerable host households live in resilient shelter structures and have access to appropriate NFIs.
- C. Affected communities have access to improved WASH facilities
- D. Increased protection and psychosocial support available to vulnerable and traumatised communities.
- E. Site structures are improved and Rohingya refugees are better prepared to deal with natural disasters

2.4. Outputs

- A1. Affected communities are given access to food, capacity is built through livelihood opportunities** (32,910 individual beneficiaries estimated | Estimated budget: USD 369,561)
 - 1.1 3,950 individuals in host and Rohingya communities employed through cash for work activities
Activities: Identification of cash for work activities with refugees and host community
 - 1.2 4,050 individuals in host and Rohingya communities assisted through livelihood restoration activities
Activities: Asset packages and vocational training
 - 1.3 910 households receive food/food parcels
Activities: Food supplements distributed to vulnerable groups
- B1. Resilient shelters, shelter maintenance support and NFIs are provided for refugees and vulnerable host household** (83,100 individual beneficiaries estimated | Estimated budget: USD 717,165)
 - 2.1 18,000 households provided with NFI kits
Activities: NFI Kit distribution according to established needs
 - 2.2 2,000 shelters constructed/strengthened
Activities: Bamboo, rope and plastic sheeting are distributed for shelter strengthening.
- C1. Rohingya Communities have access to WASH facilities and receive hygiene education. Facilities** (66,316 households reached | Estimated budget: USD 1,233,388)
 - 3.1 15,578 HH provided with the means to access to a source of safe drinking-water
Activities: Provision of 400,000 water purification tablets
 - 3.2 Water points for 6,000 households developed/ constructed
Activities: Deep and shallow tube wells constructed
 - 3.3 4,130 HH have access to a functioning toilet
Activities: Latrines cleaned, installed and maintained
 - 3.4 20,988 HHs receive direct hygiene promotion (excluding mass media campaigns)
Activities: Hygiene promotion sessions carried out and hardware improved with protection mainstreamed to encourage complete and proper use.
 - 3.5 19,420 HHs are provided with hygiene kits
Activities: WASH Kits distributed
- D.1 Rohingya communities have access to protection services and psychosocial support** (46,600 individual beneficiaries estimated | Estimated budget: USD 579,273)
 - 4.1 17,000 women/girls receive dignity kits

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Activities: Dignity kits distributed

4.2 78 functional safe spaces established for women & girls/children/ families/ other

Activities: Safe spaces constructed

4.3. 15,800 individuals benefiting from improved protection-related services

Activities: generate participatory interest, ToTs

4.4. 8,800 individuals benefit from protection initiatives increasing safety for women and girls, men and boys

Activities: Group training, solar light installation

E1. Site structures in Rohingya refugee camps are improved to mitigate hazards

(1,000 HHs | Estimated budget: USD 261,000)

5.1 1,000 HHs receive local site improvement works and small-scale mitigation measures installed

Activities: Installment of footsteps, culverts, water canals, bamboo foot bridges and rehabilitated wastewater and sewage systems (linked to Cash for Work/livelihoods)

E2. Rohingya refugees are better prepared to deal with natural hazards pre-, during and post-disaster (Estimated beneficiaries: 11,600 HHs | Estimated budget: USD 84,000)

5.2 Risk awareness sessions conducted with 1,360 Rohingya refugees

Activities: Awareness sessions with groups of 15 on hazard identification, safe location identification and HH-level contingency planning

5.3 17 block level DMCs and camp level DMCs with updated contingency plans

Activities: (Re-)establishment of disaster management committees, sessions on contingency planning and risk assessment

5.4 Establish early warning system across 6 camps in coordination with Bangladesh Army and existing system

Activities: Distribution of hand sirenes to DMCs (1 per 3 blocks), identification of safe locations with Army

2.5. Preconditions / Assumptions

- NGOs have access to work for Rohingya refugees for the next 18 months (2 years in the previous appeal) without sudden policy changes and abrupt relocation of camps.
- Law enforcement agencies and the Bangladesh military continues to provide supporting roles in distribution management, security and demographic data of (new) settlements.
- Smooth coordination mechanism with ISCG members, UN bodies and local NGOs, as well as private sector actors.
- Security situation inside camps and between refugees and host communities remain stable and conducive to humanitarian aid.
- Adequate and timely funding for the humanitarian response. (Additional from the original appeal).

2.6. Risk Analysis²

Host community and Rohingya community conflict

Cox's Bazar, with a population of 2,290,000 predominantly Bengali Muslims, is one of Bangladesh's poorest and most vulnerable districts. Malnutrition and food insecurity are at chronic to moderate levels and poverty levels are well above the national average. The recent increase in population density due to the influx is putting huge pressure on the local labor market, roads, land, firewood and

² See also Annex 10 - Security Risk Assessment

other resources. Food and transport prices are increasing, whereas income opportunities and wages are declining. In some places, the host community is becoming the minority. As a result, tension between the Refugees and host community is growing. Minor clashes have already been reported. The host community feels like it is being left alone while all attention of the Government, Military and the international community goes out to the protection and wellbeing of the Rohingya. Therefore, it is key to address the needs of both groups and address senses of discrimination and subordination felt.

Security situation

Due to the influx of refugees, the entire regional security landscape has changed. Present grave political and security risks need to be addressed, including potential cross-border attacks by the Arakan Rohingya Salvation Army (ARSA) militant group and possible transnational terrorism. In addition, there have been a high number of crime-related incidents and events that created a sense of generalized insecurity. There are strong links between displaced people - including self-identified camp and block management committees in the makeshift settlements - and well established local criminal networks engaged in human and drug trafficking. Several incidents have been reported of which some relate to actions taken by the government that impeded aid delivery. There have been no reports of aid worker deaths, injuries or kidnappings since the crisis began.

Protection and gender based violence

Criminality, including drug trafficking and human trafficking, present enormous challenges to site management and preserving the safety and dignity of people living in displacement. There is evidence of ongoing trafficking of refugees into the sex trade in nearby urban centres and constant threat of gender based violence.

Trauma and participation

Many of the Rohingya refugees have faced extreme violence in their home country. While protection actors have the intention to broadly include women and girls, men and boys in various outreach and psychosocial support activities, the impact of these sessions can be affected by the level of severe trauma and depression among the Rohingya refugees. This might hinder participation, learning and adaptation in protection, GBV and child protection.

Disease outbreaks

Disease outbreaks are already occurring and affect large parts of the Rohingya refugees and surrounding communities. During the rainy season, disease outbreaks are likely to be exacerbated as a result of degrading living conditions, damaged WASH infrastructure and poor hygiene leading to increased risks of water and vector borne diseases³. Access to health care is expected to reduce due to the disruption and damaging of health facility service provision. Acute watery diarrhea is pretty common, and may have a negative impact on the results of the project.

Relocation/repatriation (Myanmar, island)

In November 2017, the Governments of Bangladesh and Myanmar signed an arrangement on the repatriation of Rohingya refugees (referred to as forcibly displaced Myanmar nationals). The arrangement affirms that return should be voluntary, safe and dignified. The operationalization of this arrangement is currently under discussion between the two Governments. In April 2018, UNHCR and the Government of Bangladesh finalized a Memorandum of Understanding (MoU) relating to voluntary returns of Rohingya refugees once conditions in Myanmar are conducive⁴. At present, the UN has limited access to the three northern townships of Rakhine state in Myanmar. The UN continues to engage the Government of Myanmar to seek unfettered access to Rakhine to ensure that development and humanitarian assistance reaches all people in need. There are ongoing discussions about the UN's, and in particular UNHCR's, engagement with the process of repatriation and reintegration; should the conditions for return improve demonstrably, based on unfettered access and monitoring reports by UNHCR and other partners. The international community has committed to supporting the safe, dignified and sustainable return of Rohingya refugees from camps in Bangladesh.

At this time the government of Bangladesh is proposing the relocation of 100,000 rohingya refugees to an island Bashan Char (formerly Thengar Char), in the Bay of Bengal. The Government of Bangladesh claims the transfer is in line with its obligations under international human rights law to prevent the loss of life and property given the upcoming monsoon and cyclone season. However concerns remain about whether this relocation is in line with humanitarian principles.

Suffering may increase and dignity undermined, against the principle of humanity:

- i) The UN's position is that refugees are at further risk as adequate flood and cyclone preparedness measures are not put in place ;
- ii) The UN Human Rights Committee has written to the Government of Bangladesh recommending that the Rohingya "refugees are not forcibly relocated and that planned relocation sites offer conditions compatible with the international obligations of [the Government of Bangladesh]", and has concerns that these rights will not be upheld;
- iii) Without adequate information about the suitability and infrastructure on the island or the GoB's decision-making criteria, and the ability to make informed choices in relation to their safety, refugees may feel obliged to return to Myanmar, (which may constitute a violation of the customary right to non-refoulement);
- iv) Without freedom of movement to and from the island, relocation to Bashan Char could amount to arbitrary detention;
- v) There is no assessment of needs based on gender, age, disability or specific vulnerabilities, and so no provisions to protect against sexual and gender based violence, respond to the specific needs of children, the elderly and those with disabilities, or put in place psycho-social support and prevent re-traumatisation.

Natural hazards (cyclone, monsoon, floods, landslide)

Cox's Bazar district is highly vulnerable to shocks and natural hazards with annual cyclone and monsoon seasons and climate change might worsen their impact. The monsoon cyclone season

⁴ <http://www.unhcr.org/news/press/2018/4/5ad061d54/bangladesh-unhcr-agree-voluntary-returns-framework-refugees-decide-conditions.html>

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reaches its peak during June, July and September, but the pre-monsoon cyclone season starts already in April and the post-monsoon cyclone season lasts until November. Cox's Bazar and Chittagong have been hit by more than three significant cyclones in the last two years. Much of the land hosting refugee camps and settlements is steep or low-lying, prone to flooding and landslides. This is further exacerbated by widespread deforestation and clearing vegetation on the mainly clay hills. Heavy rain, flooding, and wind will certainly cause widespread destruction across all locations. The congested and weak shelters and little infrastructure in place pose huge threats to the refugee settlements. There is therefore urgent need to upgrade shelters and refugee sites and to preposition shelter materials, site improvement materials and essential household items for emergency response. With a history of cyclones in Bangladesh which disproportionately affects women and children, these subgroups are particularly at risk because there are currently no shelters for cyclones in refugee camps and settlements. But the effects of the monsoon will affect all aspects of the humanitarian response and contingency planning is needed to be integrated throughout all sectors. Currently, monsoon preparation and mitigation is taking place, but there are still huge gaps in the monsoon contingency planning. Relocations from at-risk areas in the camp have started, but will never be available for all refugees at risk⁵.

2.7. Sustainability/ Exit strategy

Despite the Myanmar and Bangladesh government signing an agreement for the return of the Rohingya, conditions in Myanmar are not currently conducive for return and we do not foresee this as an option in the near future. The requesting ACT members expect to see protracted displacement in Bangladesh with Rohingya refugees relying heavily on humanitarian assistance over the coming year and beyond.

Planning an exit strategy at this stage is not appropriate given the lack of clarity of possible relocation/repatriation of the Rohingya refugees. ACT members approach the question of sustainability by working with local partners. This guarantees interventions that have longer lasting impact than what INGOs can offer.

The camps and surrounding areas are highly vulnerable to natural hazards and the upcoming cyclone and monsoon season threaten to take us back into a acute emergency phase. The ACT Alliance partners remain ready respond to crises, to deliver life-saving assistance in the wake of flood, landslides and cyclones.

Nevertheless, it is essential that interventions focus on sustainability. Beneficiaries must be given the opportunity to move towards self reliance. Hence, where we provide food support, we also provide livelihood and capacity building simultaneously and we engage in livelihoods restoration activities for the host community.

The host community have been severely impacted by the influx of Rohingya refugees. Tensions are rising between to two communities and ACT Alliance mitigates this by delivering services to both at risk host community populations and the Rohingya (as described under 2.6).

5

https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/20180413_iscg_sitrep_1.pdf

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3. PROJECT IMPLEMENTATION

Does the proposed response honour ACT's commitment to Child Safeguarding?

☒ Yes

☐ No

All requesting and implementing partners will strictly follow its commitments to prevent any abuse or mistreatment of children. ACT members, along with our implementing partners, are committed to:

- a) Not to allow use of child labour
- b) Ensure child safety and wellbeing
- c) Integrate child friendly approaches into all project activities

3.1. ACT Code of Conduct

ACT Code of Conduct will be a mandatory document to be signed by requesting/implementing members, their staff, consultants and subcontractors (if any). Beneficiaries will be oriented in the main value of the Code of Conduct with a focus on prevention of sexual exploitation and abuse; accordingly, complaints mechanisms will be put in place.

3.2. Implementation Approach

ACT Alliance will intervene in five key areas; Shelter and NFI; Food Security; Health; WASH; Protection; and Site Management sectors and DRR. Each requesting member commits to coordinated work in the field when working in the same sector.

Where and when possible, the modality of assistance will be cash transfer to increase freedom of choice and dignity. This will take place coordination with other actors, such as camp management, local leaders and protection agencies and is supported by market assessments and monitoring. Throughout the different stages of the project, participatory and inclusive approaches will be followed. Mobile-based applications (AKVO Flow, Kobo, MAGPIE) will be used to increase efficiency of the planning and monitoring processes.

Implementation approach: Food Security and Livelihoods

Our response will contribute to the efforts of the food security sector, working toward food security and diversity for both the Rohingya and host community. Beyond this we commit to promoting self reliance through the creation of livelihood opportunities. Cash for work will be used in activities under disaster risk reduction to help create a temporary income source for targeted refugee HHs.

Implementation approach: Shelter and NFI

Shelter: We will work to ensure refugees, people in need and vulnerable host households live in resilient shelter structures and have access to appropriate NFIs. The ability to provide adequate shelter which meets international standards will be conditional on the availability of land and decongestion of settlements, as well as clear guidance from the government on acceptable building standards and materials. We will coordinate within the Shelter/NFI sector. We will promote sector-agreed standards on resilient shelter upgrades and advocate for the need for more weather-resilient materials. **NFIs:** We will distribute appropriate NFIs that meet seasonal needs. CA will provide technical assistance to ACT partners working in the Shelter/NFI sector

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Implementation approach: WASH

To ensure refugees have developed improved personal and communal hygiene, access to safe drinking water and to basic healthcare and psychosocial support, for short-term emergency needs WASH kits containing as much as 12 items will be distributed every two months. Medical camps based inside the settlements capable of serving 300 patients per day will contribute to the overwhelming health needs for 18 months. Based on field observations, the current rate of construction for latrines does match the rate at which they are becoming full and therefore unusable. This is due to the fact that most emergency latrines are dual-ring and slab instalments and are overused. To address the sludge management, requesting members and partners will develop multiple context specific technologies for all the sites and install multiple-ring and slab instalments suitable for extensive use. To ensure safe water supply in the long-run, deep tube-wells will be installed for communal use.

Implementation approach: Protection and psychosocial support

To ensure strengthened protection for women, girls and children, a number of safe spaces are established to offer services and safe havens for survivors and women and girls at risk. The staff operating in the safe spaces receive training on all relevant topics such as core GBV, child protection, PSS, PFA and life skills and are continuously mentored in their jobs. The safe spaces for women and girls offer case management, psychosocial support and group counseling, meanwhile child friendly spaces give room for play and learning. Continuous risk assessments and safety audits will ensure that activities are fitted to the priorities and to address the real risks of the women, girls and children. IEC material is developed for the awareness raising.

Implementation approach: Disaster risk reduction and site management

To ensure that site infrastructures are better able to withstand the risks related to natural disasters, localised site improvements and small-scale mitigation measures will be put in place. This includes strengthening of pathways, footsteps and stairs, culverts, water canals, bamboo foot bridges and rehabilitation of sewage systems. The site improvement work will be linked to the livelihoods sector as most works are implemented through cash for work with an engineer overseeing the technical aspects. To address hazards and risks, Rohingya refugees will be engaged in awareness raising activities and volunteers and Disaster Management Committees (DMC) will be trained in contingency planning and Early Warning Systems.

3.3. Project Stakeholders

Key external stakeholders:

National and local government

The Ministry of Disaster Management and Relief, represented by the Refugee Relief and Repatriation Commissioner (RRRC) at the local level is responsible for the overall coordination of and policy framework the response. The NGO Affairs Bureau grants permission to implement NGO response. In addition, the government is responsible for the allocation of land and providing demographic data and other involvement through the line Departments.

Armed forces/camp authorities

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The RRRC has deployed Camp in Charge officials (CiCs) responsible for camp management in the larger sites. Members of the police have been assigned to ensure law enforcement. The Military played a key role in organizing relief distribution, logistics and construction at the beginning of the crisis. Now, their main priority is extending the civilian administration for camp management and provision of security, including harmonizing and establishing a more predictable CiC system which works in tandem with the variety of humanitarian and other stakeholders.

Inter-Sector Coordination Group (ISCG)

The humanitarian response is coordinated by ISCG, led by the UN International Organization for Migration (IOM). The ISCG brings together interventions across various sectors, supported via relevant cluster, UN agencies and NGOs.

INGO Forum

The INGO Forum in Cox's Bazar is a coordination group for international NGOs working in the district.

3.4. Field Coordination

Multilateral and bilateral Bangladesh based donors and UN agencies are organized under the umbrella of the Inter-Sector Coordination Group (ISCG), the most urgent needs and response priorities are captured in the Joint Response Plan (JRP). The ISCG is tasked with engaging in dialogue on development issues with the Government of Bangladesh. Specific technical and coordination matters are discussed in the various working groups.

Requesting members will participate in five sectors Shelter and NFI, Food Security, Health, WASH, Protection, and Site Management sectors and DRR. Each member will lead the coordinated response of ACT members at a field level in close coordination with ISCG. The close collaboration of the requesting ACT members promotes efficiency, knowledge sharing and combining of resources for a more effective response.

3.5. Project Management

Christian Aid is the lead organisation for this Appeal. Monthly project management meetings at a field level promotes a unified approach to advocacy and problem solving. Requesting members take responsibility to coordinate the response of a specific sector:

- Christian Aid: Shelter and NFI
- ICCO: Food security and Livelihood
- CCDB: WASH
- DCA: Protection and psychosocial support
- DCA: DRR and site improvement

Ad hoc coordination meetings are held for each sector and act as an opportunity for knowledge sharing and coordination at a field level.

An ACT Coordinator has been recruited recently to take on the responsibility of improving this already successful approach.

3.6. Implementing Partners

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All requesting members will work with local implementing partners. They already have experience working with their counterparts and built fruitful relationships which will contribute to rapid and high quality implementation of the project.

CCDB has been working with CA and ICCO as the implementing partner for food security and WASH interventions, both in the Cox's Bazar response since the influx, and across Bangladesh as a whole for more than a decade.

DSK officially and formally began working in 1989. Today, the organization has a broad range of activities and programmes including primary health care, water and sanitation, microcredit, informal primary education, relief and rehabilitation, climate change adaptation, food security and skill development training.

GUK, a community led development organization has been working for the poor and extreme poor for over 30 years around empowerment of women, ensuring employment and livelihood of poor and extreme poor, disaster management, health and sanitation, access to local resources, primary education and social justice.

DCA partner COAST has been responding on Rohingya crisis from the beginning. COAST is implementing DCA supported project, providing supports- emergency food, WASH, non-food items (NFI) and Psychosocial Support Service (PSS) assistance to the Rohingya People in Cox's Bazar.

Diakonia's partner UTSA is the pioneer organization on psychosocial care support in Bangladesh and has been working on it issues since 1997. It has long experience in addressing humanitarian crisis i.e SIDR, AILA, Rana plaza, Rangamati landslide etc. UTSA has been working as a local partner of Diakonia Bangladesh since 2011.

3.7. Project Advocacy

Humanitarian advocacy will be an integral part of the proposed project via multiple fronts: The original mentioned ISCG as well within this portion which has not been included herein as a separate head though Local level advocacy mentions the same.

1. National level advocacy - through the INGO Forum, INGO Emergency Sub-Committee and UN Clusters the requesting agencies will raise advocacy issues and share lessons learned to feed into the wider humanitarian response plan. The ACT Bangladesh Forum will hold duty-bearers accountable to ensure needs of the Rohingya people and vulnerable host communities are being addressed
2. Global advocacy - through ACT Alliance, requesting member organisations' global advocacy platforms and communication channels.
3. Local level advocacy - CA as part of the ISCG advocacy sub-working group will participate in and share advocacy updates with ACT agencies.

See also section 5.4 on communication and visibility

Simplified Work Plan

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		Work plan																											
Project Activities		2017			2018												2019												
		Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Food security																													
AI1.1	Number of people enabled to meet their basic food needs																												
AI1.2	Number of people provided with resources that enable them to protect and start rebuilding livelihood assets																												
Shelter & NFI																													
BI1.1	Number of people having access to basic, safe and dignified shelters solutions																												
BI1.2	Number of people provided with non food items																												
WASH																													
CI1.1	Number of people having regular access to soap to meet hygienic needs																												
CI1.2	Number of people having access to dignified, safe, clean and functional excreta disposal facilities																												
CI1.3	Number of people having access to sufficient and safe water for domestic use																												
Protection																													
DI1.1	Number of persons reached by the implementation of specific GBV prevention measures																												
DI1.2	Number of persons who receive an appropriate response																												
DRR																													
EI1.1	Number of people participating in interventions that enhance their capacity to face shocks and stresses																												

4. PROJECT MONITORING

4.1. Project Monitoring

The project will be monitored by the Bangladesh ACT forum, The ACT Alliance Coordinator based in Cox's Bazar, and the Project Management Coordination group. Each agency will offer support from their respective agencies.

Requesting members and local implementing partners will monitor field activities in situations of remote management by using mobile tools. The regular sharing of performance data with partners will foster learning and provide opportunities for adaptive management. ACT PME guidelines, principles and standard will be followed, along with respective organization's policy for project monitoring and evaluation. Capacity building of project staff on M&E is integrated in the project. Adherence to Core Humanitarian Standards will be monitored throughout the response. Robust feedback and complaints mechanisms will be put in place. Post distribution monitoring will be conducted quarterly, and findings will be integrated into subsequent activities.

ACT Alliance Coordination groups will be set up for each sector that we are working with. These groups will monitor the work of ACT members by sector to ensure that they are adhering to ISCG sector standards. Implementing partners will be present in these meetings. Performance of project progress will be tracked through monthly situation reports and 4W reports (12th day of each month).

4.2. Safety and Security plans

The 5 identified safety and security threats are:

1. Natural disasters (e.g. cyclones, heavy rainfall and landslides) - The CXB District is highly vulnerable to shocks, in an extremely fragile environment which has annual cyclone and monsoon seasons. Cox's Bazar and Chittagong have been hit by more than three significant cyclones in the last two years. With weak shelters and little infrastructure in place, the displacement settlements are particularly vulnerable to impact. The requesting members will

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take precautionary measures to not plan for project activities during heavy rainfall based on weather forecasts to protect beneficiaries, staff and logistics from undue harm.

2. Political, government cooperation and religious issues - Political instability in Cox's Bazar is common and there is a sense of powerful players controlling the ecosystem. High levels of criminality in the district are closely linked to the settlement economies. Drug trafficking, mainly of methamphetamine or 'yaba', from Myanmar through Cox's Bazar and on into the region's markets has been a long-term issue which has increased significantly in recent years. There have also been cases of threats to faith-based organizations. These fears may lead to government withdrawing permission of INGOs to operate in such an environment. However, it has been proven that simple measures such as low visibility when tensions are high and avoiding routes identified as risky can mitigate such threats with relative ease.
3. Disease outbreak; health and hygiene issues - Lack of sufficient basic services, including electricity, safe drinking water and basic sanitation services, have increased the risk of disease outbreaks such as diarrheal diseases, typhoid, hepatitis, as well as other vaccine-preventable diseases. There have also been a number of identified cases of HIV in the camps. This puts the lives of our target beneficiaries as well as our staff on the ground. To mitigate this risk, the requesting members will make sure proper medical care is available, staffs are well oriented to avoidable health hazards and a robust reporting mechanism for swift action.
4. Rise of terrorism, unrest and riot- Government fears that Rohingya violence may help recruit extremists and the crisis could give birth to terrorism in the region. In these circumstances local intel on rising tension within the refugee communities and having regular contact with the military and armed forces will help navigate the project activities to avoid such threats.
5. Relationship with local community- As the situation in the forthcoming few months will likely remain fluid and fragile, local partners with extensive knowledge of the area and people will play a crucial role to maintain good relationship with both refugees and host community.

4.3. Knowledge Management

Lessons learned and good practices will be captured throughout the response and shared amongst the requesting members at the monthly coordination meetings, the ad hoc meetings and in writing..

All requesting ACT members will ensure community participation throughout all phases of the project. They will ensure that robust complaint mechanisms are put in place, to assure feedback from the affected population for the entire project cycle. Including through using mobile tools, such as AKVO flow, Kobo, and MAGPIE. AKVO for example allows for real-time monitoring. It is a mobile tool to gather digital data from the field based on GPS. One of its features includes tracking of implementation successes and milestones. This contributes to downwards accountability as it allows instant interaction with beneficiaries by tracking testimonies on implementation. This also provides opportunities to adjust the intervention based on the testimonies. AKVO furthermore provides opportunities for real-time knowledge sharing, as the information is available to all requesting members. Moreover, since the data is open-source (freely accessible) and presented in accessible and appealing formats, AKVO induces accountability towards donors and the public. Thus, AKVO contributes to a more effective response; increased collaboration between implementers; greater transparency towards other organization, beneficiaries, donors and the

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public; and visibility for the organisations' work.

Post distribution monitoring and partner feedback and observation provide other sources of information. All of the above will be documented throughout implementation of the project and collated and shared to bring together key lessons learned, recommendations and good practice.

5. PROJECT ACCOUNTABILITY

5.1. *Mainstreaming Cross-Cutting Issues*

In line with the protection guidelines, the requesting members have identified the following cross-cutting issues to be mainstreamed in the ACT Alliance response (see also 5.1.1, 5.1.2 and 5.1.3):

- Age, Gender and Diversity
- Child Protection
- Gender-Based Violence
- Mental Health and Psychosocial Support
- Disability
- HIV/AIDS
- Environment

Protection is one of the 5 key sectors in this response, but is also mainstreamed throughout the response. For example, food assistance and livelihood support contributes to the prevention of negative coping strategies, such as prostitution, child marriage, taking loans or selling assets and resources. Furthermore, requesting members have a commitment to prevent sexual exploitation and abuse (PSEA), fraud and corruption and abuse of power[i]. All staff, partners and contractors, are personally and collectively responsible for upholding and promoting the highest ethical and professional standards in their work and all staff have completed mandatory PSEA and corruption trainings (e-learning). Moreover, as a CHS certified organisation, requesting members are responsible to promote greater accountability in humanitarian programmes. The members seek to protect staff and every woman, girl, boy and man engaged in the programmes from abuse by individuals or groups from all engaged stakeholders.

The Core Humanitarian Standards (CHS), the SPHERE humanitarian charter and minimum standards and the Inter-agency Standing Committee (IASC) guidelines for integrating Gender-Based Violence (IASC GBV) are at the core of the proposed response. The members aim to mainstream conflict sensitivity into all programmes, which are built upon the careful analysis of conflict dynamics. The requesting members are advocates for better services for GBV and overall protection in Cox's Bazar. This has been done through local coordination mechanisms, PSEA task force membership, service auditing and supporting strategy processing to set the humanitarian agenda.

All staff/volunteers will operate from a 'Do No Harm' principle and will receive technical training for all new staff joining the organization, refresher trainings for staff already engaged in field activities as well as constant on the job training, mentoring and coaching. Staff working in protection sector will operate from a survivor centred approach, ensuring a focus on survivor choice, confidentiality, dignity and respect. Staff will understand their role in providing information and will ensure that

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survivor safety is the highest priority of the programme, both in activities and in reporting. These staff will uphold the guiding principle of survivor safety even when this directly contradicts JRP or Protection Indicators in various reporting formats. All protection project staff will follow GBV Information Management System (GBVIMS) guidelines for data sharing, including guidance on not sharing individual incident numbers.

Members of the Rohingya ethnic group who fled from Myanmar to Bangladesh are refugees and should be recognized as such and entitled refugee rights and human rights. Assistance of the Rohingya refugees and the host community will be guided by the principles of humanity impartiality and non-discrimination in line with the Core Humanitarian Standard.

Our community-based approach will consult with community leaders and protection and site management partners for mainstreaming protection and inclusion throughout the activities. Based on partners' protection assessments, our interventions will:

- Prioritise the safety and dignity and avoidance of harm by ensuring additional support for women, pregnant and lactating mothers, children, elderly, and people with disabilities (PwD).
- Ensure that effective complaints and feedback mechanism are in place during project activities.
- Ensure community participation and empowerment through consultation with communities.

5.1.1. Gender Marker / GBV

To promote greater gender equity throughout the intervention, requesting members and implementing partners will:

(i) Tailor their sector specific interventions in response to the needs, capacities and priorities of women, girls, men and boys as identified through assessment, analysis and planning efforts; and (ii) Include targeted actions to address specific gaps or discriminatory practices.

Food security and livelihoods: A humanitarian crisis, such as the Rohingya emergency, has different impacts on the food security and diversity available to women, girls, men and boys. Gender and age determine nutritional needs and ACT Alliance will mainstream this understanding of differing needs into the food options that we are providing.

Shelter and Non-Food Items: The forced displacement of Rohingya refugees from Myanmar to Bangladesh has impacted on their (women's, girls', boys' and men's) access to shelter and basic materials for living with dignity. Pregnant women, the elderly, the disabled and other people with specific needs may not be able to build their own shelters and may require support. The specific needs of child-headed households and single young and elderly women and men should be met without creating further stress, danger and exposing people to undignified solutions. Often protection risks arise because of the failure to understand the different needs of individuals.

WASH: The current Rohingya refugee crisis has impacted access to clean water and adequate hygiene and sanitation facilities by women, girls, men and boys in different ways. Gender and age largely determine what real access refugees can have to water and sanitation services and who

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decides on their use. It can also determine how limited or inappropriate WASH services and facilities can affect different groups within the refugee population. It is important to understand these differences and deliver humanitarian response services and aid that assist all segments of the affected population, while placing no one at risk.

Protection and psychosocial support: Gender-based violence (GBV) is among the greatest protection challenges individuals, families and communities face during humanitarian emergencies (IASC, 2015). GBV prevention and response is a key cross-cutting priority in humanitarian action, which requires a coordinated effort to ensure that all sectors address this issue in the planning and implementation of their response efforts. For example, girls and women often face greater violence in overcrowded or poorly designed shelters and can risk sexual abuse and exploitation when negotiating shelter or essential items. Unregulated and unprotected distribution sites risk excluding older men and women, unaccompanied boys and girls because of harassment and violence. Men have social gatherings and networks through the mosques and most organisations working with gender and GBV have an element of outreach with men and boys although this is mainly related to awareness raising.

DRR: Women and girls are at high risk of moving at night due to the lack of light in camps. Some of the risks can be addressed by simple site improvements to enable safer movement in the camps for women and girls and should be integrated strongly with GBV and protection risk assessments to enable safe access to services.

5.1.2. Participation

The proposed project has been developed based on field experience of responding to the Rohingya crisis, and a compilation of needs assessments and situation reports.

The requesting members and implementing partners have already established strong relationships with the Rohingya refugees and host communities. Building on this trust, input by the beneficiaries is integrated in the intervention through various activities to inform programme design and continuous accountability and feedback. Hereby, ensuring community participation.

Participation of local community in intervention design

5.1.3. Social inclusion / Target groups

ACT Alliance intervention will target both vulnerable members of the Rohingya community and of the community hosting them.

ACAP, which stands for Accessibility, Communication, Attitude and Participation, is as an innovative and revolutionary framework was to achieve “inclusion for all” within development activities, including DRR and emergency relief and response. Requesting members will use the ACAP Inclusion framework to ensure inclusion of marginalized groups and people with disability across all stages of the project. For example, the proposed project can promote inclusive shelter model, which will be designed and checked against the ACAP subscribed “Accessibility” test to ensure that the shelter model adapts the recommended guidelines for accessible design per the local context. By incorporating the “special requirements or adaptations” necessary for people with disability, into the basic shelter model, the project will ensure that all shelters constructed under the project will

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be accessible by default. The proposed interventions will target the most vulnerable groups which we have identified as female-headed households, households with elderly people, households with PWD, households with pregnant and lactating women, child-headed households, and households particularly at risk of impacts of extreme weather.

5.2. Conflict sensitivity / do no harm

As the ongoing Rohingya refugee crisis response is being coordinated by multiple actors such as UN bodies, ISCG, NGO Affairs Bureau, local District Commissioner's office, police and military as well as local government representatives, there is always a risk of internal conflict.

To minimize this risk, the project implementation team will consult with the stakeholders early during planning phase and respect their opinions and suggestions. Moreover, regarding maintaining quality of work, the implementing partners will set the minimum standard for each items/activity and display this at the community level, so that people can judge either the work meets the minimum standard or not.

The project team will never give any prior commitment to the community people regarding what they cannot do prior to execution. In addition, the requesting ACT members and implementing partners will strictly adhere to the ACT Code of Conduct (CoC), individual organisation's CoC and there will be an obligation on all partners, volunteers and staff working with the members to report incidents where they see others breaking the code of conduct.

This is a non-negotiable collective responsibility. Whistleblowing policy and referral mechanism are to be clearly explained to all partners, volunteers and staff.

5.3. Complaints mechanism + feedback

All implementing partners aim to fulfill all nine commitments of the Core Humanitarian Standard on Quality and Accountability (CHS) throughout its response. As far as complaints handling (Commitment 5) is concerned, managing complaints in a timely and fair manner only by trained expert(s) is key to agencies' responses to complaints. The project beneficiaries and key stakeholders will be informed about the complaints mechanisms. Furthermore, the complaint-handling processes will be designed in close consultation with the beneficiaries/key stakeholders and placed in communities accordingly. The contact details of the complaints officers will be shared with the beneficiaries for urgent and/or special incidents.

This intervention will be implemented with consideration of the key findings from CA's recent accountability assessment. Key findings included:

- Current Accountability Systems are Largely Ineffective: there is an overreliance on complaint boxes and phone lines that are the least preferred and least trusted mechanisms, and are generally unused.
- Lack of Awareness: only 16% of women and 25% of men are aware of any feedback and complaints mechanism. Thus, accountability is about more than rolling out systems, it also requires significant orientation for frontline humanitarian workers/volunteers and Rohingya communities.

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- Major Gender Differences: women and men have very different attitudes towards accountability. For example, women indicated substantially higher demand to provide feedback and different preferences for accountability mechanisms than men. Women's already distinct vulnerabilities in the camps are compounded by ineffective accountability mechanisms.
- Many Accountability Barriers: low levels of Rohingya literacy, language differences and cultural norms that restrict many women from public space are some of the main challenges for ensuring effective accountability mechanisms.
- Verbal and Face-to-Face Preferences: both women and men indicated preferences for verbal and face-to-face mechanisms, such as meeting with individuals and using voice recorders.
- Confidentiality Preferred: over 95% of women and 80% of men reported confidentiality as important for accountability mechanisms. This poses unique challenges considering the concurrent preference for verbal and face-to-face accountability mechanisms.
- Low Rights Understanding: only 27% of women and 17% of men report that they understand their rights related to humanitarian assistance. Across many other specific rights' areas, women and men reported varying, but generally low understanding of their rights.
- Varied Core Humanitarian Standard (CHS) Results: generally people felt assistance was appropriate (although women less so than men), but people largely felt it was not timely and they lacked influence in decision making: 39% of women and 54% of men felt they had no influence at all in decision making.

Prevention from sexual exploitation and abuse (PSEA)- All partners, staff and volunteers to be briefed on PSEA, to be clear on their responsibility to report incidents they witness, to be clear on the mechanism through which to do this (outlined under area 3), and to encourage community members to speak out and report cases in their communities (through referral mechanism or through C&F mechanism)

5.4. Communication and visibility

All requesting members and implementing organisations will work under a common ACT Alliance communications and visibility guidelines.

They will respect international communication guidelines, in line with the Code of Conduct and specifically pay attention to respecting the dignity of the refugees. ACT Forum will implement communication activities related to the project, starting from collecting/collating beneficiary testimonials, success stories and photographs from all requesting members to producing a short video on the project. For communicating with donors and partners, the project partners will provide the following information, on behalf of all requesting members:

- Submit 10 case studies along with photos per year.
- Leverage communications tools of partner organizations to publish stories of beneficiaries and progress of project in print, digital and social media.
- Use AKVO RSR, KOBO, MAGPIE to capture human-interest stories, showing progress of our work and its impact on the beneficiaries.
- Organize joint learning visits between local partners to understand best practices and lessons learned.

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Social media:

Social media will be used for advocacy and visibility by the ACT members, promoting the humanitarian response by the members with the support of the ACT Alliance. Dissemination of accessible and understandable information through channels like Facebook, Twitter, LinkedIn and the websites of the requesting members and the ACT alliance, will contribute to the engagement of a wider audience to bring about support for the humanitarian response and promote the work of the agencies.

6. PROJECT FINANCE

6.1. Consolidated Budget

	Appeal Budget BDT	Appeal Budget USD
DIRECT COSTS		
PROGRAM STAFF		
Appeal Lead		
Total international program staff	15,857,797	193,465
Total national program staff	45,737,404	557,996
TOTAL PROGRAM STAFF	61,595,201	751,461
PROGRAM ACTIVITIES		
Shelter and settlement / Non-food items	58,784,000	717,165
Food security	19,283,500	235,259
Water, sanitation & hygiene (WASH)	101,097,374	1,233,388
Health / Nutrition	1,108,000	13,518
Protection / Psychosocial support	47,481,390	579,273
Early recovery & livelihood restoration	9,170,000	111,874
Emergency Preparedness / Resilience	30,315,000	369,843
TOTAL PROGRAM ACTIVITIES	267,239,264	3,260,319
TOTAL PROGRAM IMPLEMENTATION	17,388,386	212,138
PROGRAM LOGISTICS		
Transport (of relief materials)	14,845,000	181,109
Warehousing	140,000	1,708
Handling	14,878,454	181,517
TOTAL PROGRAM LOGISTICS	29,863,454	364,334
PROGRAM ASSETS & EQUIPMENT		
TOTAL PROGRAM ASSETS & EQUIPMENT	8,985,644	109,625
OTHER PROGRAM COSTS		
TOTAL SECURITY	1,560,000	19,032
FORUM COORDINATION		
TOTAL FORUM COORDINATION	2,780,000	33,916

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STRENGTHENING CAPACITIES

TOTAL STRENGTHENING CAPACITIES

TOTAL DIRECT COST

1,300,000 15,860

390,711,949 4,766,686

INDIRECT COSTS: PERSONNEL, ADMINISTRATION & SUPPORT

Staff salaries CA

Senior Emergency Response Manager - 25% 1,800,000 21,960

Salaries e. g % for Monitoring
Manager(25%)Logistics Specialist - 50% 688,686 8,402

Humanitarian Programme Manager - 20% 900,000 10,980

Regional Emergency Manager - 10% 540,000 6,588

HR & Admin Manager - 20% 563,382 6,873

Office Operations

Office rent 900,000 10,980

Office Utilities 180,000 2,196

Office stationery 180,000 2,196

Communications 0 0

Telephone and fax 180,000 2,196

Other

Insurance 180,000 2,196

Indirect HQ Overhead (7%) 6,271,346 76,510

Indirect cost for ACT Forum

Indirect HQ Overhead (7%) 459,189 5,602

Staff salaries GUK

Staff salaries

Salaries (30 % for Programme Director) 158,852 1,938

Salaries (10 % for Finance Director) 32,960 402

Salaries (70% for Admin & Finance Officer) 126,000 1,537

Office Operations

Office rent (2 Upazila offices) 272,000 3,318

Office Utilities 24,000 293

Office stationery 60,000 732

Communications

Telephone and fax 80,000 976

Other

Staff salaries DSK

Executive Director (Shared-5%) 40,000 488

Joint Director (WASH) (Shared-35%) 210,000 2,562

Joint Director Finance (shared-15%) 90,000 1,098

Admin support cost (10% shared) 48,000 586

Office Assistane for project 60,000 732

Office Operations

Office rent 220,000 2,684

Office Utilities 20,000 244

Office stationery and Maintenance cost 130,000 1,586

Communications

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Telephone and fax	23,000	281
Communication for project staff	53,800	656
Other		
Staff salaries CCDB		
Salaries e. g % for Team Leader (25%)	160,000	1,952
Salaries e. g % for Monitoring Manager(25%)	120,000	1,464
Office Operations		
Office rent	160,000	1,952
Office stationery	30,059	367
Communications		
Telephone and fax	16,000	195
Staff salaries DCA		
Office Support Manager (20%)	2,223,360	27,125
Country Manager, Dhaka	145,555	1,776
Head of Finance, Regional support	161,855	1,975
Funding and Compliance Officer	21,195	259
Finance Officer (20%)	567,000	6,917
Office Assistant (20%)	273,000	3,331
HR Officer (20%)	567,000	6,917
M&E Officer (20%)	567,000	6,917
Liaison Officer Dhaka (20%)	567,000	6,917
Finance Focal (COAST)	120,000	1,464
M&E Officer (COAST)	210,000	2,562
Finance & Admin Officer (COAST)	180,000	2,196
Support staff (COAST)	72,000	878
Office Operations		
Office rent	210,000	2,562
Office Consumables, refreshment & Supplies, stationary, Utility, photo copy etc	150,000	1,830
Office Maintenance	30,000	366
Field Movement & Conveyance for field Staff	60,000	732
Field Movement & Conveyance for central staff	120,000	1,464
Financial cost; Bank charge	35,400	432
Audit Fee	40,000	488
DCA Cost Allocation	1,800,000	21,960
Communications		
Telephone and fax	39,600	483
Staff salaries DAIKONIA		
Chief functionaries (Partner)	600,000	7,320
Country Manager (Partial)	720,000	8,784
Diakonia:		
Monitoring and quality assurance cost (Regional Office- 3%)	2,300,000	28,060
Administrative Cost (Head Office- 5%)	3,900,000	47,580
Office Operations		
Office rent	960,000	11,712

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Office Utilities	240,000	2,928
Office stationery	240,000	2,928
<u>Communications</u>		
Telephone and fax	240,000	2,928
<u>Other</u>		
Insurance	120,000	1,464
Staff salaries ICCO		
Salaries for Programme Director- ICCO+partner	960,000	11,712
Salaries for Finance DirectorICCO+partner	864,000	10,541
Reg comms Manager	400,000	4,880
Reg comms Manager	400,000	4,880
Monitoring Officer--ICCO+partner	576,000	7,027
Country Manager	1,326,000	16,177
Salaries for accountant and other admin or secretarial staff --ICCO+partner	5,760,000	70,272
Office Operations		
Office rent	1,248,000	15,226
Office Utilities	240,000	2,928
Office stationery & coordination meeting	360,000	4,392
<u>Communications</u>		
Telephone and fax	107,280	1,309
Staff salaries CCDB		
Executive Director(20%)	1,020,000	12,444
Associate Director(20%)	850,000	10,370
Program Head(20%)	765,000	9,333
Finance Head(20%)	765,000	9,333
PME Head(20%)	765,000	9,333
HR Head(20%)	765,000	9,333
PME Coordinator(20%)	510,000	6,222
Other staffs (Admin, IT, Account, secretary)	5,100,000	62,220
Office Operations		
Office rent	1,700,000	20,740
Office Utilities	510,000	6,222
Office stationery	340,000	4,148
Communications		
Telephone and fax	850,000	10,370
TOTAL INDIRECT COST: PERSONNEL, ADMIN. & SUPPORT	58,638,518	715,390
	13%	13%
TOTAL EXPENDITURE exclusive International Coordination Fee	449,350,467	5,482,076
INTERNATIONAL COORDINATION FEE (ICF) - 3%	13,480,514	164,462
TOTAL EXPENDITURE inclusive International Coordination Fee	462,830,981	5,646,538
BALANCE REQUESTED (minus available income)	462,830,981	5,646,538

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Annex 3 – Logical Framework

Logical Framework			
IMPACT To improve living conditions of the Rohingya refugees, and affected host communities <i>Overall long-term objective at program level. This goal is the same for all members in the Appeal.</i>			
OUTCOME(S) A: Affected communities are food secure and have increased opportunities for self sufficiency B: Refugees, people in need and vulnerable host households live in resilient shelter structures and have access to appropriate NFIs C. Affected communities have access to WASH facilities and receive hygiene education. Increased protection and psychosocial support available to vulnerable and traumatised communities D. Increased protection and psychosocial support available to vulnerable nd traumatised communities E. Site structures are improved and Rohingya refugees are better prepared to deal with natural disasters	Objectively verifiable indicators AI1.1.Number of people enabled to meet their basic food needs AI1.2 Number of people provided with resources that enable them to protect and start rebuilding livelihood assets BI1.1.Number of people having access to basic, safe and dignified shelters solutions BI1.2 Number of people provided with non food items CI1.1. Number of people having regular access to soap to meet hygienic needs CI1.2 Number of people having access to dignified, safe, clean and functional excreta disposal facilities CI1.3 Number of people having access to sufficient and safe water for domestic use DI1.1. Number of persons reached by the implementation of specific GBV prevention measures DI1.2. Number of persons who receive an appropriate response	Source of verification <ul style="list-style-type: none"> • Baseline study report • Endline survey report • Beneficiary lists, • Situation Reports, • stakeholder meetings, • Interim and final narrative financial reports, • M&E reports, • Media coverage and • Publications 	Assumptions <ul style="list-style-type: none"> - Government of Bangladesh remains receptive and positive towards the support to Rohingya population by the Non-state actors. - The affected population are open and willing to accept support provided by the project. - Price of food, shelter materials, NFI, tubewell, latrine and medical supplies remain stable. Risks <ul style="list-style-type: none"> - Natural calamities during the project period such as heavy rainfall, cyclone, or landslide - Repatriate of the Rohingya to their country

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Logical Framework			
IMPACT			
To improve living conditions of the Rohingya refugees, and affected host communities <i>Overall long-term objective at program level. This goal is the same for all members in the Appeal.</i>			
	EI1.1 Number of people participating in interventions that enhance their capacity to face shocks and stresses		
OUTPUT(S) A1.1. Affected communities given access to food, capacity is built through livelihood opportunities. B1.1. Resilient shelters, shelter maintenance support and NFIs are provided for refugees and vulnerable host households	Objectively verifiable indicators AI1.1.1 # individuals employed through cash for work activities (frequency/ amount/duration) AI1.1.2. # individuals assisted through livelihood restoration activities (frequency/ amount/ duration) AI1.1.3. # individuals receiving food / food parcels / food supplements (frequency/duration). AI1.1.4 2000 HHs produced vegetables and quick growing fruits. BI1.1.1. Number of households provided with NFI kits (detail contents in activity section). BI1.1.2 # of shelter constructed/strengthened.	Source of verification Six monthly monitoring report, Progress report, payment report, photograph, training register, individual list, project completion report <i>Means of verification, Means of assessment, Sources of information</i> Work order, Post distribution monitoring report, progress report	

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Logical Framework			
IMPACT To improve living conditions of the Rohingya refugees, and affected host communities <i>Overall long-term objective at program level. This goal is the same for all members in the Appeal.</i>			
C1.1 Rohingya Communities have access to WASH facilities and receive hygiene education. facilities.	CI1.1.1. # of HH with access to a functioning toilet CI1.1.2 # of HH provided with hygiene kits CI1.1.3 # No. of individuals receiving direct hygiene promotion (excluding mass media campaigns) CI1.1.4 # of HH with access to a source of safe drinking-water [by source or provision type] CI1.1.5 # of water points developed/constructed	SitRep, Six month Narrative report, Monitoring report	
DI1.1. Rohingya communities have access to protection services and psychosocial support	DI1.1.1. # of women/girls receiving dignity kits DI1.1.2 # of functional safe spaces established for [women & girls/children/ families/ other] DI1.1.3 # of individuals benefiting from improved protection-related services DI1.1.4 # of protection initiatives increasing safety for women and girls, men and boys	Session sheets, progress report, project completion report, WASH Sector 4W, Distribution report	

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Logical Framework			
IMPACT To improve living conditions of the Rohingya refugees, and affected host communities <i>Overall long-term objective at program level. This goal is the same for all members in the Appeal.</i>			
E1.1 Rohingya refugees are better prepared to deal with natural hazards pre-, during and post-disaster.	EI1.1.1. # of local site improvement works and small-scale mitigation measures installed EI1.1.2 # of block level DMCs and camp level DMCs with updated contingency plans EI1.1.3 # of established early warning system in camps in coordination with Bangladesh Army and existing system (for HC) EI1.1.4 # of risk awareness sessions	Progress report, session reports, FGDs, contingency plan & report	
Activities A1.1 Cash for work/training for 1000 Rohingya from targeted vulnerable groups. A1.2 Provide asset packages, training and market linkage for 1,000 host community members from targeted vulnerable groups. A1.3 Nutrition supplements for pregnant women and lactating mothers in the host community A1.4 Iron folic acid tablets for adolescent girls in the host community A1.5 Supplementary food for children under 2 years old in the host community. A1.6 MIYCF training sessions in the host community. A1.7 Skills training (Small Handicrafts, Stitching/sewing, kitchen Gardening, Livestock Rearing etc.), skill matching support and cash for work A1.8 Identification of cash for work beneficiaries A1.9 Identification of cash for work activities with refugees and host community (linked to DRR and livelihoods). B1.1 NFI Distribution (Tooth Brush -small size, Toothpaste- family size, Shampoo, Latrine brush, harpic, soap-mini-pack, Hair oil, bleaching powder, hand gloves, broom, nose mask, Packaging Bag) 10000 HH.			Pre-conditions -Government approval for programme implementation. -Political, social, economic and environmental stability -Commitment of local implementing partners

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Logical Framework	
IMPACT To improve living conditions of the Rohingya refugees, and affected host communities <i>Overall long-term objective at program level. This goal is the same for all members in the Appeal.</i>	
B1.2 Provide NFIs including warm cloths for women, men and children, household items and untencils B1.3 Distribution of Rice husk, umbrella and solar panel. C1.1 Installation of sector standard latrines C1.2 Distribution of WASH kits C1.3 Installation of solar lights for protection and promote use of WASH facilities at night. C1.4 Construction of bathing points to promote use of wash facilities. C1.5 Hygiene promotion alongside installation of latrines C1.6 Procurement of items (water mugs, water pitcher, bucket, tooth brush, washing soap, bathing soap, sanitary pads, ORS) (kits also include items reported under NFIs as they are not related to WASH) Beneficiary targeting, Distribution AND Post-distribution monitoring C1.7 4 deep tube wells and networking systems C1.8 Repair of 100 shallow tube wells C1.9 provision of 400,000 water purification tablets C1.10 desludging and decommissioning of 300 latrines C1.11 Construction of 200 Garbage bin C1.12 Distribution of IEC material C1.13 Construction of 125 bathing place D1.1 Dignity kits will provide D1.2 Establishment of women and child friendly spaces D1.3 Establishment of 12 new and maintenance of 6 existing community kitchens D1.4 Construction or renovation of 50 gender segregated bathing spaces D1.5 Establishment of Information and communication centres D1.6 Elementary learning in Safe Spaces including lessons in elementary level of alfabeth and math + in Myanmar and English. Sports and arts D1.7 Group formation (male and female) and awareness raising about family planning and SRHR D1.8 one to one sessions on mental health and psychosocial support (MHPSS) D1.9 Psychosocial care group sessions D1.10 Distribution of education material to the schools of host community D1.11 Group sessions with Mahjis and female volunteers to increase cooperation	

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Logical Framework	
IMPACT To improve living conditions of the Rohingya refugees, and affected host communities <i>Overall long-term objective at program level. This goal is the same for all members in the Appeal.</i>	
E1.1 Footsteps, culverts, water canals, bamboo foot bridges and rehabilitated wastewater and sewage systems (link to Cash for Work inserted in livelihoods) E1.2 Re-establishment of non-functional disaster management committees, sessions on contingency planning and risk assessment E1.3 Distribution of hand sirenes (1 per 3 blocks), identification of safe locations with Army E1.4 Community level awareness on fire and individual level how to manage it E1.5 Safe location identification E1.6 Hazard identification, e.g. fire risks, flooding, landslides and cyclones E1.7 HH level contingency planning	

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Annex 7 – Summary Table

Summary	Christian Aid	ICCO Cooperation	DanChurchAid
Implementation period	From 15 October 2017 to 15 October 2019 Total duration: 24 (months)	From 15 October 2017 to 15 October 2019 Total duration: 24 (months)	From 15 October 2017 to 15 October 2017 Total duration: 24 (months)
Geographical area	New Settlement Camps, Cox's Bazar District, Bangladesh	New Settlement Camps, Cox's Bazar District, Bangladesh	New Settlement Camps, Cox's Bazar District, Bangladesh
Sectors of response	<input checked="" type="checkbox"/> Shelter / NFIs <input checked="" type="checkbox"/> Food Security <input checked="" type="checkbox"/> WASH <input checked="" type="checkbox"/> Health / Nutrition <input checked="" type="checkbox"/> Protection / Psychosocial <input type="checkbox"/> Early recovery / livelihoods <input type="checkbox"/> Education <input type="checkbox"/> Unconditional cash	<input checked="" type="checkbox"/> Shelter / NFIs <input checked="" type="checkbox"/> Food Security <input checked="" type="checkbox"/> WASH <input checked="" type="checkbox"/> Health / Nutrition <input checked="" type="checkbox"/> Protection / Psychosocial <input type="checkbox"/> Early recovery / livelihoods <input type="checkbox"/> Education <input type="checkbox"/> Unconditional cash	<input checked="" type="checkbox"/> Shelter / NFIs <input checked="" type="checkbox"/> Food Security <input checked="" type="checkbox"/> WASH <input checked="" type="checkbox"/> Health / Nutrition <input checked="" type="checkbox"/> Protection / Psychosocial <input type="checkbox"/> Early recovery / livelihoods <input type="checkbox"/> Education <input type="checkbox"/> Unconditional cash
Targeted beneficiaries (per sector)	Shelter/NFIs: 1,700 HHs Food Security: 1,700 HHs WASH: WASH Kits-20,400 HHs/ Tube-well- 500 HHs/ Latrines- 1,000 HHs Health/Nutrition: 36,000 people Protection/Psychosocial:2,700 people	Shelter/NFIs: 1,700 HHs Food Security: 1,700 HHs WASH: WASH Kits-20,400 HHs/ Tube-well- 500 HHs/ Latrines- 1,000 HHs Health/Nutrition: 36,000 people Protection/Psychosocial:2,700 people	Shelter/NFIs: 1,700 HHs Food Security: 1,700 HHs WASH: WASH Kits-20,400 HHs/ Tube-well- 500 HHs/ Latrines- 1,000 HHs Health/Nutrition: 36,000 people Protection/Psychosocial:1,800 people
Requested budget (USD)	US\$ 1,204,601.87	US\$ 1,026,075 1	US\$ 981,852

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Summary	Diakonia	CCDB	ACT Bangladesh Forum
Implementation period	From 15 October 2017 to 15 October 2019 Total duration: 24 (months)	From June,2018 to October,2019 Total duration: 17 months	From 15 October 2017 to 15 October 2019 Total duration: 24 (months)
Geographical area	New Settlement Camps, Cox's Bazar District, Bangladesh	New Settlement Camps, Cox's Bazar District, Bangladesh	New Settlement Camps, Cox's Bazar District, Bangladesh
Sectors of response	<input checked="" type="checkbox"/> Shelter / NFIs <input type="checkbox"/> Food Security and livelihoods <input checked="" type="checkbox"/> WASH <input checked="" type="checkbox"/> Protection / Psychosocial <input type="checkbox"/> DRR <input type="checkbox"/> Education <input type="checkbox"/> Unconditional cash	<input checked="" type="checkbox"/> Shelter / NFIs <input checked="" type="checkbox"/> Food Security and livelihoods <input checked="" type="checkbox"/> WASH <input type="checkbox"/> Protection / Psychosocial <input type="checkbox"/> DRR	
Targeted beneficiaries (per sector)	Shelter/NFIs: Shelter- HHs/ NFIs- 11,100 people WASH: WASH Kit- 14,200 people Protection/ Psychosocial- 4500 people	Shelter/NFIS- HHs=5,800 Food Security HHS=2,000 And WASH- HHs=15,000	Coordination among the ACT Forum members in BGD172
Requested budget (USD)	US\$ 1,034,902	US\$ 1,310,759	US\$ 88,201

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Annex 10 – Security Risk Assessment

Principle threats:

Threat 1: Natural disasters such as Cyclone, heavy rainfall and landslide

Threat 2: Political, government cooperation and religious issues

Threat 3: Disease outbreak; health and hygiene issues

Threat 4: Rise of terrorism, unrest and riot

Threat 5: Relationship with local community

<i>Impact</i> <i>Probability</i>	Negligible	Minor	Moderate	Severe	Critical
Very likely	Low	Medium	High	Very high 1	Very high
Likely	Low	Medium 5	High 2	High	Very high
Moderately likely	Very low	Low	Medium 3	High 4	High Click here to enter text.
Unlikely	Very low	Low	Low	Medium	Medium
Very unlikely	Very low	Very low	Very low	Low	Low

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The ACT Alliance Secretariat's continuous improvement in the application of the Core Humanitarian Standard is independently verified by HQAI

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