

ACT Alliance

APPEAL

JOR211

**Multi-sectorial Response to Refugees, Host
Communities and Vulnerable Groups in Jordan**

Appeal target: 1,849,233 USD

Balance requested: 1,849,233 USD

actalliance



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Project Summary Sheet																																	
Project Title	Multi-sectorial Response to Refugees, Host communities and Vulnerable Groups in Jordan																																
Project ID	JOR211																																
Location	Jordan																																
Project Period	From 1 January 2021 to 31 December 2022 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	ACT Jordan Forum																																
Requesting members	DSPR, MECC, LWF and ELCJHL																																
Local partners	All members implement directly but in close collaboration with local entities as municipalities CBO's, Women Programs Centers, VTC's and DSPR Vocational Training Centers and Clinics.																																
Thematic Area(s)	<table border="1"> <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</td> <td><input checked="" type="checkbox"/></td> <td>Early recovery / livelihoods</td> </tr> <tr> <td><input type="checkbox"/></td> <td>WASH</td> <td><input checked="" type="checkbox"/></td> <td>Education</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Health / Nutrition</td> <td><input type="checkbox"/></td> <td>Unconditional cash</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Other sector</td> <td colspan="2">Emergency Preparedness / Resilience</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Advocacy</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/></td> <td>DRR/Climate change</td> <td colspan="2"></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Resilience</td> <td colspan="2"></td> </tr> </table>	<input checked="" type="checkbox"/>	Shelter / NFIs	<input checked="" type="checkbox"/>	Protection / Psychosocial	<input checked="" type="checkbox"/>	Food Security	<input checked="" type="checkbox"/>	Early recovery / livelihoods	<input type="checkbox"/>	WASH	<input checked="" type="checkbox"/>	Education	<input checked="" type="checkbox"/>	Health / Nutrition	<input type="checkbox"/>	Unconditional cash	<input checked="" type="checkbox"/>	Other sector	Emergency Preparedness / Resilience		<input type="checkbox"/>	Advocacy			<input type="checkbox"/>	DRR/Climate change			<input checked="" type="checkbox"/>	Resilience		
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Project Impact	To alleviate suffering and build resilience for the most vulnerable host communities and refugees affected by the Syria Crisis and COVID-19 impacts.																																
Project Outcome(s)	<p>1. Food Security: Improved accessibility to quality food and nutrition and enhanced nutrition practices for affected persons through vouchers, kits distribution and awareness raising.</p> <p>2. MHPSS/Protection: Improved resilience of affected population through psychological wellbeing and access to protection support services including child protection and SGBV support.</p> <p>3. Health/ COVID-19: Improved healthy practices and access to health services through provision of health care service and referrals for affected persons.</p> <p>4. ER/Livelihood: Increased satisfaction of basic needs arising due to COVID-19 and its impacts, increased resilience through access to employment through technical, vocational and entrepreneurship support and business start-up support for vulnerable individuals' females in affected communities.</p> <p>5. Education: Increased access to education through provision of tuition support for targeted students.</p> <p>6. Shelter/NFI: Increased support to vulnerable families in meeting their basic needs through provision of vouchers</p>																																

Target beneficiaries	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										
Age / Gender										
0 - 5 yrs		6 - 18 yrs		19 - 65 yrs		above 65 yrs		Total		
M	F	M	F	M	F	M	F	M	F	
2501	3441	3314	6461	7351	14790	1255	3353	14,421	28,045	
<p>No. of households (based on average HH size of 6¹) ACT members ensure that the programs not only address the specific needs of the most vulnerable but also that programs are delivered and provided in a way that is accessible.</p> <p>ACT members are committed to working with the most vulnerable beneficiaries, including both refugees (Syrian and non-Syrian, such as Iraqi, Sudanese, and Somali) and members of host communities. Members determine vulnerability criteria based on the needs specific activities address and that are in-line with each organization’s internal vulnerability in criteria. In Jordan, some members use components of UNHCR’s Vulnerability Assessment Framework (VAF) to determine vulnerability.</p> <p>In this appeal, ACT member select beneficiaries through a selection criterion that includes one or more of the following: Female-headed households, Single women, Households with individuals with disabilities, Households with members with chronic illnesses, Households with injured members, Households with no or low income, PWD and Elderly</p>										
Project Cost (USD)	1,849,233 USD									

Reporting Schedule

Type of Report	Due date
Situation report	30 June 2021 <i>Then Quarterly from 1st SitRep</i>
Mid-term Narrative and Financial report	30 January 2022
Final narrative and financial report (60 days after the ending date)	28 February 2023
Audit report (90 days after the ending date)	Year 1: 31 March 2022 Year 2: 31 March 2023

* Note:

Interim narrative and Financial reports and audit should be sent to ACT Secretariat 1 week before the due date. SitReps should be sent to ACT Secretariat 2 days before the due date.

¹ The ACT Jordan Forum agreed on 6 people per HH according to UNHCR standards.

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 - 240-32629.50Z
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 <http://reports.actalliance.org/>, Appeal Code: JOR211. The ACT spreadsheet provides an overview of existing pledges/contributions and associated earmarking for the appeal.

Please inform the Head of Humanitarian Affairs , Alwynn Javier (alwynn.javier@actalliance.org) and Finance Officer, Marjorie Schmidt (Marjorie.Schmidt@actalliance.org) with a copy to the Regional Representative, Rachel Luce (Rachel.Luce@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 back donor and other funding, and the subsequent results. We thank you in advance for your kind cooperation.

For further information please contact:

Forum Convener, Fares Swais (farisrswais@gmail.com)

ACT MENA Regional Representative, Rachel Luce: (Rachel.Luce@actalliance.org)

ACT MENA Humanitarian Advisor, George Majaj: (George.Majaj@actalliance.org)

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

Alwynn Javier

Head of Humanitarian Affairs
ACT Alliance Secretariat- Geneva

1. BACKGROUND

1.1. Context

Jordan is home to over 660,000 Syrian refugees officially registered by UNHCR, unofficially it is estimated that 1.3 million Syrian refugees live in Jordan today and the total population in Jordan is almost 10 million. Since 2015, the Syria Refugee and Resilience Response Plan (3RP) has been a key expression of the international community's support to national efforts to deal with the impact of the crisis. In 2018, 3RP partners ensured that more than 1.3 million children were enrolled in formal education, and provided food and other basic assistance to more than 2 million people. To promote self-reliance and resilience, 3RP partners supported more than 130,000 people with access to employment opportunities, while also working directly to strengthen the capacities of national and local systems in areas such as protection, health, education, and social assistance. Inter-agency efforts continued throughout 2019, however, the needs of Syrians and communities hosting them in the region remain enormous. In 2020, 3RP partners will continue to work to ensure that people have the protection they need, promote durable solutions, help vulnerable people lead dignified lives, and strengthen national and local capacities to deliver quality services for all, now and in the future. In doing so, the 3RP will play its part in advancing the Global Compact for Refugees and contributing to implementation of the Sustainable Development Goals in a way that leaves no one behind².

According to UNICEF, 86% of Syrian refugees outside camps in Jordan live below the poverty line. Most Syrian families rely on humanitarian assistance to meet their basic needs at a time of aid cuts and economic downturn compounded by the coronavirus pandemic. The total number of positive tested people in the country are 227,208 with 2,854 associated deaths (Ministry of Health December 02, 2020). Since the beginning of lockdown on March 21, daily wage workers had lost their source of income and micro and small businesses stopped their operations. The domestic lockdowns, the global economic slowdown, trade disruptions, and the suspension of international travel are likely to have a sizable impact on the Jordanian economy. The unprecedented economic shock of COVID-19 has exacerbated existing structural weaknesses in the economy and unresolved social challenges and put pressure on country's fragile macroeconomic stance. Key challenges to Jordan's outlook include the prolonged decline in economic activity from domestic lockdowns. The speed of economic recovery in the medium-term largely depends on the evolution of the pandemic³.

According to the COVID-19 Labour Market Impact Monitoring in Jordan (carried out by NRC in the beginning of April 2020), 66% of Syrian and Jordanian respondents state to have lost their total household income as a result of the restrictions imposed due to COVID-19. Women (especially from FHH) are first to lose their jobs, as most of them work in informal sectors and due to quarantine policies lose their income putting the whole family at risk of malnutrition and gender related risks and vulnerabilities, leading to critical coping mechanisms.

While poverty and unemployment rates were already high prior to the onset of COVID-19, Syrian refugees and vulnerable Jordanians face even greater challenges in earning a livelihood, covering basic needs such as food, protection and accessing key services as healthcare.

1.2. Needs

The Jordanian Government's response to the crisis has been backed by national and international agencies, there is growing acknowledgment that current-life saving humanitarian funding and programming should be complemented by an approach to build national resilience and sustain the level and quality of services provided. Due to COVID-19, many refugees and local Jordanian lost their jobs. This had impact on lack of food and make a high pressure on the families in Jordan, and many of the host communities lost their jobs so we need the help to these most vulnerable families. Lockdown

² UN OCHA Global Humanitarian overview https://www.unocha.org/sites/unocha/files/GHO-2020_v9.1.pdf

³ World Bank Oct 2020 <https://www.worldbank.org/en/country/jordan/overview>

measures and economic impact of this crisis are very likely to increase stress and psychological pressure within families and to put women and girls in precarious situation for an increase of Domestic Violence (which is now recorded globally) and other forms of Gender Based Violence within the family, communities, and camps. This is also in line with the outcomes of the rapid assessment conducted by LWF in April 2020. Refugees are facing trauma, depression and stress over providing for their families, and battling isolation and loneliness. Recent study conducted by Caritas Jordan in April 2020 has found out that 90% of respondents are reporting that no one in their family has worked since the start of the lockdown. The same study showed that the majority of respondents (both refugees and Jordanians) reported food (83%), debt repayment (48%), utilities and health services (34%) as their most urgent needs.⁴

GoJ, which is coordinating COVID-19 support measures in Jordan, has only committed to support Jordanians, but not Syrian or other refugees- leaving refugee support to the (UN) organizations. A research conducted by DSPR highlights the needs of food and non-food items, in addition capacity in managing health problems and knowledge in nutrition management. Latter a need raised by the research to address Sexual and Gender Based Violence (SGBV), early marriage and other protection issues.

ACT Jordan Forum members have identified food, non-food items, health and protection as high-impact, priority areas for intervention.

1.3. Capacity to respond

The ACT Jordan forum was established early 2020 but builds on a strong infrastructure as it was previous the ACT JSL Forum for 8 years. The members build on decades of experiences in Jordan in providing humanitarian response to all people in need. ACT members participate in the UN-led working groups and/or cluster meetings, such as WASH, Food Security, Health, Protection, Livelihood and Basic Needs and have developed Memorandums of Understanding (MoUs) with various local and international actors. Members are also part in global platforms such as the global Food Security Cluster and Mukwege Foundation. ACT Members also bring technical expertise in programmatic areas, such as social cohesion, health and protection, livelihoods, providing cash assistance and basic needs. The ACT members provide capacity building support to local implementing partners, including faith-based, to enhance the integration of international standards and implementation in programming. In response to COVID-19, the members are providing hygiene kits, health service, economic support and PSS services to refugees and vulnerable Jordanians. Current ACT appeal is supporting LWF's operations in Zaatari Camp. LWF will target the same beneficiaries, pending assessment, with covid-19 appeal support which will provide a holistic protection approach for households, including the impact of COVID-19 on beneficiaries.

The ACT members are present in all areas of Jordan but strongest presence in north and central Jordan. The members receive funding from Ministries of Foreign Affairs, EU, US government, UN agencies and private donations. The combined resources and geographic reach of ACT members, demonstrate the capacity reaching people in need through different sectorial approaches.

1.4. Core Faith values

ACT Alliance is faith-motivated, rights-based, impact-focused partnership; committed to working ecumenically and inter-religiously, with the communities we seek to serve and accompany at the center of our work. Through its global strategy ACT provides a framework for how we can respond to these issues in a way that fosters a just, peaceful and inclusive world and is true to our Christian values.

⁴ Source: RAPID ASSESSMENT FOR CASH FEASIBILITY, Jordan, April 2020, Caritas Jordan

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

2.1. Intervention strategy and theory of change

The JOR211 appeal is a continuation of previous ACT Emergency appeal response and is a joint, multi-faceted appeal that is primarily self-implemented by ACT members and in some cases through local partners in Jordan. The appeal maintains a strong focus on supporting the most vulnerable communities and protect the rights of all and addresses the protection and assistance needs of refugees living in camps, in non-formal settlements and within and among local host communities. Through a comprehensive and holistic implementation strategy, the appeal continues to address the most pressing basic needs of the health, food security, protection and livelihood sectors to enhance the ability of affected populations to cope and live a life with dignity, while adding a more sustainable approach to resilience and capacity development.

2.2. Impact

The impact of the project is to alleviate suffering and build resilience for the most vulnerable host communities and refugees affected by the Syria Crisis and COVID-19 Impacts.

2.3. Outcomes

ACT members will work across key sectors to support the most vulnerable populations impacted by the ongoing crisis in Syria. All interventions are participatory and inclusive. With a focus on strengthening local community-based organizations (CBOs), ACT members will support local partners and member churches to better respond to the needs of vulnerable individuals affected by the crisis. This will be achieved through trainings and workshops focusing on the Core Humanitarian Standards (CHS) and how to apply them. Key sectors (outcomes) that ACT Jordan members will focus on are: NFI's, Food Security, Health, Protection, Early recovery and livelihoods (ERL).

Outcome 1. Food Security: Improved accessibility to quality food and nutrition and enhanced nutrition practices for affected persons through vouchers, kits distribution and awareness raising.

Indicator: # of individuals affected by Syrian crisis and COVID- 19 pandemic reached with food parcels/packages with special focus on sick people, persons with disabilities, children, elderly.

Outcome 2. MHPSS/Protection: Improved resilience of affected population through psychological wellbeing and access to protection support services including child protection and SGBV support.

Indicator: % of protection cases (70% women and children) addressed/ managed or referred and receive appropriate legal, medical or psychosocial support services report improved PS status and have are able to cope better.

Outcome 3. Health/ COVID -19: Improved healthy practices and access to health services through provision of health care service and referrals for affected persons

Indicator: # of individuals affected by the crisis receive health care services and awareness raising and maintain good health.

Outcome 4. ER/Livelihood Increased satisfaction of basic needs arising due to COVID-19 and its impacts, increased resilience through access to employment through technical, vocational and entrepreneurship support and business start-up support for vulnerable individuals' females in affected communities.

Indicator: % of vulnerable women have access to provisions of livelihood and start income generation.

Outcome 5. Education Increased access to education through provision of tuition support for targeted students.

Indicator: # of school students received cash for tuition fee and are able to continue education.

Outcome 6. Shelter/NFI Increased support to vulnerable families in meeting their basic needs through provision of vouchers.

Indicator: # HH received clothes vouchers.

2.4. Outputs

Output 1. Food Security: 2,440 HH have access to food packages/ quality food items

Indicators:

- 2,040 HH received food kits/packages.
- 400 HH received food vouchers.

Activities:

- Distribution of food parcel to 2,040 HH.
- Distribution of food vouchers to 400 HH every 4 months.

Budget: 320,916\$

Output 2. MHPSS/Protection:

2.1: 7,840 people have access to MHPSS services, including GBV survivors and improve resilience and coping mechanism.

2.2: 480 Refugees have greater access to social protection including basic services.

Indicators:

- 5,520 people receive psychosocial support assistance services.
- 400 people referred and benefited from appropriate medical or specialized psychosocial support assistance services.
- 4,080 vulnerable Syrian and Jordanian children and adults attend structured and unstructured psychosocial counselling sessions and children forums are more resilient.
- 960 women who received training and support through GBV sessions and are able to better cope and report any abuse.
- # and % of beneficiaries who report that they have accessed services and support they previously did not have access to.
- # Women refugees take leadership in community-based protection initiatives
-

Activities:

- Conduct MHPSS trainings
- Refer to psychosocial support assistance services.
- Provide structured and unstructured PSS sessions and counselling.
- Conduct case management sessions to identify families who are subject to GBV/SGBV.
- Conduct internal and external referrals depending on the needs of the individuals in the Community Center.
- Participate in the global 16 Days of Activism against GBV for 2 years
- Distribute IEC materials and establish hotlines and help desks to provide information about available services, referrals; and Community Navigators to support refugees navigate processes.
- Conduct 6 community initiatives for women empowerment.

Budget: 404,647 \$

Output 3. Health/COVID-19:

3.1: 2,000 HH have access to hygiene products and better knowledge of prevention of Covid-19 spread.

3.2: 3,640 of people received health care services and medicine.

3.3: 400 HH have access to hygiene vouchers.

Indicators:

- 2,000 of vulnerable HH receive hygiene kits including COVID-19 materials and PPE equipment and report improved knowledge.

- 3,640 of people received health care service and medicine.
- 2,500 of people referred to health care service.

Activities:

- Conduct assessment to identify and select beneficiaries.
- Distribute every 4 months hygiene kits and once per year awareness material to HH.
- Identify and map health care service.
- Refer individuals to health care assistance.
- Distribute twice per year medicine to people with chronic disease.
- Distribute every 3 months hygiene (COVID-19) vouchers to HH.
- Awareness raising activities
- Conduct post distribution monitoring.

Budget: 254,646\$

Output 4. ER/Livelihood: 1,310 women economically empowered through entrepreneurship training.

Indicator:

- % of empowered women who received different training and support report generation income and are more resilient.

Activities:

- Conduct assessment to identify and select beneficiaries.
- Conduct ToT for volunteers on Livelihood.
- Conduct the entrepreneurship Start Your Business training.
- Conduct the vocational training on production kitchen.
- Provide provision of financial support/ start up kits.

Budget: 95,880\$

Output 5. Education: 20 at risk drop out students supported through conditional cash.

Indicator:

- 20 of students received conditional cash for payment of school fee.

Activities:

- Conduct assessment to identify and select beneficiaries.
- Distribute conditional cash for payment of school fees to 20 students.
- Conduct post-cash distribution monitoring visits to assess the use and impact of the cash distribution.

Budget: 11,280\$

Output 6. Shelter/NFI: 400HH supported through distribution of clothes vouchers.

Indicator:

- 400 of vulnerable HH receive clothes vouchers.

Activities:

- Conduct assessment to identify and select beneficiaries.
- Distribution of clothes vouchers twice per year.
- Conduct post distribution monitoring.

Budget: 90,240\$

2.5. Preconditions / Assumptions

No restrictions and timely project approvals from the government in Jordan to reach the target groups. Furthermore, we assume the security and the political context remains stable. Due to the critical COVID situation it is necessary to have remote and online options planned as access and personal interactions are restricted.

2.6. Risk Analysis

The number of refugees in Jordan is unlikely to increase due to restrictive entrance policies and/or closed borders. In Jordan the political situation is well-controlled with limited chances of any major changes that will affect the project implementation or policies towards refugees.

ACT Jordan members will coordinate its activities with UN agencies and international and national non-governmental organization where appropriate, in line with the host governments' policies and the 3RPs. Through these mechanisms, ACT Jordan members regularly updates the government authorities and relevant ministries of planned projects.

Delays in the commitment of funding to the project may hinder implementation, as such, ACT members will endeavor to complete essential paperwork ahead of time to ensure that as soon as funds are received implementation may begin.

ACT member's protection strategy includes technical solutions preventing untargeted, non-deliberate hazards (i.e. accidents), as well as decreasing the likelihood of targeted risks by reducing opportunity. ACT Jordan members adhere to a diplomatic deterrence policy. All crimes committed against ACT members or beneficiaries during the project will be reported to the police or the correlating government branch, or if more appropriate, ACT members will work with local community structures to solve issues.

2.7. Sustainability / Exit strategy

The main focus of this Appeal is on building resilience of affected communities, investing in local capacities increases the sustainability and expedites the departure of INGOs. ACT members commit to this strategy and provide guidance to partner organizations through managerial and administrative support. By working alongside and building the capacity of local communities and CBOs, ACT members ensure greater sustainability of projects. Once the projects end (or should international funding decline), these organizations are well positioned to continue supporting vulnerable peoples. Additionally, by utilizing their network of volunteers and local knowledge, ACT members are able to maximize the intended outcomes of the proposed project. Throughout the Appeal, ACT members will continue to identify ways to ensure program sustainability. The transition of specific project activities will be carried out gradually as local capacities are strengthened.

Moreover, coordination with municipalities, line ministries, primary health centers and other local stakeholders is done throughout the project and when needed a MoU is signed with a specific stakeholder to clarify responsibility and develop an agreed common exit strategy or handover.

2.8. Building capacity of national members

ACT member activities are often implemented through local CBOs to ensure that they are building local capacity and promoting sustainability of activities and the resilience of affected populations. The ACT members of the appeal will build technical capacity the national members ELCJHL and MECC who joined the appeal for the 1st time in Jordan. Both ELCJHL and MECC has strong expertise serving the community and wide networks in the local community and entities. The ACT members will build capacity supporting in conducting assessments, reporting, complaints response mechanism and the PCM.

3. PROJECT IMPLEMENTATION

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

ACT Jordan Forum members adhere to ACT Alliance Child Safeguarding Policy. In 2017, ACT Forum members participated in an online Child Safeguarding webinar and also child protection and gender trainings. ACT Member staff and volunteers who work closely with beneficiaries in the field are trained on child protection. Everyone who represents any of ACT's organization in the presence of children is

trained to behave appropriately toward children and respond swiftly and productively to issues of child abuse or sexual exploitation. All activities are assessed for potential risk and mitigation strategies are developed, ensuring that not only are individual children protected, but that the organizations are inherently child safe. Many ACT member staff also completed an online training on prevention of SGBV. Members' work in the field is closely monitored by management to ensure that staff, volunteers, and others who visit ACT member projects behave appropriately toward children and never abuse the position of trust that comes with affiliation with ACT Alliance. The ACT Jordan Forum aims to create a child-safe environment in all of its work by assessing and reducing potential risks to children. In case that any incident was to occur, all ACT members have a complaint response mechanism in place to address beneficiary feedback, including addressing reports of child safeguarding incidents and other forms of exploitation and violence. The feedback is addressed as soon as it is received and are knowledgeable of referral pathways to help populations in need receive the support and assistance required. Throughout all its programming and implementation, the member integrate its Child Protection Policy and uses a gender and age marker. The members use a targeted gender- and age-sensitive approach to address the specific risks affecting the different target groups, in particular in relation to gender-based violence.

3.1. ACT Code of Conduct

ACT members are committed to guard against the abuse of power by those responsible for protection of and assistance to vulnerable communities. Especially in humanitarian crises, the dependency of affected populations on humanitarian agencies for their basic needs creates a particular ethical responsibility and duty of care on the part of ACT members and their staff and volunteers. Therefore, ACT members have a responsibility to ensure that all staff and volunteers are aware of this code of conduct, sign it, and understand what it means in concrete behavioral terms. ACT members also ensure that there are proper mechanisms in place to prevent and respond to sexual exploitation and abuse. ACT member staff, volunteers, and visitors are expected to sign and adhere to the ACT Code of Conduct. During orientation, staff and volunteers receive the ACT Code of Conduct in English and Arabic to review and sign, ensuring that all understand the code's contents and are aware of related expectations as a result of the code. In case any incident occurs, a complaints response mechanism is in place to address beneficiary feedback, including addressing violations of the ACT Code of Conduct. Disciplinary measures are in place to address a staff member or volunteer who violates the Code of Conduct. In addition, ACT members in Jordan are part of the Prevention of Sexual Exploitation and Assault (PSEA) Network. ACT members will continue to ensure that the principles of the Code of Conduct are incorporated into planning and implementation of activities under the Appeal. Moreover, the ACT Code of Conduct will be communicated to the beneficiaries and that they will be made aware of the complaint mechanisms available for their use.

3.2. Implementation Approach

ACT Jordan forum members actively coordinate with key government ministries, where necessary for approval and implementation of activities.

ACT Jordan forum members proposed activities include multiple modalities of implementation, including direct provision of items (such as food parcels, medications for chronically ill, hygiene kits and cloth vouchers), distribution of cash (conditional), early recovery/livelihood (entrepreneurship training) and responding to the psychosocial needs through providing protection services. The mix of activities and modalities that ACT Jordan forum members ensure that all targeted populations have access to the necessary assistance and services as well the members apply a gender sensitive approach to address risks on women.

For distributions, ACT members plan to directly implement proposed activities in coordination with a team of volunteers, as well as a network of trusted CBOs in targeted areas. CBOs will be utilized as distribution locations, support in identification of vulnerable households in their areas, and serve as central location in targeted communities.

Community structures will be enhanced to enable ACT members, local CBOs, NGOs and churches to better respond to the needs of vulnerable individuals affected by the crisis.

The Graduation of poverty program will focus on livelihoods, while integrating refugee empowerment and protection, in order to enhance the self-reliance and living conditions of Syrian refugees, and prospects for temporary local integration. The program will position refugees - particularly women and people with a disability - as the main actors in their own protection interventions with tailored program supports enabling refugees to take up leadership and meaningfully participate in the program.

The project activities will employ a 'graduation out of poverty' approach including asset, and cash transfers as an interim measure, savings support (financial literacy and savings and loans schemes), technical and entrepreneurial skills training for livelihoods, and a package of Community-based Protection (CbP) support and mentorship provided through the CbP Self-Help Groups (CbPSHG) to ensure participants also have referrals, advice and support regarding how to access their rights to health care (physical and psychological), access to education for their children, work permits, and advice on how to avoid forced evictions. Accordingly, 70% of the beneficiary group of the proposed program would be the most vulnerable Syrian refugees residing in three urban areas populated by displaced persons and host community members, and will be identified and monitored using the Self Reliance Index (SRI). To foster community stability and integration, 30% of beneficiaries will be 'host community' members.

3.3. Project Stakeholders

The ACT members employ an acceptance strategy, based on the premise of constant interaction with representatives of the population. Members meet with local leaders, local government officials, and country government officials. Regular coordination meetings are held with representatives, and these meetings help to inform and receive vital information in terms of open and ongoing communications with beneficiaries. ACT appeal members also believe in beneficiary led programming, which ensures buy-in from the communities in which members work. Stakeholders include both duty bearers (Ministries, local government, businesses, INGOs) and rights holders (beneficiaries, targeted communities) in both public and private sectors, each meriting a different engagement approach.

3.4. Field Coordination

The proposed response is one of joint programming, each requesting member's sectoral expertise and geographic coverage will be complementary with other requesting members ensuring that the targeted affected population's needs are covered.

Through strong coordination with INGO/NGO forums and sector cluster workings groups Jordan working group members are well-informed and prepared to continue their humanitarian response in key priority areas (cash assistance, health and nutrition, food security, livelihoods and protection/psychosocial). ACT members, together with other humanitarian actors, participate regularly in vulnerability assessments, data gathering, and focus group discussions for various sector related programming to adapt to best practices, changing regulations and security situations to ensure a timely and coordinated response. Through regular contact with the relevant working groups in order to avoid duplication of activities, coordinate with other actors, and keep up to date on the most current, relevant issues and developments within the different sectors.

ACT members are active in all of the UN-led sectorial working groups, ensuring continuous coordination and collaboration with the UN agencies and other INGOs. In addition, this appeal took into consideration the Regional Refugee and Resilience Plan (3RP) the key planning instrument led by UNHCR and UNDP at regional level. ACT members work with the Jordan Hashemite Charity Organization (JHCO) for coordination of distribution in host communities.

National and regional coordination meetings amongst Forum members will not only ensure that there are no gaps and duplications in service provision for the targeted affected population, but will also create a space where members will share experiences and draw lessons learned to improve programming in real time. Each requesting member is responsible for coordinating with the relevant national line ministries associated with the area in which the member is working. Further a Forum Coordinator will follow up with reporting time line, support in consolidation of the reports, in materials for visibility and in monitoring the appeal activities.

3.5. Project Management

Each member of the ACT Jordan working group is responsible for the implementation of the activities as laid out in their individual log frames and proposals; abiding by their internal rules and regulations concerning the Project Management Cycle.

The Appeal Jordan Working Group is responsible to ensure that communication regarding programmatic challenges and changes and any necessary information that may impact the program is shared in a timely manner. The ACT appeal Jordan working group chair is responsible to ensure that regular narrative and financial reports are submitted in good quality and with accurate, relevant information.

Forum Coordinator will support Appeal implementation and coordinate the collaboration, reporting and learning processes of all requesting members, and act as a focal point with ACT secretariat for the appeal implementation.

3.6. Implementing Partners

Most of the ACT members' self-implement. Some activities are implemented in coordination with a network of CBOs and volunteer teams throughout Jordan. When project activities are implemented with a CBO, a MoU will be signed by the two parties to outline responsibilities of each and organization's expectations. CBOs will be utilized as distribution locations, sites for community awareness sessions, and to provide support in identification of vulnerable households in their areas.

3.7. Project Advocacy

Due to the sensitive nature of the crisis, advocacy efforts will prioritize the safety of beneficiaries and staff at all times. Members are involved in advocacy on multiple levels, both locally in countries of operation, and from their organizational headquarters on a more global scale.

ACT Jordan Forum members host ACT Alliance members visiting the countries of this response, as well as international government and church representatives, to raise awareness of the nature and scale of the humanitarian crisis in Syria and the neighboring host countries. ACT members work in close coordination with a broad range of different actors for advocacy purposes such as clusters, the government, local CBOs and international NGO forums that specialize on advocacy.

3.8. Engaging faith leaders

When entering to any community -new or old- coordination and cooperation is being set with key stakeholders, which often include church leaders or church related organizations or groups. ACT members have extensive experience in working with church leaders; showing great impact in facilitating the work, conducting planned activities and coordination. In line with local customs and traditions, the involvement of Sheiks and Mokhtars is often invaluable for local buy-in and facilitate the selection of the most vulnerable beneficiaries.

Insert Simplified Work Plan

Sector	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
DSPR																								
Food Security	█	█				█				█				█				█				█	█	
Health and Covid -19			█	█	█	█	█	█						█	█	█	█	█	█				█	█
Protection			█	█	█	█	█			█	█			█	█	█	█	█		█	█			
ER/Livelihood			█	█	█	█	█			█	█	█					█	█	█	█	█	█		
MECC																								
Food Security	█	█				█				█				█				█				█	█	
Health and Covid -19	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
LWF																								
Protection	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█
ELCJHL																								
Food Security	█	█				█				█	█			█				█				█	█	
Health and Covid -19				█							█					█								█
Education									█													█		

4. PROJECT MONITORING

4.1. Project Monitoring

The ACT forum members will put significant emphasis on M&E to ensure that activities lead to tangible improvement in the lives of beneficiaries. A monitoring plan and monthly indicator tracking table will be in place to support the M&E of project activities. All data is disaggregated by nationality, sex, age, disability, and location. Monitoring, evaluation, and learning will be led by member focal points who coordinates and shares feedback with requesting member management. In particular, the members will utilize post distribution monitoring (PDM) following all distributions to ensure that beneficiaries received the assistance needed and can provide feedback. Focus group discussions (FGDs) are planned with beneficiaries and collect feedback to ensure the project is going as planned and identify lessons to guide implementation. The members also share information with beneficiaries on complaints response mechanisms (CRMs) and take immediate action to address urgent issues, as and if needed. Requesting members will ensure that local partners have the necessary mechanisms in place to receive beneficiary feedback. The procedure for complaints will be reviewed regularly to ensure and incorporate learning and improvement towards ACT member accountability. Members will refer cases to other service providers, as needed, and work to address protection concerns or other forms of exploitation and violence, as and if identified ACT members commit to addressing all issues of sexual exploitation, abuse of power, corruption and breach of the ACT member policies and standards. One of the lessons learnt is the community-centered approach for building trust with refugees, host community and local leadership. To improve its protection work in targeted communities and ensure long-term sustainability, the members must work towards building management capacities of local NGOs and Jordanians and Syrians groups to run their own community centers in the future.

For this project a M&E plan in place to track project performance, identify results and learnings associated with the projects and address potential delays at an early stage.

The members will also ensure that they utilize UNHCR’s ActivityInfo and Refugee Assistance Information System (RAIS) and direct coordination with other actors working in the same area to avoid duplication of activities to the same populations.

The members will provide regular situation reports, narrative and financial reports consolidated by the forum to ACT secretariat regional office. Financial monitoring will be done by the Finance Manager; in the end of each year each member will provide a financial audit through an internationally recognized auditing firm.

The forum hope to engage a coordinator, who will be responsible for the overall monitoring and reporting of the appeal. ACT Secretariat will also take part in monitoring by conducting a joint monitoring visit if possible and if the situation allows. ACT will coordinate within the forum and involved members to decide the best way to do a monitoring trip. ACT Secretariat will also provide the needed support for members during implementation and will be discuss best way to have remote monitoring as needed.

4.2. Safety and Security plans

As ACT member activities take place in settings that are politically sensitive, security assessments take place on a regular basis. Each member has their own security plan, and daily monitoring of the current environment is used to inform and update the security situation and any impacts it may have on programming. ACT members are in regular coordination and communication with one another and with relevant actors to provide better and timely safety and security for staff and beneficiaries.

All ACT member's staff are required to be familiar with and sign their respective country office security plan, as well as receive training on the organization-wide safety and security principles. Project planning and implementation take into consideration the safety of beneficiaries, particularly ensuring that activities do not exacerbate tensions between Syrian refugees and host community members. Cash-related activities have unique security-related concerns, members understand these risks and has taken them into account when designing distributions.

In case of increased security risk or security incidents, ACT members will act according to the guidelines indicated in its security manual to protect both staff and beneficiaries. While closely monitoring the situation on the ground and coordinating with other humanitarian actors, communication with staff in all project locations is carried out regularly, and security information is shared with staff accordingly.

ACT Jordan Forum members will follow the government requirements when it comes to the COVID related security as well as recommendations by WHO to ensure safety of the staff. The Forum has developed a COVID -19 contingency plan. ACT members aim to benefit refugees and host community by the response with a focus on vulnerable groups. This will be done while increasing the protection measures taken by each organization to ensure safety of their teams. The security and safety plan agreed in the contingency plan includes observing the situation and keeping the staff on standby to respond and address needs as quickly and safely as possible. In case the COVID situation develops more restrictions the respective regional and humanitarian division representatives will be informed to hold an alert meeting at country level. Upon the meeting an alert note will be developed and the contingency plan will be activated. All partners will be alerted about the early warning signals and preventive measures.

4.3. Knowledge Management

ACT members are committed to ensure high standards of project implementation. This involves proactively sharing learnings with member organizations and putting these lessons into practice.

Through the ACT Forums, ACT members have established an Appeal Working Group in order to encourage greater cooperation and cohesion between members and discuss various issues arising from programmatic implementation. It is anticipated that this will involve shared research, best practices, sharing of tools and resources, common pool of expertise, evaluations and workshops to enable quality programming.

In addition to submitting regular narrative and financial reporting requirements to ACT Alliance and back donors on project progress, challenges, and plans, ACT members will also coordinate with various

UNHCR-led working groups and task forces to share project progress and learnings. Members will also share key information in a mid-term review of the appeal to track progress and respond to potential challenges to ensure smooth programming.

The implementing members will be responsible for collecting case studies, stories depicting good practices at least on a quarterly basis. The significant stories of change will be a basis for replication or upscaling of best practices within the project. The knowledge products will be turned into materials that can be used for providing updates to stakeholders (e.g. SitReps), continuing fundraising, communication to various audiences, and reporting to donors and constituents.

An internal midterm evaluation/ peer review is also planned towards the end on year 1 of the appeal, this should evaluate the progress and inform members of any challenges or need for revisions

5. PROJECT ACCOUNTABILITY

5.1. *Mainstreaming Cross-Cutting Issues*

In previous responses to the Syria Humanitarian crisis, ACT members have ensured that gender-related issues are addressed in program design, implementation, reporting, and recruitment of staff at both management and field levels. Prioritizing gender analysis as a core element of program design, monitoring, evaluation, and reporting helps ensure that girls and boys, women and men, have equal opportunity to participate in, influence and benefit from the project. Similarly, specific vulnerabilities of women- and elderly-headed households and households with persons with disabilities will be taken into account, as well as the number of individuals who can work per household and their legal status.

In spite of challenges related to different groups' perceptions of gender roles, ACT Members have sought to ensure women's participation by inviting both husbands and wives to consultations and assessments, and by organizing separate discussion groups for women, that are facilitated by women. ACT member's selection of staff is based on qualifications and aims to keep a balance between women and men both at the national office, as well as at the field level.

During the selection of project beneficiaries, ACT members target the most vulnerable among affected and displaced families, including: orphans, widows and divorced women, elderly persons, PWDs, people who have been exposed to traumatic events (e.g. loss of a family member); and unaccompanied children who live with a relative or caregiver. Child protection and wellbeing, inclusion of people with disabilities and gender sensitivity are cross-cutting components that guide the work of ACT and its partner through the programs.

Protection concerns are taken into account by ensuring respect for the rights of vulnerable groups. This includes children, people with special needs, the elderly, and girls and women, in particular those most at risk of abuse and exploitation. All members are committed to strict adherence to the Core Humanitarian Standards, the ACT Alliance Code of Conduct and the Sexual Exploitation and Abuse policy. With respect to any activities or affected persons, ACT members do not discriminate based on ethnic, religious or political backgrounds of the populations served. In order to reduce the potential for harm, members emphasize cooperation and consultation with local organizations and volunteers.

5.1.1. *Resilience Marker*

ACT members consider their beneficiaries as active participants in project implementation whether serving as volunteers or participating in focus group discussions on project development and implementation. The active participation of affected populations in all stages of activity planning and

implementation is prioritized in the knowledge that ownership of their own development goals increases resilience and enhances the sustainability.

5.1.2. Participation

ACT members see the people we serve both as individuals in their own right and as participating members of families, groups, and communities and encourage community participation and supports the development of local networks and structures as a pathway to strengthening local civil society. LWF strongly believe that beneficiaries are not objects of charity but, in fact, are rights holders and this is reflected in the participatory and rights based approach in programming.

Feedback is gathered throughout implementation from beneficiaries to ensure that activities meet needs and adjustments are made, as needed. LWF has also included a Cash for Work component in the invention logic, to guarantee the dignified participation of the vulnerable project communities, focusing on their capacities while addressing their needs.

5.2. Conflict sensitivity / do no harm

ACT members provide independent, neutral humanitarian assistance and social cohesion events, which attempts to reduce tensions among the beneficiaries' community. ACT Jordan Forum members are committed to, and employ a "Do No Harm" approach and mainstream protection throughout all of their work. The "DO No Harm" approach will focus on building resilience within the communities and constant relationship building with community leaders, local municipalities, and religious and secular organizations. This ensures that community relations are not harmed and the most vulnerable and in need are targeted. Protection principles such as child protection and child safeguarding are upheld in the projects. With respect to psychosocial programming, ACT Jordan Forum members ensure that any material developed and used include the beneficiaries' opinions and feedback to reflect and build on their personal experiences and develop appropriate and culturally sensitive material for different age groups.

Many ACT Jordan Forum members use the modality cash-based intervention to support local economies and upon the Covid- 19 pandemic. When goods are purchased elsewhere and brought into a local community, the economy is not stimulated and local shop owners lose out on opportunities for income.

5.3. Complaints mechanism + feedback

The core values of the ACT Jordan Forum members are deeply rooted in dignity, justice, compassion, commitment, diversity, inclusiveness, participation, transparency, and accountability. Resources and responsibilities for decision-making are to be used in ways that are mutually transparent and answerable to all stakeholders and beneficiaries.

ACT Jordan Forum members are working towards establishing local and where appropriate global complaints mechanisms to encourage feedback about its work from all its stakeholders. MECC included the development of their organizational CRM in this Appeal. ACT Jordan Forum members shall respond in a timely and appropriate manner through established mechanisms. Many of the ACT Jordan Forum members have already established a complaints and feedback mechanism and can share the knowledge and experience with other ACT Jordan Forum members. As a joint program, members are able to cooperate and share resources on a platform that benefits not only the ACT Jordan Forum members but also ensures that the projects and the beneficiaries are aware of the tools in place, have access to and feel safe to voice their concerns (with an option for this feedback to be anonymous). Using multiple modalities, (phone hotline, email address, physical feedback boxes at centers, complaints focal persons

assigned) members aim to ensure that affected populations have access to the mechanisms. Appropriate cultural and local practices are respected and taken into consideration in handling and responding to complaints and feedback. These are monitored, checked, and tracked by member focal points who coordinates and shares feedback with requesting member management. The complaints response mechanisms are in place to address beneficiary feedback on project initiatives, refer cases in need to other projects or service providers, and address protection concerns and other forms of exploitation and violence. During distributions, members can provide a handout that includes information in Arabic on how to access the complaints response mechanisms to ensure that all beneficiaries and other affected populations are aware of where and how to submit feedback. ACT Jordan members are additionally committed to international humanitarian standards and accountability mechanisms, such as Core Humanitarian Standards (CHS) and the Sphere Handbook.

5.4. *Communication and visibility*

ACT Jordan Forum members will continue to work on ways of promoting the ACT Alliance identity during implementation of the project. ACT Jordan Forum members acknowledge the source of funding whenever possible for any and all projects funded by the ACT Alliance. The members will share information about project implementation with ACT and donors through reports and beneficiary stories. At project sites in the host community and camps, staff and volunteers wear vests and IDs identify ACT Alliance. Banners with the ACT Alliance and relevant project information are used at the project sites and at all events to acknowledge ACT Alliance support and increase transparency about the activities ACT Alliance's support will be acknowledged verbally during community events and/or during media campaigns. Further social media as Facebook and Instagram will serve as platforms of sharing information. However, a low visibility strategy will be respected when required by the sensitivity of the issue.

6. PROJECT FINANCE

6.1. *Consolidated Budget*

EXPENDITURE		Appeal Budget JOD	Appeal Budget USD
DIRECT COSTS			
1 PROGRAM STAFF			
Appeal Lead		28,800	40,608.00
Total international program staff		0	0.00
Total national program staff		168,707	237,876.59
TOTAL PROGRAM STAFF		197,507	278,485
2 PROGRAM ACTIVITIES			
2.1. Shelter and settlement / Non-food items		64,000	90,240.00
2.2. Food security		227,600	320,916.00
2.3. Water, sanitation & hygiene (WASH)		0	0.00
2.4. Health / COVID-19		180,600	254,646.00
2.5. Protection / Psychosocial support		286,984	404,647.44
2.6. Early recovery & livelihood restoration		68,000	95,880.00
2.7. Education		8,000	11,280.00
2.8. Emergency Preparedness / Resilience		0	0.00
2.9. Unconditional CASH grants		0	0.00
2.10. Camp Management		0	0.00
TOTAL PROGRAM ACTIVITIES		835,184	1,177,609
3 PROGRAM IMPLEMENTATION			
TOTAL PROGRAM IMPLEMENTATION		32,260	45,487
4 PROGRAM LOGISTICS			
Transport (of relief materials)		22,541	31,782.53
Warehousing		0	0.00
Handling		18,720	26,395.20
TOTAL PROGRAM LOGISTICS		42,261	59,588
5 PROGRAM ASSETS & EQUIPMENT			
TOTAL PROGRAM ASSETS & EQUIPMENT		2,840	4,004
6 OTHER PROGRAM COSTS			
6.1. SECURITY			
TOTAL SECURITY		0	0
6.2. FORUM COORDINATION			
TOTAL FORUM COORDINATION		17,900	23,265
6.3. STRENGTHENING CAPACITIES			
TOTAL STRENGTHENING CAPACITIES		4,000	5,640
TOTAL DIRECT COST		1,131,952	1,594,078
INDIRECT COSTS: PERSONNEL, ADMINISTRATION & SUPPORT			
e.g. Staff salaries		111,761	157,583
Office Operations		29,253	41,247
Communications		4,339	6,118
Other		2,208	3,113
TOTAL INDIRECT COST: PERSONNEL, ADMIN. & SUPPORT		142,762	201,294
		11%	11%
TOTAL EXPENDITURE exclusive International Coordination Fee		1,274,713	1,795,372
INTERNATIONAL COORDINATION FEE (ICF) - 3%		38,241.40	53,861.15
TOTAL EXPENDITURE inclusive International Coordination Fee		1,312,954.73	1,849,232.96
BALANCE REQUESTED (minus available income)		1,312,955	1,849,233
	DSPR		810,093
	MECC		542,231
	LWF		464,523
	ELCJHL		32,386
	TOTAL		1,849,233

7. Annexes

- 7.3. ANNEX 3 – Logical Framework (compulsory template)
- 7.7. ANNEX 7 – Summary table (compulsory template)
- 7.8. ANNEX 8 – Budget (compulsory template)
- 7.9. ANNEX 9 – Security Risk Assessment (compulsory template) for level 3 countries

Annex 3 – Logical Framework

Logical Framework			
IMPACT			
To alleviate suffering and build resilience for the most vulnerable host communities and refugees affected by the Syria Crisis and COVID-19 Impacts			
OUTCOME(S)	Objectively verifiable indicators	Source of verification	Assumptions
<p>1. Food Security Improved accessibility to quality food and nutrition and enhanced nutrition practices for affected persons through vouchers, kits distribution and awareness raising.</p>	<ul style="list-style-type: none"> - # of individuals affected by Syrian crisis and COVID- 19 pandemic reached with food parcels/packages with special focus on sick people, persons with disabilities, children, elderly 	<ul style="list-style-type: none"> - Baseline Reports - Beneficiary lists - Distribution lists - Post Distribution monitoring Reports - Monitoring and Evaluation Reports - Photos - Market assessment on affected businesses. - Number of job creation 	<ul style="list-style-type: none"> - Availability of food and supplies in the local market - Containment of COVID-19 pandemic and lack of urgency for long lockdown period and country closure - Local administrative units and other stakeholders are supporting, responding and participating in activities.
<p>2. MHPSS/Protection Improved resilience of affected population through psychological wellbeing and access to protection support services including child protection and SGBV support.</p>	<ul style="list-style-type: none"> - % of protection cases (70% women and children) addressed/ managed or referred and receive appropriate legal, medical or psychosocial support services report improved PS status and have are able to cope better. 		
<p>3. Health/ COVID -19 Improved healthy practices and access to health services through provision of health care service and referrals for affected persons</p>	<ul style="list-style-type: none"> - # of individuals affected by the crisis receive health care services and awareness raising and maintain good health 		

<p>4. ER/Livelihood Increased satisfaction of basic needs arising due to COVID-19 and its impacts, increased resilience through access to employment through vocational and entrepreneurship trainings for vulnerable females in affected communities</p>	<ul style="list-style-type: none"> - % of vulnerable women have access to provisions of livelihood and start income generation. 		
<p>5. Education Increased access to education through financial support for targeted students.</p>	<ul style="list-style-type: none"> - # of students received cash for tuition fee and are able to continue education. 		
<p>6. Shelter/NFI Increased support to vulnerable families in meeting their basic needs through provision of vouchers</p>	<ul style="list-style-type: none"> - # HH received clothes vouchers 		
OUTPUT(S)	Objectively verifiable indicators	Source of verification	Assumptions
<p>1. Food Security 1.1 2,440 HH have increased awareness of nutrition and access to food packages/ quality food items.</p>	<ul style="list-style-type: none"> - # HH received food kits/packages - # HH received food vouchers - # of awareness sessions 	<ul style="list-style-type: none"> - List of beneficiaries - Procurement/receipts - PDM - Signed distribution lists - Procurement documentation 	<ul style="list-style-type: none"> - Food parcels contents meet the needs and demands of refugees - Food materials are available in the market.
<p>2. MHPSS/Protection 2.1 7,840 people, including GBV survivors have access and referred to MHPSS services and improve resilience and coping mechanism.</p>	<p>5,520 people receive psychosocial support assistance services.</p> <ul style="list-style-type: none"> - 400 people referred and benefited from appropriate medical or specialized psychosocial support assistance services. 	<ul style="list-style-type: none"> - Psychologists/social workers monthly reports 	



<p>2.2: 480 Refugees have improved access to social protection including basic services.</p>	<ul style="list-style-type: none"> - 4,080 vulnerable Syrian and Jordanian children and adults attend structured and unstructured psychosocial counselling sessions and children forums are more resilient. - 960 women who received training and support through GBV sessions and are able to better cope and report any abuse. - # and % of beneficiaries who report that they have accessed services and support they previously did not have access to. - # Women refugees take leadership in community-based protection initiatives 		
<p>3. Health/ COVID-19</p> <p>3.1 2400 HH have access to hygiene kits/vouchers and awareness materials on Covid-19 and better knowledge of prevention of Covid-19 spread.</p> <p>3.2 3640 of people received awareness sessions, health care services and medicine.</p>	<ul style="list-style-type: none"> - 2,000 of vulnerable HH receive hygiene kits including COVID-19 materials and PPE equipment and report improved knowledge. - 3,640 of people received health care service and medicine. - 2,500 of people referred to health care service. - # of awareness sessions 	<ul style="list-style-type: none"> - List of beneficiaries - Procurement/receipts - Copy of awareness material - Signed distribution lists - Procurement documentation 	<ul style="list-style-type: none"> - Materials available in the market.

<p>4. ER/Livelihood</p> <p>4.1 1310 women economically increased livelihood opportunities through entrepreneurship and vocational training</p>	<ul style="list-style-type: none"> - % of empowered women who received different training and support report generation income and are more resilient. 	<ul style="list-style-type: none"> - Assessment report is available. - -Data of eligible beneficiaries is in place. - signed contract with beneficiary and signed delivery list of provided equipment. - List of beneficiaries - Photos 	<ul style="list-style-type: none"> - Contractors are available. - Needed equipment and materials are available.
<p>5. Education</p> <p>5.1 20 at risk drop out students supported through conditional cash</p>	<ul style="list-style-type: none"> - # of students received conditional cash for payment of school/university fee 	<ul style="list-style-type: none"> - Data of eligible beneficiaries is in place. - List of beneficiaries - Photos - Distribution list 	
<p>6. Shelter/NFI</p> <p>6.1 400HH supported through distribution of clothes vouchers</p>	<ul style="list-style-type: none"> - # of vulnerable HH receive clothes vouchers 	<ul style="list-style-type: none"> - Data of eligible beneficiaries is in place. - List of beneficiaries - Photos - Distribution list 	
Activities			Pre-conditions
<p>Output 1: Food Security</p> <p>1.1.1 Conduct assessment to identify and select beneficiaries (DSPR)</p> <p>1.1.2 Publish bid for suppliers (DSPR)</p> <p>1.1.3 Prepare distribution timetable (DSPR)</p> <p>1.1.4 Conduct awareness session among the communities to increase knowledge about nutrition (DSPR, ELCJHL and MECC)</p> <p>1.1.5 Distribute (2000) food parcels to HH (DSPR)</p> <p>1.1.6 Distribute every 4 months (40) food parcel to HH (ELCJHL)</p> <p>1.1.7 Distribute every 3 months (400) food vouchers to HH from CSCC (Civil Service Consumer Corporation) (MECC)</p> <p>1.1.8 Conduct feedback session after two weeks of distribution (DSPR)</p>			<ul style="list-style-type: none"> - Security conditions remain stable in Jordan - Banks remain open and operational - Movement restrictions are not re-imposed



1.1.9 Conduct post distribution monitoring (DSRP, MECC and ELCJHL)

- Markets continue to function

Output 2: Protection and MHPSS

2.1.1 Conduct assessment to identify and select beneficiaries (DSRP)

2.1.2 Develop ToR of the consultant for the MHPSS and GBV training (DSRP)

2.1.3 Select consultant (DSRP)

2.1.4 Conduct MHPSS trainings for 960 women (DSRP)

2.1.5 Refer 960 women to psychosocial support assistance services. (DSRP)

2.1.6 Create access for 960 children to children forums (DSRP)

2.1.7 Conduct assessment to identify cases requiring protection services (LWF)

2.1.8 Girls and boys age (7-17) attend structured and unstructured PSS sessions and counselling (avg. Of 90 per month) (LWF)

2.1.9 Women and men 18+ attend structured and unstructured PSS sessions and counselling (avg. Of 90 per month) (LWF)

2.1.10 Conduct case management sessions to identify families who are subject to GBV/SGBV (LWF)

2.1.11 Conduct individual counselling sessions for beneficiaries (avg. Of 240 case per year) (LWF)

2.1.12 Conduct family therapy counselling sessions for families/ groups (avg. of 120 per year) (LWF)

2.1.13 Conduct case management sessions (avg. Of 240 case per year) (LWF)

2.1.14 Conduct internal and external referrals depending on the needs of the individuals in the Community Center (avg. of 200 per year) (LWF)

2.1.15 Use the existing referral pathway to link beneficiaries/ survivors to legal services and follow up to ensure they are linked to the services (LWF)

2.1.16 Cash for workers to facilitate PSS courses and coordinate/ support activities and receive a monthly income (LWF)

2.1.17 Participate in the global 16 Days of Activism against GBV for 2 years (avg. Beneficiaries for each year is 80 people) (LWF)

2.1.18 Conduct 6 community initiatives for women empowerment (avg. Beneficiaries for each is 50 people). For example: food processing, support people with disability needs, support children in education (LWF)

2.2.1 Distribute appropriate IEC materials to raise awareness of available services and how referrals can be obtained.



2.2.2 Establish hot lines (during COVID) and help desks (after COVID) for CbPSHG members to provide 1:1 guidance on what services and support are appropriate for each household

Output 3: Health/ COVID -19

3.1.1 Conduct assessment to identify and select beneficiaries (DSPR)

3.1.2 Publish bid for suppliers (DSPR)

3.1.3 Prepare distribution timetable (DSPR)

3.1.4 Distribute (2000) hygiene kits and (960) awareness material to HH (DSPR)

3.1.5 Conduct awareness session among the community and target beneficiaries to increase knowledge of health (DSPR)

3.1.6 Conduct post monitoring distribution (DSRP)

3.2.1 Conduct assessment to identify and select beneficiaries (DSPR)

3.2.2 Identify and map health care service (DSPR)

3.2.3 Develop referral system (DSPR)

3.2.4 Refer 2500 individuals to health care assistance (DSPR)

3.2.5 Distribute twice per year medicine to 30 people with chronic disease (ELCJHL)

3.3.1 Conduct assessment to identify and select beneficiaries (MECC)

3.3.2 Distribute every 3 months (400) hygiene (COVID-19) vouchers to HH from CSCC (Civil Service Consumer Corporation) (MECC)

3.3.3 Conduct awareness session among the community and target beneficiaries to increase knowledge of health (MECC)

3.3.4 Conduct post monitoring distribution (MECC)

Output 4: Livelihood

4.1.1 Conduct assessment to identify and select beneficiaries (DSRP)

4.1.2 Develop ToR of entrepreneurship training and vocational training trainer (DSPR)

4.1.3 Select trainers and facilitators (DSPR)

4.1.4 Publish the training opportunity for start-ups (DSPR)



<p>4.1.5 Conduct pre assessment (DSPR)</p> <p>4.1.6 Conduct ToT for 100 female volunteers on Livelihood (DSPR)</p> <p>4.1.7 Conduct the entrepreneurship Start Your Business training for 250 females (DSPR)</p> <p>4.1.8 Conduct the vocational training on production kitchen for 960 females (DSPR)</p> <p>4.1.9 Provide provision of financial support/ start up kits.</p> <p>4.1.10 Conduct feedback sessions and make training adjustments (DSPR)</p> <p>4.1.11 Conduct post assessment (DSPR)</p> <p>5. Education</p> <p>5.1.1 Conduct assessment to identify and select beneficiaries (ELCJHL)</p> <p>5.1.2 Distribute conditional cash for payment of school fees to 20 students (ELCJHL)</p> <p>5.1.3 Conduct post-cash distribution monitoring visits to assess the use and impact of the cash distribution (ELCJHL)</p> <p>6. Shelter/NFI</p> <p>6.1.1 Conduct assessment to identify and select beneficiaries (MECC)</p> <p>6.1.2 - Distribution of clothes vouchers twice per year.</p> <p>6.1.3 Conduct post distribution monitoring (MECC)</p>	
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Annex 4 – Risk Analysis

Risk	Internal / External	Likelihood of occurring (high / Medium / low)	Impact on project implementation (high / Medium / low)	How the risk is monitored and mitigation strategy in place to minimize this risk
Further lockdown or restrictions due to COVID-19 pandemic.	External	Medium	Medium	The activities will be shifted to an online modality, using WhatsApp groups, YouTube and Facebook to reach out to beneficiaries. Counselling and case management will be done via phones.
More COVID-19 cases test positive inside the camp.	External	Medium	Medium	Tight control will be in place for the community centres' visitors. Hygiene practices will be maximized and respected as per the government and camp management.
Staff turn-over	Internal	Low	Low	Staff from other community centres' will be supporting in case one staff resigns. Recruitment processes for replacement of essential staff will be fast tracked, new staff will be trained on providing the needed services.
Government approvals for projects are not obtained or heavily delayed	External	Medium	Medium	Have good working relationships with the ministries, having a dedicated government liaison officer. Include in the project design sufficient time to get the government approval
Spread of COVID-19 among staff, focal point, volunteers and beneficiaries.	External	High	High	Ensure health standards (hygiene, washing hands, distancing) are assured, distribute masks & gloves during distributions and make sure to avoid big gathering during distribution.
Donor fatigue among related organizations, churches and institutional donors resulting in an overall decrease in funding for the Middle East	External	Medium	High	Build relationships with (potential new) donors, create Country Strategy to focus new donor proposals, attend cluster and coordination meetings to get the name of the ACT members out there. Continue to advocate for the needs on the Middle East.

Annex 7 – Summary Table

Summary	Lutheran World Federation (LWF)	DSPR	MECC
Implementation period	From 1 January 2021 to 31 December 2022 Total duration: 24 (months)	From 1 January 2021 to 31 December 2022 Total duration: 24 (months)	From 1 January 2021 to 31 December 2022 Total duration: 24 (months)
Geographical area	Zaatari Camp, Mafraq Governorate	Amman, Irbid, Husn, Talbiyah, Jerash, Souf, Zarqa, Madaba	Notheren Badia, Amman-Al balqa
Sectors of response	<input type="checkbox"/> Shelter / NFIs <input type="checkbox"/> Food Security <input type="checkbox"/> WASH <input type="checkbox"/> Health / Nutrition <input checked="" type="checkbox"/> Other sector: Resilience <input checked="" type="checkbox"/> Protection / Psychosocial <input type="checkbox"/> Early recovery / livelihoods <input type="checkbox"/> Education <input type="checkbox"/> Unconditional cash	<input type="checkbox"/> Shelter / NFIs <input type="checkbox"/> Food Security <input type="checkbox"/> WASH <input checked="" type="checkbox"/> Health / Nutrition <input checked="" type="checkbox"/> Other sector: Resilience <input checked="" type="checkbox"/> Protection / Psychosocial <input checked="" 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 type="checkbox"/> WASH <input checked="" type="checkbox"/> Health / Nutrition <input checked="" type="checkbox"/> Other sector: Resilience <input type="checkbox"/> Protection / Psychosocial <input type="checkbox"/> Early recovery / livelihoods <input type="checkbox"/> Education <input type="checkbox"/> Unconditional cash
Targeted beneficiaries (per sector)	- Protection: 5,420	- Food Security: 2,000 HH (12000) - Health/ COVID-19: 2,000 HH (12,000), sessions 960, medical referrals 2500 - Protection: 3,360 - Livelihood: 1,310	- Food Security: 400HH (2,400) - Hygiene/COVID-19: 400HH (2,400)
Requested budget (USD)	US\$ 464,523	US\$ 810,093	US\$ 542,231



Summary	ELCJHL/Good Shepherd Church
Implementation period	From 1 January 2021 to 31 December 2022 Total duration: 24 (months)
Geographical area	Amman
Sectors of response	<input type="checkbox"/> Shelter / NFIs <input type="checkbox"/> Protection / Psychosocial <input checked="" type="checkbox"/> Food Security <input type="checkbox"/> Early recovery / livelihoods <input type="checkbox"/> WASH <input checked="" type="checkbox"/> Education <input checked="" type="checkbox"/> Health / Nutrition <input type="checkbox"/> Unconditional cash <input checked="" type="checkbox"/> Other sector: Resilience
Targeted beneficiaries (per sector)	- Food Security: 30 HH (180) - Health/Nutrition: 30 beneficiaries - Education: 20 beneficiaries
Requested budget (USD)	US\$ 32,386