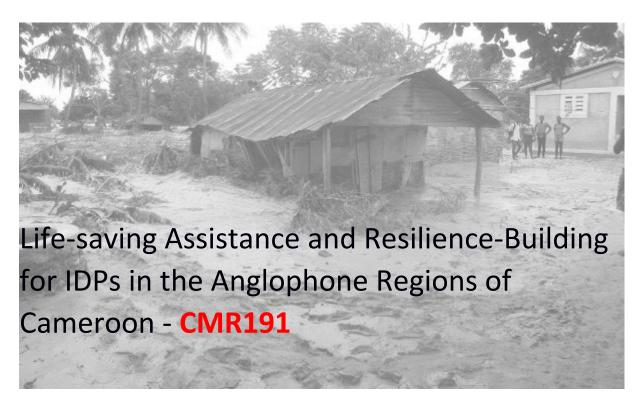
actalliance

APPEAL



Appeal Target: Balance requested: US \$ 2,000,000 US \$ 2,000,000



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| | Pro | ject Summary Sl | neet | | | | | | |
|---------------|--|-----------------------------|-------------|---------------------|----------------------|--|--|--|--|
| Project Title | Lifesaving Assistance a | nd Resilience Bu | ilding f | or IDPs in the Angl | lophone Regions | | | | |
| | of Cameroon | | | | | | | | |
| Project ID | CMR 191 | | | | | | | | |
| Location | Cameroon (Northwest and Southwest regions) | | | | | | | | |
| Project | From 17 November 2019 to 21 November 2021 | | | | | | | | |
| Period | | Total duration: 24 (months) | | | | | | | |
| Modality of | self-implemente | d 🗆 CBOs | | 🗌 Publ | ic sector | | | | |
| project | Iocal partners | Privat | e secto | or 🗌 Othe | er | | | | |
| delivery | | | | | | | | | |
| Forum | ACT Cameroon Forum | not yet formed | | | | | | | |
| Requesting | Mission 21 | | | | | | | | |
| members | | | | | | | | | |
| Local | 1. Partner Churches | • • | | | | | | | |
| partners | 2. Presbyterian Chu | | | | | | | | |
| | Cameroon Baptis Aid International | - | - | sion (Al-ChrisWoV) | 1 | | | | |
| | 5. Youth Outreach F | | | SIGH (AI-CHIISVOV) |) | | | | |
| | 6. Hope for Vulnera | - | - | n) | | | | | |
| | • | • | - | ity and Rehabilita | tion Studies | | | | |
| | (BCCDRS) | | DISUDI | inty and Rendomita | | | | | |
| | 8. Rechafond | | | | | | | | |
| | 9. Helpout | | | | | | | | |
| Thematic | Shelter / NFIs | | X | Protection / Psyc | chosocial | | | | |
| Area(s) | ☑ Food Security | | \boxtimes | Early recovery / I | livelihoods | | | | |
| | ⊠ WASH | | \boxtimes | Education | | | | | |
| | 🛛 Health / Nutrit | ion | | Unconditional ca | ish | | | | |
| | Advocacy | | | | | | | | |
| | ☑ DRR/Climate c | hange | | | | | | | |
| | Resilience | - | | | | | | | |
| Project | Lifesaving assistance p | provided and res | ilience | built for IDPs in t | the Anglophone | | | | |
| Impact | regions of Cameroon | | | | | | | | |
| Project | A. IDPs received lifesay | ving assistance (r | elief) | | | | | | |
| Outcome(s) | B. Basic medical and pa | sychosocial supp | ort pro | vided for IDPs | | | | | |
| | C. Early recovery/liveli | hoods | | | | | | | |
| | D. Affected population | s are prepared fo | or and a | able to adequately | respond to | | | | |
| | potential emergencies | | | | | | | | |
| Target | Sex Fen | nale M | ale | Female | Male | | | | |
| beneficiaries | Age P | ercentage | | Numbers | Total | | | | |
| | 0-25 | 40 | 20 | 28,191 | 14,587 | | | | |
| | 25 - 50 | 21 | 11 | 14,727 | 7,995 | | | | |
| | 50+ | 4 | 4 | 2,945 | 2,805 | | | | |
| | | 54% 3 | 6% | 45,864 | 25,386 71,250 | | | | |
| | The project beneficial | ies are internall | y displa | aced persons (IDP | s) from the two | | | | |
| | Anglophone regions of Cameroon, the Southwest and the Northwest regions. | | | | | | | | |
| | Among the beneficiaries, a special focus rests on women and children as they | | | | | | | | |
| | belong to the most v | ulnerable and m | lost aff | fected by the ong | going crisis. The | | | | |
| | selection of beneficiaries will be based on their needs as IDPs, including | | | | | | | | |



| | compensating for expenses of the host population. In accordance with | | | | | | | |
|--------------|---|--|--|--|--|--|--|--|
| | humanitarian principles (see OCHA: <u>https://www.unocha.org/</u> | | | | | | | |
| | sites/dms/Documents/OOM-humanitarianprinciples_eng_June12.pdf), Mission | | | | | | | |
| | 21 extends her humanitarian aid indiscriminately of nationality, ethnicity, | | | | | | | |
| | gender, and faith and without adverse distinction of any kind. During the project | | | | | | | |
| | implementation period, 71,250 IDPs shall benefit from the project as direct and | | | | | | | |
| | 87,500 persons as indirect beneficiaries respectively. | | | | | | | |
| Project Cost | 2,000,000 (USD) | | | | | | | |

Reporting Schedule

| Type of Report | Due date |
|--|------------------------------|
| Situation report | 31 January 2020 quarterly |
| Final narrative and financial report (60 days after the ending date) | 28 February 2022 |
| Audit report (90 days after the ending date) | 31 March 2022 |



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

US dollar Account Number - 240-432629.60A IBAN No: CH46 0024 0240 4326 2960A **Euro** Euro Bank Account Number - 240-432629.50Z 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 targets per member can be found in the "Summary Table" Annex, and detailed budgets per member are available upon request from the ACT Secretariat. For pledges/contributions, please refer to the spreadsheet accessible through this link <u>http://reports.actalliance.org/</u>. 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 Finance Officer, Marjorie Schmidt (marjorie.schmidt@actalliance.org) with a copy to the Africa Regional Representative Elizabeth Kisiigha elizabeth.zimba@actalliance.org) /Africa Humanitarian Officer, Caroline Njogu (caroline.njogu@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:

Cameroon Focal Point: Mission 21 Rev. Jochen Kirsch, Director (jochen.kirsch@mission-21.org) ACT Regional Representative, Africa, Elizabeth Kisiigha Zimba (Elizabeth.zimba@actalliance.org) ACT Humanitarian Officer, Africa Caroline Njogu (caroline.njogu@actalliance.org)

ACT Website: <u>http://www.actalliance.org</u>

Alwynn Javier Head of Humanitarian Affairs ACT Alliance Secretariat, Geneva



1. BACKGROUND

1.1. Context

Since December 2016, the two Anglophone regions of Cameroon have been experiencing an everincreasing situation of unrest and uncertainty. The situation has worsened with increased violent attacks and armed fighting after the presidential elections of October 2018, leading to a downturn of economic activity. Initially, the crisis only affected the rural areas of the Anglophone regions, but by 2019, it also entered the regional capitals Buea and Bamenda. Almost daily, there are incidents of armed clashes between government troops and non-state armed groups from the Anglophone regions, many of which belong to the separatists (called *Amba Boys*). In the course of the conflict, at least 200 villages have been raided and farms, property, hospitals, and education facilities partially or severely destroyed or burnt down.

The population living in Anglophone regions are caught up in the conflict and exposed to all forms of atrocities and human rights violations and restricted to move freely due to multiple official and unofficial checkpoints, curfews, lockdowns, arbitrary detentions and confiscation of personal documents. There have been incidences of abduction of civilians who are sometimes shot and killed. In addition, there are reported cases of sexual violence and abuse.

According to estimates from the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), more than 437,500 people from the Anglophone regions were internally displaced across the Northwest, Southwest, West, and Littoral regions (Dec 2018). As a result, the number of IDPs has been rising dramatically, reaching 530,000 in March 2019. In addition, around 35,800 persons have fled to neighboring Nigeria (OCHA: April 2019). More than 50% of IDPs have sought refuge in rural areas, predominantly living in makeshift shelters in forestlands that are generally difficult to access. Others seek safety in urban areas in both the Anglophone and the Francophone part of the country. There, those financially capable may rent a room or an apartment, while others become often uninvited and potentially long-term guests in host communities or with families and friends. Hosting IDPs puts an additional strain on vulnerable households who already share limited resources. Due to their displacement, most IDPs have not only lost identification papers and certificates but also their entire livelihoods and the possibility of earning a living. This has a severe impact on their resilience and their ability to meet their basic needs.

Since the beginning of the mass displacement within Cameroon and to Nigeria, various humanitarian efforts have been made by different actors, including OCHA, the World Food Programme (WFP), Médecins sans Frontiers (MSF), and the International Committee of the Red Cross (ICRC). Humanitarian stakeholders active in the Anglophone regions have agreed on a joint approach in the crisis.

In October 2018, humanitarian actors in Cameroon developed and Emergency Response Plan (ERP) and activated eight clusters (Education, Food Security, Health, Logistics, Nutrition, Protection, Shelter/NFI, and WASH). In December 2018, they finalized a Common Operating Dataset and developed an inter-cluster capacity mapping; and in February 2019, a Humanitarian Response Plan was launched. OCHA, as the overall coordinator of humanitarian efforts in Cameroon, organizes coordination meetings and cluster meetings in the Northwest and the Southwest regions on a regular basis. Mission 21 staff attend OCHA coordination meetings as well as cluster meetings. During these meetings, the participating organizations have the chance to exchange information and insights on the crisis with other organizations.

In addition, Mission 21 has been trying to respond to the crisis. In 2018, as a reaction to the evolving crisis and to respond to the urgent needs of IDPs in the Anglophone regions, Mission 21



initiated the Ecumenical Relief and Rehabilitation Program (ERRP). The programme builds up on and complements Mission 21's longer term projects in the regions. As such, it started off by including IDPs in ongoing project activities and by initiating new initiatives to address the needs of IDPs where during the pilot phase at least 30,000 IDPs have benefited from various initiatives.

During a pilot phase between July and December 2018, geographical focus rested on areas with the greatest need, namely Meme and Manyu divisions (OCHA: Emergency Response Plan, May 2018) as well as parts of Fako and Ngo-Ketunjia division. The activities carried out during the pilot phase included the distribution of food and NFIs as well as medical and psychosocial support for IDPs and efforts to integrate IDPs into the social and economic life of host communities. In this program, Mission 21 works through eight local partners (*see list of partners on page 1*). As a response to the spread of the conflict and the increase of needs, Mission 21 has been gradually expanding the geographical focus of the intervention to more areas in the Anglophone regions.

1.2. Needs

The deterioration of the political situation has in turn led to an increase of humanitarian needs and the requirement for further scale-up of humanitarian assistance in the affected regions. Following decades of marginalization, a strike by lawyers and teachers in October 2016 has degenerated into a severe socio-economic, political, and humanitarian crisis, affecting everyday life and affecting the **education system**. Moreover, since the education system has been disrupted as a result of the 'no school' policy pursued by separatists for nearly three years (90 percent of schools in the Anglophone regions are closed), 80 percent of children are deprived of their basic right to education. It is necessary to support children and young people to receive basic education. For adults, the fragile context and little opportunities for employment call for practical trainings on income generation.

The two regions are also facing **food insecurity**, caused by the lack of seeds due to crop yield losses, further aggravating the already dire situation being faced by conflict affected populations. Overall, 1.5 million people in the Anglophone regions face food insecurity; at least 380,000 people need **shelter support**; and some 418,000-need **non-food items** (NFIs) (OCHA: April 2019). Several sectoral and multi-sectoral assessments carried out by different stakeholders of the crisis, including multi-sectoral rapid assessments by the United Nations and Plan International (2018), have identified needs of IDPs across all sectors, with the most acute needs found in the areas of food and NFIs (including shelter) and basic services like health care, education, and potable water. There are, however, significant differences between different population groups (displaced population self-settled, hosted or renting and non-displaced population in damaged houses, or vulnerable households hosting IDPs), settings, and regions. There is not only a physical but also a significant psychological strain on displaced persons. Therefore, **psychosocial counselling** and trauma healing is also needed, especially for survivors of violence and abuse.

Considering the dynamic and unpredictable evolution of the crisis, humanitarian and rehabilitation efforts must be flexible, be able to adapt to different contexts and vulnerabilities, and adjust to the changes of the situation and the needs of the target population. In addition, assistance may have to be prolonged, particularly the case for food aid provision. Before the outbreak of the crisis, agriculture was the main source of livelihood for more than 70 percent of identified IDPs (OCHA 2019). As IDPs had to leave their fields, crop yields dropped substantially, resulting in a prolonged food crisis as seeds are not available. Therefore, external **food assistance** becomes inevitable, even beyond the end of the actual crisis. Key gaps such as the issue of food security during and beyond the crisis, needs that continue to outpace available resources, funding gaps, and difficulties of international organizations to access the crisis-affected population are discussed during cluster meetings.



1.3. Capacity to respond

Mission 21, the former Basel Mission, holds historic ties to the Anglophone regions of Cameroon (dating back to the 1880s) ties which have been maintained over the years. Mission 21 has worked and had longstanding relationship with different churches in the regions, particularly with the Presbyterian Church in Cameroon (PCC). A recent three-year Cooperation Program (2019-2021) continues to support development projects in the areas of education, health, agriculture and livelihood security when project sites are accessible. In 2018, as a result to the humanitarian crisis, Mission 21 launched a pilot phase of the ERRP, building up on the pre-existing ties and projects. As a response to the Boko Haram insurgency in 2015, Mission 21 local church partners supported internally displaced persons with humanitarian assistance. In Cameroon, Mission 21 has established collaborations with new partners under the ERRP namely the Presbyterian Church in Cameroon, AI-ChristWoV, the Cameroon Baptist Convention (CBC) and five local NGOs as well who all hold a high level of trust and acceptance among the local population. Mission 21 partners have a wide network of parishes across Cameroon's most affected zones (especially rural areas) composed of churches, presbyteries, youth centres, education and health facilities in the Northwest and the Southwest regions. These networks make it easy for relief aid to reach the most affected quickly and efficiently. This is not only an asset for the facilitation of lifesaving assistance, but also provides space for activities such as the provision of medical care, psychosocial support, and trainings. Moreover, church infrastructure such as parishes provide the necessary warehouse capacity for storing relief items. Mission 21's staff in Mission 21's headquarters in Basel, Switzerland work closely with the Coordination Office in Bamenda and Bafoussam where project staff are also based. Sectors of response by Mission 21 local partners include the sectors of Health, Education, Agriculture and Livelihood Security, Orphans and vulnerable children (OVC), youth, and people living with HIV (PLWH).

1.4. Core Faith values

Mission 21 is a faith-based organization operating globally in promoting peace, improving education, delivering health services, and reducing poverty, especially for women and girls. Since 1815, then as the former Basel Mission, she has been sending out a message of hope based on the Christian faith and human rights. This response is carried out with the vision of a world that is just, free, and reconciled. Throughout the project cycle, local partners (including faith-based partners such as the PCC and the CBC and six NGOs) implement activities locally. Although based on Christian values, the response benefits IDPs irrespective of their religious beliefs.

2. PROJECT RATIONALE

2.1. Intervention strategy and theory of change

The long-term goal of the ERRP is to enable the target population to have lifesaving assistance and to improve their resilience and coping mechanism. The strategy of Mission 21 to the ongoing crisis in the Anglophone regions of Cameroon is to supply a package of relief and rehabilitation mechanisms and inputs in order to be ready for requests by the target population and emerging needs in an unstable and unpredictable environment. To reach this goal, the ERRP focuses on the following outcomes and their respective activities:

(1) IDPs received lifesaving assistance (relief):

• Supply and distribution of food, NFIs, nutritional supplements, and WASH items (e.g. sanitary kits and aqua tabs for water purification);

• Trainings on WASH;

- Communication and coordination of relief operations;
- Registration of IDPs during the facilitation of relief;
- Obtaining and purchasing relief items in a cost-effective manner.



(2) Basic medical and psychosocial support provided for IDPs:

• Outreach and health campaigns to provide IDPs with basic health care, medication, psychosocial counselling (including trauma healing services) or referrals to specialized medical and psychological services when necessary.

(3) Early recovery/livelihoods:

• Support in the establishment of farming activities;

• Income-generating projects that promote sustainable livelihoods (e.g. small-scale farming, pastry making, and petty trading in urban centres);

• Provision of safe spaces in form of learning centres for children and youth, especially those who are out of school, to limit their exposure and minimize the risk of them being radicalized, recruited, or abused;

• Development and provision of formal and informal trainings for beneficiaries (e.g. math, IT, English, literacy skills, carpentry, tailoring, hair dressing, professional housekeeping) if the security situations allow it;

• Urban gardening scheme for IDPs;

• Assistance in obtaining lost civic documents such as IDs or certificates.

(4) Affected populations are prepared for and able to adequately respond to potential emergencies:

• Community risk assessment;

• Community mobilization;

• Preparation for and implementation of EPRP workshops and trainings.

Some of the described activities are linked to pre-existing projects carried out by Mission 21 together with the PCN. They foster the self-sufficiency of IDPs, which helps to relieve the burden on host families and communities.

2.2. Impact

The overall objective of the emergency response is to alleviate the suffering and to build resilience of IDPs affected by the Anglophone crisis in Cameroon.

2.3. Outcomes

The project aims to achieve three outcomes:

Outcome 1: IDPs received lifesaving assistance (relief)

Outcome 2: Basic medical and psychosocial support provided for IDPs

Outcome 3: Early recovery/livelihoods

Outcome 4: Affected populations are prepared for and able to adequately respond to potential emergencies

Indicators for outcome 1:

1.1 Number of IDPs

1.2 Number of distributed items (food, NFIs, and WASH items)

Indicators for outcome 2:

2.1 Number of IDPs who receive basic medical care and psychosocial support

2.2 General health and nutritional status of IDPs is improved

Indicators for outcome 3:

3.1 Number of IDPs attending trainings and education facilities

3.2 Indebtedness: IDPs can refund loans or are free of debt

3.3 Nutrition: Number and quality of meals per day

Indicator for outcome 4:

4.1 Emergency Preparedness and Response Plan (EPRP) is in place

2.4. Outputs

The activities of this appeal focus on lifesaving assistance (relief), medical and psychosocial support, and early recovery/livelihood. A list of the outputs, objectively verifiable indicators, and



activities can be found in the Logical Framework (Annex 3). The estimated budget for activities amounts to \$ 773,214 for lifesaving assistance (targeting 50,300 IDPs), \$ 153,571 for basic medical and psychosocial support (targeting 20,400 IDPs), \$ 133,929 for early recovery/livelihoods (targeting 550 IDPs), and \$ 65,000 for emergency preparedness/resilience (targeting ten of the most vulnerable communities within the Anglophone regions and two host regions in the Littorial Region and West Region) respectively.

Outputs for outcome 1 (IDPs received lifesaving assistance (relief):

- 1.1 Distribution of relief aid is coordinated and communicated
- 1.2 IDPs are registered
- 1.3 Relief items (food, NFIs, and WASH items) are available

Outputs for outcome 2 (Basic medical and psychosocial support provided for IDPs):

- 2.1 Outreach teams and health campaigns for basic health care are established
- 2.2 Psychosocial support is delivered

Outputs for outcome 3 (Early recovery/livelihoods):

- 3.1 Formal and informal training facilities and programmes in place
- 3.2 Trainings delivered to IDPs
- 3.3 Urban gardening done by IDPs
- 3.4 Assistance given to IDPs to obtain lost civic documents

Outputs for outcome 4 (Affected populations are prepared for and able to adequately respond to potential emergencies)

- 4.1 Risks and vulnerabilities are identified and assessed
- 4.2 Community-specific action plan and preparedness capacity are developed

Output Indicators:

Indicators for outputs 1:

- 1.1 Number of coordination meetings
- 1.2 Registered IDPs
- 1.3 Number of relief items received

Indicators for outputs 2:

- 2.1.1 Number of outreach visits and heath campaigns
- 2.1.2 Number of IDPs receiving basic medical care
- 2.2.1 Number of counselling sessions conducted
- 2.2.2 Number of IDPs attending psychosocial counselling

Indicators for outputs 3:

- 3.1 Number of training facilities and programmes in place
- 3.2 Number of IDPs trained
- 3.3 Number of IDPs participating in urban gardening
- 3.4 Number of IDPs supported in obtaining civic documents

Indicators for outputs 4:

- 4.1 Risk assessment report
- 4.2 Action plan
- 4.3 Number of trained beneficiaries

Activities

1.1.1. Supply and distribution of food, NFIs, and nutritional supplements



- 1.1.2. Supply and distribution of WASH items
- 1.1.3. Trainings on WASH
- 1.1.4 Communication and coordination of relief operations
- 1.2. Registration of IDPs
- 1.3.1 Obtaining relief items
- 1.3.2. Purchase of relief items in a cost-effective manner
- 2.1.1. Provision of basic health care
- 2.1.2. Provision and distribution of medication
- 2.1.3. Referrals to medical specialists
- 2.2.1. Provision of psychosocial counselling (includes trauma healing services through experts and trained practitioners)
- 2.2.2 Referrals to psychosocial counselling services
- 3.1.1. Support in the establishment of farming activities
- 3.1.2. Income-generating projects in urban centres (connected to regular Mission 21 projects)
- 3.1.3. Provision of safe spaces (in learning centres) for young people
- 3.2.1. Development and provision of formal and informal trainings for beneficiaries
- 3.3.1. Urban gardening scheme for IDPs
- 3.4.1. Assistance in obtaining lost civic documents
- 4.1.1 Community risk assessment
- 4.2.1 Community mobilization
- 4.2.2 Preparation for and implementation of EPRP workshops and trainings

2.5. *Preconditions / Assumptions*

Given the fragile context in the target regions, the proposed intervention is subject to compromised security and changes on the ground. Project activities will be carried out if the security situation allows it, assuming that IDPs are accessible in the bush and/or in regional centres; infrastructure is up and running; transport routes are open; information and communication technology is working; and weather conditions allow the project to run according to plan. Potential risks include the growing number of IDPs and challenges to provide support as well as the continuation of attacks and counter attacks, with IDPs affected by the fighting.

2.6. Risk Analysis

The anticipated risks entail both internal and external factors:

• Programmatic and operational risk of causing harm through the intervention;

• Contextual risks including security risks in the context of an armed conflict in the target regions, the risk of external actors obstructing the implementation of the intervention, risks connected to poor infrastructure, and health-related risks;

• Financial risks regarding price development and procurement risks.

To mitigate potential risks, Mission 21 has developed a risk management strategy that entails a stakeholder analysis, including considerations pertaining to resource allocation and conflict sensitivity; continuous monitoring of the situation and stakeholders' perception of the intervention; open communication with different stakeholders about the intervention; procurement of relief items on local markets; a local security and a contingency plan; adherence to official regulations; and coordination and cooperation with other humanitarian actors in the target area. As the Country Coordinator of Mission 21 and the PCN are locals with professional experience in project



management, they can ponder and prioritize emerging risks more easily than expats with insufficient contextual background.

2.7 Sustainability / Exit Strategy

Lifesaving assistance and early recovery/livelihood measures allow for IDPs' survival before it is safe for them to return to their homes. By promoting income generation, building up resilience, and strengthening organizational and individual capacities, Mission 21 increases partners' and beneficiaries' response capacities and makes sure that disrupted development programmes can be continued once the humanitarian aid comes to a halt. The continuity of partnerships and collaborations makes this possible and allows for a smooth transition to sustainable development. The development programmes evolve around the core themes of education, health, and agriculture and livelihood security, with the aim to strengthen local capacities and to facilitate a life in dignity.

2.8 Building capacity of national members

Mission 21 actively fosters capacities of the PCN by supporting their organisational development as well as the training of trainers (ToT). Furthermore, Mission 21 promotes ongoing South-South exchange that includes visits of a representative team of involved staff and partners from Cameroon to Nigeria. The exchange is funded with Mission 21's own resources.

3. PROJECT IMPLEMENTATION

Does the proposed response honour ACT's commitment to Child \boxtimes Yes \Box No Safeguarding?

As a faith-based organisation with Christian values, it is of great importance to Mission 21 that the most vulnerable of society, that includes children, enjoy special protection and support. For this reason, Mission 21's new Code of Conduct (CoC) addresses child safeguarding in detail.

Mission 21 is fully committed to adhere to the ACT Alliance Child Safeguarding Policy and to introduce trainings and awareness-raising on the policy to communities and partner churches and organizations she works with. Awareness raising is done on a regular basis. For projects that deal with children, appropriate policies and trainings specific and relevant to local and programmatic contexts are in place.

3.1. ACT Code of Conduct

Mission 21 recognizes the ACT Code of Conduct (CoC) and is fully committed to prevent (sexual) exploitation and abuse of any kind. In addition to her new CoC that addresses sexual harassment, abuse, and exploitation (PSEAH), Mission 21 has a Gender Policy that picks up the issues of prevention of exploitation and abuse. Partners' CoCs are currently being revised with the help of a consultant in order to align with the ACT CoC.

To protect stakeholders from exploitation in all its forms, Mission 21 promotes gender mainstreaming in her projects and among her partners. Specific measures to ensure the implementation of the CoC in practice include a functioning internal complaint mechanism and protective measures for individuals reporting suspected cases.

3.2. Implementation Approach

Mission 21 uses a decentralized, multi-stakeholder implementation approach that is based on local capacities. Procurement is done on local markets whenever possible in order to enhance project sustainability. Relief items are transported in small quantities and are distributed without delay. Partnering NGOs work in places that are part of their regular area of intervention while church partners do so across the Anglophone regions. This peculiar approach simplifies procurement and logistics, minimizes warehousing, is flexible, and enables implementers to quickly respond to



changes on the ground and to the immediate and real needs of the target population. Also, as the approach does not attract the attention of government officials or non-state armed groups, it reduces significant risks such as lootings and loss of relief items. As it has proven to be adequate, effective, and efficient, this decentralized and flexible approach from the pilot phase is continued, with the difference of increasing the frequency and number of locations where relief will be facilitated in order to reach the increasing number of people of concern.

3.3. Project Stakeholders

Key stakeholders of the ERRP include the implementing partner churches and NGOs (PCN) as well as the communities and individuals hosting IDPs, and IDPs themselves. Mission 21's PCN are made up of local staff and volunteers. Thus, members of the local population are engaged in the planning and execution of the intervention if they are part of one of Mission 21's PCN. It is noteworthy that also members of the PCN may be affected by displacement and thus may be IDPs themselves. Individuals and communities hosting IDPs serve as key informants as they notify PCN, most notably church representatives, about new IDPs being hosted in their families or communities. IDPs are engaged in the intervention as key informants regarding their needs as target beneficiaries and for generating feedback about activities. Data from needs assessments and feedback are used in project planning and adjustment.

3.4. Field Coordination

Mission 21 is part of OCHA's Humanitarian Coordination Forum in the Northwest and Southwest regions of Cameroon. The Country Coordinator of Mission 21 and his staff participate in coordination and cluster meetings (WASH, Protection, Nutrition, Shelter/NFI) to exchange information and insights with other organizations active the field.

Mission 21 and PCN contribute significantly to the broader humanitarian programme in the Anglophone regions since they have a privileged access to IDPs, especially in remote areas.

3.5. Project Management

Based on outcomes and activities jointly agreed upon by Mission 21's headquarters, the PCN, and the Country Coordinator, the latter is responsible for coordinating field operations of the beforementioned eight PCN. Also, the Country Coordinator organizes Steering Committee Meetings that are attended by staff from the Mission 21 Coordination Office and representatives of the PCN. The Mission 21 Programme Officer for Cameroon oversees the strategic orientation of the ERRP. The day-to-day activities are implemented and reported on by the PCN. The Mission 21 Country Coordinator – a local Cameroonian with a strong background in project cycle management (PCM) and coordination – provides PCN with guidance and the necessary tools for monitoring the activities. He facilitates coordination between different PCN to ensure mutual understanding and to prevent the duplication of assistance. This entails his responsibility for collecting and consolidating data pertaining to registration of IDPs, and monitoring

3.6. *Implementing Partners*

Mission 21 works together with eight local partners who directly implement ERRP activities. These include two partner churches and six partner NGOs active in the following areas:

Presbyterian Church in Cameroon (PCC): Distribution of food, NFIs, and WASH items; medical and psychosocial support and trauma healing. Expertise: Specialized departments of the PCC cover relevant ERRP subjects, particularly the Women's Work Department and the Health Department.

Cameroon Baptist Convention (CBC): Distribution of food, NFIs, and WASH items; psychosocial support and trauma healing. Expertise: Health.



Aid International Christian Women of Vision (AI-ChrisWoV): Distribution of food and NFIs; psychosocial support; medical help for PLWH; life-skill courses; assistance in obtaining lost civic documents. Expertise: HIV; OVC; livelihood security; gender-based violence (GBV).

Youth Outreach Programme (YOP): Distribution of food, NFIs, and WASH items; trainings (e.g. IT, mathematics, English, agriculture and urban gardening, bead working). Expertise: Youth work; management of youth centres.

Hope for Vulnerable and Orphans (HOVO): Distribution of food, NFIs, and WASH items; informal trainings (mathematics, English). Expertise: Sexual and reproductive health; education; economic empowerment.

Bamenda Coordination Centre for Disability and Rehabilitation Studies (BCCDRS): Psychosocial support for non-Christian IDPs. Expertise: Disability research; rehabilitation services and health promotion for people with disabilities.

Rechafond: Distribution of food and NFIs; informal trainings. Expertise: Work with OVC.

Helpout: Trauma healing; training of ERRP implementers in trauma healing; professional housekeeping trainings for young women. Expertise: Trauma healing.

While the PCC and AI-Christo have been partners of Mission 21 for many years, the remaining have partnered up with Mission 21 in 2018 in order to respond to the crisis in a joint venture. There are Memoranda of Understanding between Mission 21 and each PCN as well as project financing contracts and agreements of cooperation.

3.7. Project Advocacy

The increased need of IDPs for specialized counselling with regard to traumas and mental health issues has been chosen as a key message for advocacy and is actively promoted among humanitarian actors and the local government, not only by Mission 21 but also by implementing partners. Also, Mission 21 conducts awareness raising about the nature and scale of the humanitarian crisis in the Anglophone regions of Cameroon with a focus on the public opinion in Europe as well as sensitization inputs among duty-holders (decision makers).

3.8. Private/Public sector co-operation

Mission 21 also collaborates with local authorities and promotes dialogue and peacebuilding, relationships which are crucial for the facilitation of efficient humanitarian aid in the area.

3.9. Engaging faith leaders

With the two largest of the eight implementing partners being church partners (PCC and CBC) that are deeply rooted within the local population and enjoy high trust and respect, engaging faith leaders in the intervention is key. Also, faith leaders are represented in congregations and parishes across Cameroon. Thus, they enjoy a privileged access to the local population, including the target population. Christian IDPs visit church services on a regular basis or attend services held by pastors who reach out to IDPs in the forests. Church services and outreach activities are not only an opportunity for engaging with the target population but also for gaining information on the dynamic and specialized needs of IDPs. This is crucial for planning and adjusting project activities and for increasing their effectiveness. As the ERRP serves IDPs irrespective of their religious background, also non-Christian faith leaders are engaged, such as Islamic religious leaders in order to reach Muslim IDPs.

The chairman of the PCC, a highly respected personality in Cameroon, is dedicated to doing advocacy in favor of peacebuilding and to offering a platform for dialogue between government and separatists.



3.10 Simplified Work Plan

| PLANNED ACTIVITY | EXPECTED RESULTS | 01 | 02 | Q3 | Q4 | Q5 | Q6 | Q7 | Q8 | RESPONSIBILITY |
|---|---|----|----|----|----|----|----|----|----|---|
| Program Staff | | - | - | | | | | | | • |
| Recruitment of new staff | 4 new staff recruited | × | | | | | | | | Head of African Team; Programme Manager; Country Coordinator (CC) |
| Procurement: tender, warehouse, arrangements and purchases | Procurement is done | × | | | | | | | | CC; Finance Officer |
| Shelter and Settlement / Non-food Items | | | | | | | | | | |
| Blankets | 1,000 IDPs receive blankets | | × | | × | | | | | CC; PCN (partner churches an NGOs) |
| Bedding set | 1,000 IDPS receive bedding sets | | × | | × | | | | | CC; PCN |
| Basic household utensils (e.g. cooking pots) | 500 households receive hosuehold utensils | | × | × | × | x | × | × | | CC; PCN |
| Food Security | | | | | | | | | | |
| Training of IDPs in various farming and gardening techniques | 8 trainings delivered | × | Γ | | | | | | | CC; PCN |
| IDPs doing farming and gardening | Farming and gardening done by IDPs | | × | x | × | × | × | × | x | CC; PCN |
| Establishment of food production | 200 IDPs start food production farms | | × | × | | | | | | CC; PCN |
| Establishment of urban gardens | 100 urban garden projects go operational | | × | × | | | | | | CC; PCN |
| Nutritional supplements to children (monthzly requirement per child) | 1,000 IDP children receive food supplements | | × | × | × | × | × | | | CC; PCN |
| Food supplies (monthly equivalent per person) | 19,000 food bags distributed to IDPs | | × | × | × | × | × | × | × | CC; PCN |
| Water, Sanitation & Hygiene (WASH) | | | | | | | | | | |
| Aquatabs (stripes of 10 tablets) | 15,000 IDPs receive aguatabs | | × | × | × | × | × | × | | CC; PCN |
| Sanitary kits for girls/women | 2,000 sanitary kits given to IDPs | | × | × | × | × | × | × | | CC; PCN |
| Household hygiene package | 2,000 hygiene packages distributed | | × | x | × | × | × | × | | CC; PCN |
| Trainings on WASH | 50 trained household representatives on WASH | | × | | | | | | | CC; PCN |

| Health / Nutrition | | | | | | | | | | | |
|---|--|---|----------------|---|---|-----|----------------|-----------|---|---------------------|--|
| Medical supplies | 3,000 IDPs receive medical supplies | × | × | × | × | × | × | × | 1 | CC; PCN | |
| Medical outreach & referrals to specialists | 100 outreach visits | x | х | х | x | х | х | х | х | CC; PCN | |
| Protection / Psychosocial Support | | | | | | | | | | | |
| Group counselling sessions | 40 sessions held | × | × | × | | | | T | | CC; PCN | |
| Individual counselling (office based) | 200 IDPs attend individual counselling sessions | × | × | × | × | × | × | × | | CC; PCN | |
| Peer group formation | 20 peer groups | x | x | - | | | | - | | CC; PCN | |
| Peer support group meetings | 500 peer group meetings | | × | × | × | × | × | × | | CC; PCN | |
| Assistance in obtaining lost civic documents | 700 civic documents obtained | × | × | × | × | × | × | × | | CC; PCN | |
| Early Recovery & Livelihood Restoration | | | | | | | | | | | |
| Training of young IDPs | T | - | 1 | T | - | - | 1 | - | 1 | CC: PCN | |
| Recruitment of trainees | 100 recruits | × | × | 1 | 1 | + | + | 1 | 1 | | |
| Training of trainees | 100 trainees | 1 | x | × | × | × | × | × | - | | |
| Business management training of IDPs | | | 1 [°] | - | 1 | - î | 1 ⁿ | 1 | - | CC: PCN | |
| Development of curriculum | | | | - | - | - | | - | | | |
| Recruitment of trainees | 100 recruits | x | | | - | | | | | | |
| Training of trainees | 10 training events | | | × | x | | | - | | | |
| Small business support (start-ups) | 200 start-ups | | | | × | × | × | | | Mission 21; PCN | |
| Emergency Preparedness / Resilience | | | _ | | _ | | _ | | _ | | |
| Risk assessment | Risk assessment is realised | x | T | T | 1 | 1 | T | 1 | T | CC: Consultant | |
| Development of education material, management policy and operation manual | Education material, management policy and operation manual are developed | × | T | | | | | \square | | CC; Consultant | |
| Mobilisation of 10 communities | Communities are informed and prepared to develop and implement an EPRP plan | × | × | | | | | | | CC; PCN | |
| Workshops and trainings (volunteer and community-level training, regional workshops) | 4 workshops and trainings | | | × | × | | | | | CC; Consultant | |
| | | | | _ | | | _ | _ | _ | | |
| Program Implementation | | | | | | | | | | | |
| Program Implementation Programm assets and equipment (procurement) | Programme assets and equipemnt procured | × | 1× | × | - | 1 | 1 | - | 1 | CC; Finance Officer | |

| Baseline / endline assessment | Endline assessment realsied | | 1 | T | E | | | | × | CC; M&E Officers |
|--|-----------------------------|---|---|---|---|---|---|---|---|---|
| Complaint mechanisms / information sharing | System in place | | × | × | × | × | × | × | | CC; M21 Headquarter |
| Advocacy | 1 process complete | × | × | × | × | × | | | | CC; Programme Officer |
| Monitoring & evaluation | 8 visits realised | × | × | × | × | × | × | × | × | CC; M&E Officers |
| Audit | 2 audits done | | | | × | | | | × | CC; Finance Officer |
| Coordination | | | | | | | | | | |
| Kick-start workshop | 1 meeting | × | | | | | | | | CC |
| Mid-review workshop | 1 review | | | | | × | | | | CC |
| Visibility / fundraising | | | | | | | | | | |
| Quarterly publication | 7 publications | x | × | х | x | х | x | × | | CC; Mission 21 Headquarters |
| Funding appeals | 3 appeals | | | × | | × | | × | | CC; Programme Officer; Assistant Programme Officer |
| Staff training | 3 staff trained | | × | | × | x | | | | Mission 21 Headquarters |
| Strengthening Capacities | | | | | | | | | | |
| Local partners | 2 events held | | x | | x | | | | | CC |
| Target beneficiaries | 8 events held | | × | × | × | × | | | | CC; PCN |
| Faith communities | 2 events held | | × | | | × | | | | CC |



4. PROJECT MONITORING

4.1. Project Monitoring

The PCN monitor their own activities and subsequently submit data and reports to the Mission 21 Country Coordinator. This is done after each single distribution of relief. The Country Coordinator provides the PCN with the appropriate monitoring tools and other assistance when necessary. After receiving the reports, he does the first-level reconciliation and plausibility checks, after which the final controlling is done at the headquarters. The overall coordination of the efforts made by the PCN is assured by regular Steering Committee meetings. A gender-balanced team of two Monitoring and Evaluation (M&E) Officers are responsible for collecting data related to the ERRP that go beyond the capacity of the PCN. One officer is responsible for M&E in the Northwest region and the other one in the Southwest region. They collect data on relief items, their prices, and the quantity of items distributed. Also, by means of the Enumeration App, they gather data on IDP registrations during relief distributions. This data is used for case management purposes and helps prevent the duplication of registrations and support. Beneficiaries are regularly involved by the two M&E Officers to gather feedback concerning the intervention and ideas for corrective actions. Data collected by M&E Officers and the PCN is used to measure progress and to identify deficiencies. Evaluations are conducted twice a year to support systematic steering, learning, efficiency, and effectiveness.

4.2. Safety and Security plans

Mission 21 and her implementing partners consider the security and wellbeing of their staff and take on their duty of care. All Mission 21 staff working in the field receive a training on local security and first aid. Mission 21 has a Local Security Plan (LSP) that is based on a thorough risk assessment which identifies and rates the levels of risks for staff, implementers, and beneficiaries (please see Annex 9). The latest risk assessment was done in collaboration with the PCN in February 2019 under the supervision of an external consultant for Mission 21.

The LSP is revised regularly and Mission 21 staff and the PCN are introduced to its content. However, as the LSP is technically an internal document, the PCN are encouraged to develop their own LSP and to sensitize their staff on safety and security issues as well as on a contingency plan.

4.3 Knowledge Management

Knowledge Management Throughout the intervention period, the Mission 21 Country Coordinator oversees the day-to-day information flow with and between the PCN. Regular steering committee meetings attended by Mission 21 staff and representatives of the different PCN are a platform for sharing and documenting experiences, new insights, good practices, and for discussing lessons learnt that are then used for steering purposes. As for information flow and exchange among humanitarian actors in the Northwest and Southwest regions of Cameroon, Mission 21 actively participates in cluster and coordination meetings organized by OCHA. Furthermore, Mission 21 (both the headquarters and the Coordination Office) provides backstopping for upcoming topics relevant to the programme such as project cycle management, trauma healing, first aid, security, and emergency preparedness. Moreover, e-learning resources are available for the PCN. Participants of online learning courses meet regularly to discuss the courses' content as well as strategies for using the newly acquired knowledge appropriately in the intervention.

5. PROJECT ACCOUNTABILITY

5.1. Mainstreaming Cross-Cutting Issues

Mission 21 mainstreams the following cross-cutting issues:

<u>Gender</u>: Mission 21 applies a gender mainstreaming process across all issues and working areas. All objectives and activities as well as their impacts are formulated, analyzed, and executed consciously regarding women and men and their specific needs.



<u>Resilience</u>: As an answer to armed conflict and displacement, building the target population's resilience is an integral part of the intervention. Relief measures are taken to secure IDPs immediate needs; trainings and psychosocial support are conducted to reduce their vulnerability and to minimize negative effects on their mental health. This in turn strengthens IDPs' self-help capacity. Furthermore, an Emergency Preparedness and Response Plan (EPRP) is put in place to strengthen the preparedness towards potential emergencies.

<u>Participation</u>: Beneficiaries and stakeholders (especially local implementing partners) will be involved in the implementation of this appeal.

Social inclusion: Marginalized and vulnerable groups will be involved systematically.

<u>Anti-terrorism and corruption</u>: Mission 21 has appropriate measures in place to address fraud and corruption.

5.1.1. Gender Marker / GBV

In the context of the Anglophone crisis, gender mainstreaming is a pressing issue. Since the education system has been disrupted due to the enforcement of closing down schools, about 80 percent of school-aged children and youth do not receive an education. Being out of school and lacking perspectives increases the risk of both girls/young women and boys/young men. In the displacement setting, women in general but especially school-aged girls are at an increased risk of being driven into prostitution, of becoming victims of rape, sexual abuse and harassment, and of being affected by sexually transmitted diseases and teenage pregnancies. Young men, in turn, are suspected of sympathizing with the opposing side and run the risk of arbitrary detention and of being shot and killed. Often, they are forcibly recruited by non-state armed groups.

Mission 21 has a gender desk and a gender policy in place that also commits implementing partners. Thus, Mission 21 follows a gender-equality approach, striving for a transparent use and a fair distribution and exercise of power, and executes interventions in a gender-sensitive manner. For instance, Mission 21 has a gender-balanced Monitoring and Evaluation team on the ground. Staff and partners are regularly sensitized on gender mainstreaming as well as gender-related issues, including gender-based violence.

With the ratio of female versus male IDPs in the conflict region being 2:1, women and girls are more affected by displacement. Also, they are generally disadvantaged in terms of economic opportunities and representation and face political and social discrimination. In order to redress their disadvantage and marginalization, the ERRP entails activities that specifically target female IDPs and their needs. These include for instance the distribution of sanitary kits entailing menstrual hygiene products, the supply of nutritional supplements for pregnant women, and specific trainings (e.g. on menstrual hygiene) and long- and short-term courses (e.g. on IT or business management). The project also entails income-generating activities that promote the economic empowerment of women and youth. The trainings and activities not only foster capacity development but also provide a distraction from the conflict situation and a safe environment for participants. For women, this decreases their risk of being exploited, abused, or driven into prostitution, and young men are kept off the radar of armed groups and are offered alternatives to recruitment and radicalization.

5.1.2. Resilience Marker

The intervention addresses the needs emerging from the crisis in order to strengthen the target population's resilience. This is done through (1) the provision lifesaving assistance as well as of long- and short-term courses and income generating activities, which foster economic empowerment and livelihood security and enable beneficiaries to adapt to the given conditions of the crisis, (2) through the facilitation of psychosocial support and trauma healing, which build up mental coping mechanisms and may have a therapeutic, stress-relieving impact, and (3) through



the implementation of an Emergency Preparedness and Response Plan (EPRP) that seeks to prepare affected populations for the eventualities of future disasters and emergencies in order to mitigate their damaging effects.

5.1.3. Environmental Marker

N/A

5.1.4. Participation

Beneficiaries and local implementing partners are involved in the intervention throughout the project cycle. Active participation of the local population – that includes parishes as well as local NGOs and beneficiaries, which are often part of the PCN – is key for the effective implementation of the project and for reaching IDPs, especially those in remote areas that are difficult to access (such as forestlands). The PCN were selected for the facilitation of specific activities based on their capacities and areas of expertise as well as on requirements for delivering effective support. They can take decisions on their own within the framework given by the programme and its reporting and coordination mechanisms. IDPs, in turn, are not only aid recipients but are key stakeholders since they know their needs, which may be subject to change due to the dynamics of the crisis, best.

Continuous dialogue between Mission 21 staff, the PCN, and the target population helps to ensure mutual understanding about the purpose and objective of the intervention and to react to changing needs and requirements.

5.1.5. Social inclusion / Target groups

Social inclusion is an integral aspect of the intervention. For instance, special efforts are made to reach disabled persons. As they are among the most vulnerable and may not be able to benefit from activities during regular facilitation, the PCN – above all the CBC – organize special relief facilitation for the disabled to ensure that no one is left behind. Social inclusion is also crucial for minority groups. In the case of the Anglophone crisis, this is particularly the case for displaced IDPs of Muslim faith. The PCC and AI-ChrisWoV regularly reach out to Muslim communities to facilitate relief and other activities. Mission 21 and the PCN, two of which are of Christian faith, facilitate the project to the target population without adverse distinction of any kind, including discrimination based on gender, lifestyle, ethnicity, religious orientation, or political views.

5.1.6. Anti-terrorism / Corruption

Mission 21 is committed to good governance practices of transparency, participation, and accountability. All staff and partners sign the Mission 21 Code of Conduct or a partnership agreement respectively which includes a binding clause of zero tolerance to corruption. For all activities of Mission 21, an accurate, complete, and well-documented system to address allegations of fraud, corruption, sexual exploitation, and abuse is guaranteed. In the field, the Country Coordinator oversees supervising inventories and prices. Furthermore, he does background checks of new staff.

5.2. Conflict sensitivity / do no harm

Conflict sensitivity and "Do no Harm" is being mainstreamed throughout the life cycle of Mission 21's programmes and projects. Mission 21 follows the principles of (1) conflict and gender-sensitive programme management based on solid conflict analyses covering all aspects that could trigger new or fuel existing conflict lines, (2) promoting interreligious and interethnic collaboration, (3) non-violence, and (4) a human rights-based approach.

5.3. Complaints mechanism + feedback



Mission 21 has a well-established and functioning complaints mechanism to address mismanagement, corruption and abuse without fear of retributions in an appropriate manner both in the headquarters and in the field. Currently, the Mission 21 Country Coordinator is developing a system to be in direct contact with the intervention's target population. Beneficiaries have the possibility and are encouraged to give feedback during regular onsite visits by the Mission 21 M&E Officers. Monitoring is conducted by Mission 21 field staff independently of the operations of implementing partners. Feedback and complaints from beneficiaries and from members of the PCN is analyzed and acted upon appropriately.

5.4. Communication and visibility

In the framework of the ERRP, Mission 21 disseminates clear information on her own, her partners' as well as her donors' role in the intervention. Mission 21 will label material used or distributed during the intervention, for example food and NFIs, with the Mission 21 logo and cobrand partner logos with the logo of donor organizations. Furthermore, all stakeholders are made aware of Mission 21's role as the coordinator, supervisor, and provider for funds. There are regular local and international media releases.

6. PROJECT FINANCE

6.1. Consolidated Budget

| 0.1. | consonaatea buaget | | | | | |
|---------|--|-----------------|-----------------|------------|------------------|------------------|
| | | Type of Unit | No. of Units | Unit Cost | Appeal Budget | Appeal Budget |
| DIRECT | COSTS | | | currency | local currency | USD |
| 1 | PROGRAM STAFF | | | | | |
| Interna | ational program staff | | | | | |
| 1.2. | Programme Officer (20%) | Month | 5 | 4,200,000 | 20,160,000 | 33,844 |
| 1.2.1. | Assistant Programme Officer (60%) | Month | 14 | 4,000,000 | 57,600,000 | 96,697 |
| 1.2.2. | Country Coordinator (30%) | Month | 7 | 2,350,000 | 16,920,000 | 28,405 |
| Nation | al program staff | | | | | |
| 1.3. | Monitoring & Evaluation Officer 1 (70%) | Monthly | 17 | 500,000 | 8,400,000 | 14,102 |
| 1.3.1. | Monitoring & Evaluation Officer 2 (70%) | Monthly | 17 | 500,000 | 8,400,000 | 14,102 |
| 1.3.2. | Project Officer (100%) | Monthly | 24 | 350,000 | 12,000,000 | 20,145 |
| 1.3.3. | Finance Officer/Accountant (100%) | Monthly | 24 | 500,000 | 8,400,000 | 14,102 |
| | Total international | | | | 94,680,000 | 158,946 |
| | Total national | | | | 37,200,000 | 62,450 |
| | TOTAL PROGRAM STAFF | | | | 131,880,000 | 221,397 |
| 2 | PROGRAM ACTIVITIES | | | | | |
| 2.1. | Shelter and settlement / Non-food items | | | | 80,000,000 | 134,302 |
| 2.1.1. | Bedding set | Set | 2,000 | 7,500 | 15,000,000 | 25,182 |
| 2.1.2. | Blankets/mattresses | Number | 2,000 | 20,000 | 40,000,000 | 67,151 |
| 2.1.3. | Basic household utensils (e.g. cooking pots) | Lump sum | 1 | 25,000,000 | 25,000,000 | 41,969 |

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| 2.2. | Food security | | | | 335,250,000 | 562,809 |
|--------|---|------------------------|--------|-----------|-------------|-----------|
| 2.2.1. | Establishment of food production units | Farm | 250 | 125,000 | 31,250,000 | 52,462 |
| 2.2.2. | Establishment of urban gardens | Garden | 100 | 100,000 | 10,000,000 | 16,788 |
| 2.2.3. | Nutritional supplement packages | Number | 1,000 | 1,000 | 1,000,000 | 1,679 |
| 2.2.4. | Food supplies | Bag | 19,000 | 15,000 | 285,000,000 | 478,450 |
| 2.2.5. | Training of IDPs in farming techniques | Number of trainings | 8 | 1,000,000 | 8,000,000 | 13,430 |
| 2.3. | Water, sanitation & hygiene (WASH) | | | | 86,000,000 | 144,375 |
| 2.3.1. | Aquatabs (stripes of 10 tablets) | Stripes | 20,000 | 700 | 14,000,000 | 23,503 |
| 2.3.2. | Sanitary kits for girls/women | Package | 4,000 | 8,000 | 32,000,000 | 53,721 |
| 2.3.3. | Household hygiene package | Household | 4,000 | 7,500 | 30,000,000 | 50,363 |
| 2.3.4. | Trainings on WASH | Number | 10 | 1,000,000 | 10,000,000 | 16,788 |
| 2.4. | Health / Nutrition | | | | 40,500,000 | 67,990 |
| 2.4.1. | Medical supplies | Package | 4,500 | 5,000 | 22,500,000 | 37,772 |
| 2.4.2. | Medical outreach and referrals to specialists | Number | 120 | 150,000 | 18,000,000 | 30,218 |
| 2.5. | Protection / Psychosocial support | | | | 63,500,000 | 106,602 |
| 2.5.1. | Group counselling sessions | Sessions | 40 | 450,000 | 18,000,000 | 30,218 |
| 2.5.2. | Individual counselling (office based) | Persons | 500 | 20,000 | 10,000,000 | 16,788 |
| 2.5.3. | Peer group formation | Groups | 60 | 25,000 | 1,500,000 | 2,518 |
| 2.5.4. | Peer support group meetings | Meetings | 520 | 25,000 | 13,000,000 | 21,824 |
| 2.5.5. | Assistance in obtaining lost civic documents | Documents | 700 | 30,000 | 21,000,000 | 35,254 |
| 2.6. | Early recovery & livelihood restoration | | | | 74,250,000 | 124,649 |
| 2.6.1. | Training of young IDPs | Number | 100 | 450,000 | 45,000,000 | 75,545 |
| 2.6.2. | Business management training of IDPs | Events | 10 | 400,000 | 4,000,000 | 6,715 |
| 2.6.3. | Small business support (start-ups) | Number | 190 | 125,000 | 23,750,000 | 39,871 |
| 2.6.4. | Development of training curriculum | Number | 1 | 1,500,000 | 1,500,000 | 2,518 |
| 2.8. | Emergency Preparedness / Resilience | | | | 36,506,602 | 61,286 |
| 2.8.1. | Workshops and trainings | Number | 4 | 3,500,000 | 14,000,000 | 23,503 |
| 2.8.2. | Consultants (development of manual, and education material; risk assessment) | Events | 4 | 4,200,000 | 16,800,000 | 28,203 |
| 2.8.3. | General expenditure (visibility materials, beneficiary communication) | Lumpsum | 1 | 5,706,602 | 5,706,602 | 9,580 |
| | TOTAL PROGRAM ACTIVITIES | | | | 716,006,602 | 1,202,013 |

³ PROGRAM IMPLEMENTATION

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| | | | | |] | |
|----------|--|----------|--------|------------|-------------|---------|
| 3.1. | Local Partners | Number | 8 | 12,000,000 | 96,000,000 | 161,162 |
| 3.2. | Needs Assessment | Exercise | 1 | 4,000,000 | 4,000,000 | 6,715 |
| 3.4. | Baseline / endline Assessment | Exercise | 1 | 3,000,000 | 3,000,000 | 5,036 |
| 3.5. | Complaint mechanisms / information sharing | Lump sum | 1 | 4,000,000 | 4,000,000 | 6,715 |
| 3.6. | Advocacy | Number | 1 | 3,500,000 | 3,500,000 | 5,876 |
| 3.9. | Monitoring & evaluation | Visits | 8 | 250,000 | 2,000,000 | 3,358 |
| 3.10. | Audit | Number | 2 | 5,000,000 | 10,000,000 | 16,788 |
| | TOTAL PROGRAM IMPLEMENTATION | | | | 122,500,000 | 205,650 |
| 4 | PROGRAM LOGISTICS | | | | 122,500,000 | |
| | (of relief materials) | | | | | |
| 4.1. | Hire/ Rental of Vehicles | Cars | 4 | 5,000,000 | 20,000,000 | 33,575 |
| 4.2. | Fuel | Litres | 40,000 | 650 | 26,000,000 | 43,648 |
| Warehous | sing | | | | | |
| 4.3. | Rental of warehouse | Number | 3 | 3,000,000 | 9,000,000 | 15,109 |
| 4.4. | Wages for Security/ Guards | Contract | 3 | 9,000,000 | 27,000,000 | 45,327 |
| Handling | | | | -,, | | , |
| 4.5. | Salaries for Logistician/Procurement Officer | Month | 24 | 250,000 | 6,000,000 | 10,073 |
| 4.6. | Salaries / wages for labourers (6) | Month | 24 | 750,000 | 18,000,000 | 30,218 |
| 4.8. | travel | Lump sum | 1 | 1,500,000 | 1,500,000 | 2,518 |
| 4.9. | accommodation | Lump sum | 1 | 5,000,000 | 5,000,000 | 8,394 |
| | Transport | | | | 46,000,000 | 77,224 |
| | Warehousing | | | | 36,000,000 | 60,436 |
| | Handling | | | | 30,500,000 | 51,203 |
| | TOTAL PROGRAM LOGISTICS | | | | 112,500,000 | 188,862 |
| 5 | PROGRAM ASSETS & EQUIPMENT | | | | ,, | |
| 5.1. | Computers and accessories | Set | 4 | 450,000 | 1,800,000 | 3,022 |
| | | | | | | |
| 5.2. | Printers | Number | 2 | 650,000 | 1,300,000 | 2,182 |
| 5.3. | Office Furniture Communications equipment e.g. | Lump sum | 1 | 1,500,000 | 1,500,000 | 2,518 |
| 5.4. | camera, video camera, sound recording, satellite phone | Lump sum | 1 | 2,000,000 | 2,000,000 | 3,358 |
| | TOTAL PROGRAM ASSETS & EQUIPMENT | | | | 6,600,000 | 11,080 |
| 6 | OTHER PROGRAM COSTS | | | | | |
| 6.1. | SECURITY | | | | 1 | |
| 6.1.1. | Material resources | Lump sum | 1 | 1,000,000 | 1,000,000 | 1,679 |

actalliance

| 6.1.2. | Human resources | | | | - | - |
|----------|--|---------------|-----------|-----------|---------------|-----------|
| 6.1.3. | Security trainings | Number | 1 | 3,000,000 | 3,000,000 | 5,036 |
| 6.1.4. | Site enhancements | Lump sum | 1 | 1,500,000 | 1,500,000 | 2,518 |
| | TOTAL SECURITY | | | | 5,500,000 | 9,233 |
| 6.2. | FORUM COORDINATION | | | [| 1 | |
| 6.2.1. | Kick-start workshop | Number | 1 | 2,500,000 | 2,500,000 | 4,197 |
| 6.2.2. | Mid-review workshop | Number | 1 | 2,500,000 | 2,500,000 | 4,197 |
| 6.2.3. | Visibility / fundraising | Lump sum | 1 | 3,500,000 | 3,500,000 | 5,876 |
| 6.2.4. | Staff trainings | Lump sum | 1 | 5,000,000 | 5,000,000 | 8,394 |
| | TOTAL FORUM COORDINATION | | | | 13,500,000 | 22,663 |
| 6.3. | STRENGTHENING CAPACITIES | | - | | | |
| 6.3.1. | Local partners/national members | Events | 2 | 2,250,000 | 4,500,000 | 7,554 |
| 6.3.2. | Target beneficiaries | Events | 8 | 1,000,000 | 8,000,000 | 13,430 |
| 6.3.3. | Faith communities | Events | 2 | 2,250,000 | 4,500,000 | 7,554 |
| | TOTAL STRENGTHENING CAPACITIES | | | | 17,000,000 | 28,539 |
| | TOTAL DIRECT COST | | | | 1,125,486,602 | 1,889,437 |
| INDIRECT | COSTS: PERSONNEL, ADMINISTRATION & S | UPPORT | | | 1,120,100,002 | 2,000,107 |
| e.g. | Staff salaries Office Operations | | | | | |
| | Office rent | Month | 9.6 | 500,000 | 4,800,000 | 8,058 |
| | Office Utilities | Month | 9.6 | 800,000 | 7,680,000 | 12,893 |
| | Office stationery | Month | 9.6 | 800,000 | 7,680,000 | 12,893 |
| | <u>Communications</u> | | 9.6 | | | |
| | Telephone and fax | Month | 24.0 | 280,000 | 6,720,000 | 11,281 |
| | <u>Other</u> | | | | 1 | |
| | Insurance | Year | 2 | 2,140,000 | 4,280,000 | 7,185 |
| | TOTAL INDIRECT COST: PERSONNEL, ADM SUPPORT | IIN. & | | | 31,160,000 | 52,311 |
| | TOTAL EXPENDITURE exclusive Internatio Coordination Fee | 1,156,646,602 | 1,941,748 | | | |
| INTERNAT | IONAL COORDINATION FEE (ICF) - 3% | | | | 34,699,398 | 58,252 |
| | TOTAL EXPENDITURE inclusive Internation | nal | | | 1,191,346,000 | 2,000,000 |



7. <u>ANNEXES</u> 7.1 Logical Framework

| | Logical Fi | ramework | |
|---|---|---|--|
| IMPACT | | | |
| Lifesaving assistance and building resi | lience for IDPs in the Anglophone regio | ns of Cameroon. | |
| OUTCOME(S) | Objectively verifiable indicators | Source of verification | Assumptions |
| A. IDPs received lifesaving | Α. | Α. | IDPs are accessible in the bush |
| assistance (relief) | - Number of IDPs - Number of distributed items (food, | - Reports from implementing partners | and/or the regional centres |
| B. Basic medical and psychosocial support provided for IDPs | NFIs, and WASH items) | - Data from Enumeration App - Photos from relief distribution | Infrastructure is up and running |
| | В. | | Transport routes are open |
| C. Early recovery/livelihoods D. Affected populations are prepared for and able to adequately respond to potential emergencies | Number of IDPs who receive basic medical care and psychosocial support General health and nutritional status of IDPs is improved C. Number of IDPs attending trainings and education facilities Indebtedness: IDPs can refund loans or are free of dept Nutrition: Number and quality of meals per day D. Emergency Preparedness and Response Plan (EPRP) is in place | B. Records from health services Records from psychosocial counselling services Testimonies C. Reports Records and statistics from implementing partners Testimonies Interviews and household surveys D. Activity reports | Information and communication technology is working Weather conditions allow the project to run according to plan Risks: Number of IDPs is growing and the provision of support becomes more challenging Attacks and counter attacks continue and IDP centres are affected by the fighting |
| OUTPUT(S) A.1. Distribution of relief aid is coordinated and communicated | Objectively verifiable indicators A. | Source of verification A. - Meeting minutes | Assumptions Same as above |

7.2. Summary table

| Summary | Missi | on 21 | | | | |
|------------------------|---|---------------|--------------|------------------------------|--|--|
| | | | | | | |
| Implementation period | From 1 November 2019 to 31 October 2022 | | | | | |
| | Total | duration: 24 | (month | is) | | |
| Sectors of response | \boxtimes | Shelter / | \mathbf{X} | Protection / | | |
| | | NFIs | | Psychosocial | | |
| | \mathbf{X} | Food | \boxtimes | Early recovery / | | |
| | | Security | | livelihoods | | |
| | \mathbf{X} | WASH | \boxtimes | Education | | |
| | \mathbf{X} | Health / | | Unconditional | | |
| | | Nutrition | | cash | | |
| Targeted beneficiaries | IDPs | from the Nort | hwest | and the Southwest regions of | | |
| (per sector) | Came | eroon | | | | |
| Requested budget (USD) | US\$ 2,000,000 | | | | | |