



Rapid Response Fund

ACT Secretariat Approval

Project Code 04/2022
Project Name Environmental and Floods Disaster in Brazil

The ACT Secretariat has approved the use of **USD149,485** from its Global Rapid Response Fund (GRRF22) and would be grateful to receive contributions to wholly or partially replenish this payment.

For further information please contact:

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A handwritten signature in black ink, appearing to read "Cyra".

Cyra Michelle Bullecer
Global Humanitarian Operations Manager
ACT Alliance Secretariat

Project Proposal

Emergency Prepared and Response Plan

EPRP last updated	February/22
Do you have a Contingency Plan for this response?	Yes
EPRP link on the online platform (or attach hard copy with proposal)	to be uploaded

Please submit this form to the Regional Humanitarian Programme Officer in your region with a copy to the Regional Representative

Date submitted to ACT Secretariat

24/02/2022

Section 1 Project Data

Project Information

Project Name	Environmental and Floods Disaster in Brazil
Project Code	04/2022
Country Forum	Brazil
ACT Requesting Member (if there are more than one member, please use ALT+<Enter> to add another member)	KOINONIA Presença Ecumênica e Serviço
Name of person leading the project	Rafael Soares de Oliveira
Job Title	Secretary for Planning and Cooperation
Email	rafael.koinonia@gmail.com
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Location(s) of project (city / province)	Sao Paulo Metropolitan Area (Sao Miguel Paulista and Franco da Rocha); Alto Tietê Area (Suzano) and Petropolis - Rio de Janeiro, Brazil
Project Budget (USD)	149,484.79
Project start date (dd/mm/yyyy)	7th April 2022
Project end date (dd/mm/yyyy)	7th July 2022

Which sectors your response activities most relate to

(please indicate number of planned beneficiaries per organisation in each sector where you plan to give assistance)

Sectors	Member (please write the name of your organisation)	
	Male	Female
Cash/ Vouchers	1000	1000
Camp Management	0	0
Education	1000	1000
Food/Nutrition	2000	2000
Health	0	0
Household items	0	0
Livelihood	0	0
Psychosocial	3000	3000
Shelter	0	0
Wash	3000	3000

Section 2 Project Description

2.1 Context

1. CHS Commitment 1. Summarize the crisis event and how it is likely to develop over the duration of the project *(maximum 5 bullet points)*

Heavy rains hit different regions of Brazil, causing great damage. In the states of Sao Paulo (SP) and Rio de Janeiro (RJ), the most affected regions were: Metropolitan Region of the city of São Paulo and Alto Tiete region and the municipality of Petropolis - RJ. Between January 29 and 30, in SP, the amount of rain that hit the region was equivalent to the volume forecast for the entire month of January. In the city of Petropolis, RJ, on February 15, in just 3 hours, it rained a greater amount of rain than expected for the entire month of February. Such events have caused flooding, landslides, deaths, and other consequences.

The main victims are populations in vulnerable areas (environmentally and economically). The government assistance given to affected families and affected regions is uneven and does not reach everyone who needs it. In RJ The government's action is taking place in a disorderly way, with many agencies acting without a command and coordination center for the work, whether in the search for missing persons or in coordinating assistance to homeless people and those in need of food, water, clothes, information, etc. Based on this scenario and considering the information collected in our Needs Assessment (NA), we had to make strategic choices, described below, that determined the option for the public to be assisted and partnerships made locally.

In the city of Petropolis - RJ, the number of deaths reached 198 of these 119 are women and 79 men. Of this total, 37 are minors. 875 people are housed in 13 shelters according to official figures so far, however, there is still little information on the total number of families that were displaced. There is a greater fragility of aid in rural areas of Petropolis.

In the state of São Paulo, there are 5,770 homeless and displaced families and 37 affected municipalities. There are already 34 confirmed deaths as a result of flooding, flash floods and landslides. The highest number of deaths (18) is concentrated in the municipality of Franco da Rocha. This region still has dam infrastructure risk, which increases the severity of the scenario.

Brazil is still in the rainy season with the possibility of new heavy rains and the risk of new floods and landslides.

2. CHS Commitment 1,2,3,4. Explain the impact of the crisis specific to the people you want to help
(maximum 5 bullet points)

Up to date, 232 deaths have been recorded and, 5,548 people have been left homeless or displaced, experiencing material losses and serious deterioration of mental and physical health. It is expected the situation will worsen as the rainy season will last 3 months more.

In São Paulo, the response provided by the government is highly restricted to certain areas and the most impoverished areas are being neglected.

According to the Need Assessment (NA) conducted in Petropolis (Rio de Janeiro) in mid-February 2022, which includes interviews with NGOs, State actors providing aid, and the affected population (8 women and 3 men), there are concerns related to:

- Major coordination challenges: the response is being led by government entities (namely Civil Defense, Fire Department, State Police, Army, Municipal Secretariats, and Federal Police), with no communication of contingency plans, either technical, coordination, or logistical guidance to local CSO or any regard to humanitarian principles such as CHS. As a case in point, 13 shelters run by the State entities are hosting 875 people without minimum management and safety standards: cases of gender and violence with children, overcrowding, an outbreak of lice, and COVID-19 have been reported by CSO to the RJ Persecutor.

Organizations such as Red Cross, the Catholic Church, the Lutheran Church, and others are providing humanitarian aid but without coordination among them as well.

- Dire humanitarian needs in sectors such as health, WASH (including menstrual hygiene), livelihood, and protection, especially SGBV prevention.

- Despite women being the largest number of deaths in RJ and who actively seek help for the communities, the gender approach is not taken into account by responding NGOs and State entities when providing humanitarian support.

As a result, this Action will prioritize disaster-affected 400 families (an average made of 5 people, being 2 or 3 adults and 2 or 3 children) located in urban and rural areas actively neglected in São Paulo (São Miguel Paulista and Franco da Rocha) and Rio de Janeiro (Community of Contorno) and where is more likely to be able to provide a coordinated emergency response.

3. CHS Commitment 9. Explain the availability of funding each of your organisation can access for this crisis. (maximum 3 bullet points)

KOINONIA/FEACT Brasil is specifically accessing ACT Alliance to contribute this RRF. Together with other actors from non-faith-based organizations, we are seeking donations in campaigns with the general public, for a period longer than 6 months. The local government is trying to access federal funds for emergency, but the amount is not enough for all the damages. Charities and other NGOs are accessing emergency funds, and relying in small donations of cash, food and clothing. As the storms has not ceased and coordination of the emergency aid is weak, there is no official information of the amounts and organisations working in the affected areas. All the information available about that is provided only by media and news reports.

2.2 Activity Summary

1. CHS Commitment 1, 2, 4. Explain your proposed project and why you have selected this particular response to the crisis. If multiple members are responding, please explain the role of each member in the coordinated response as indicated in your EPRP Contingency Plan.

We believe that an emergency action is necessary, which seeks to assist in the most immediate needs of the affected families, but also to strengthen their organization so that they can influence the public authorities in the search for better conditions and reparations for their losses and also so that the number of affected families do not increase further. With this project, we seek to provide an immediate response to help affected families. For families in Sao Paulo, personal hygiene and cleaning articles will be provided to guarantee minimum living conditions (Hygiene and cleaning Kit: 3 pack of toilet paper with 4 rolls, 2 PCT of feminine absorbents with 8un, 1 toothpaste 90g, 2 soaps 85g, 1 PCT of soap powder 500g, 1 detergent 500ml, 1 disinfectant of 500, 2 LT of bleach, 500 ML of alcohol in gel 70%).

In addition to these items, two deliveries of food baskets and an activity kit for children will be provided.

(Children's activity Kit: 2 school notebooks, 2 pencils, 2 erasers, 2 ballpoint pens, 2 box of colored pencils, 2 liquid glue, 2 packages of sulfite paper (50 sheets)

For families in Rio, hygiene kits (personal hygiene Kit for women for 2 months 6 pct absorbents, 8 un) will be delivered directly for women (according to the first Needs Assessment) and a Cash Intervention experience will be held so that families can determine what is most urgent to buy. Psychosocial* care will be offered to families with the aim of providing humanitarian support at a time of great trauma, but also assisting in the reorganization of communities after the tragedy and in the search for families to receive the correct government attention and have their rights guaranteed.

* - The psychosocial visit is a key point of the general action because, in addition to psychological care, it is a Post-Distribution Monitoring tool. The psychosocial visit also seeks to raise problems experienced by families, establishes listening spaces for the most vulnerable in this context: both women and LGBTQIA+ individuals. And develops direct activities with children and reaches difficulties that are sometimes not pointed out by the family nuclei. These visits also support the reduction of domestic gender violence, as observed from the outside constrains the violent and power movement of men, and in rare extreme cases can lead to police reports to the aggressors. The group of volunteers will be composed mostly (more than 60%) of experienced volunteers, who have already worked in other emergency scenarios such as Brumadinho – MG, Sao Saulo-SP and who have already been monitored by the Forum ACT Brazil, in such a way that a volunteer who is working for the first time can always be monitored by a more experienced one. These volunteers are traveling from other regions of the country to work in Petropolis.

2. CHS Commitment 2. Explain how you will start your activities promptly. *Project implementation should start within two weeks. The project should be a maximum of 6 months.*

Both in Rio de Janeiro and in São Paulo, KOINONIA works with a local partner - the Movement of People Affected by Dams (MAB) - in a network of local leaders and residents' associations, identifying and registering the most affected families to receive aid. In the state of Rio de Janeiro, we also have local partners the Lutheran Church of Petropolis - IECLB (guest member of the forum), Association of Parents and Teachers of Leonardo Boff School, Movement of Small Farmers (MPA), Movement of Homeless Workers (MTST).

The action was carried out respecting all health protocols as well as the lessons learned from RRF 2021.

The relief action will consist of a basic food basket, hygiene kits, psychosocial support and the organization of advocacy initiatives."

3. CHS Commitment 6. How are you co-ordinating and with whom? *Coordination ensures complementarity of interventions within forum members and other humanitarian actors to maximise the use of our resources and will address all unmet needs*

To follow up this season on the accumulated experience and connections planned in the EPRP for the Southeast Region of Brazil, the coordination will be:

- 1) Local connection with a group of up to 100 volunteers linked to the Movement of Atingidos por Barragens (MAB), without labor costs. Providing from our part the costs involved with the logistics for the distribution of food and other items, and to provide the psychosocial support for the families.
- 2) Also coordinating with MAB volunteers and other local actors and leaders of assisted families on information and advocacy actions.
- 3) In the state of Rio de Janeiro, local partner MAB will lead the action in coordination with other organizations such as the Association of Parents and Teachers of Leonardo Boff School, the Center for the Defense of Human Rights - CDDH, the Small Farmers Movement - MPA, the Homeless Movement - MTST and connecting us with the local Lutheran church.

4. CHS Commitment 3, 9. How are you planning to procure your goods or services? (This includes cash transfer methodologies) Please tick boxes that apply. *Goods and services procured locally supports and revitalises economic activity either as livelihood for people or income for small businesses.*

Locally or within the affected areas	<input checked="" type="checkbox"/>	Nationally	<input type="checkbox"/>	Regionally or neighbouring countries	<input type="checkbox"/>	Internationally	<input type="checkbox"/>
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Do you have a procurement policy? What factors did you consider when you made this decision?

The current procurement policy of the organization is to have at least three quotes from different stores to compare and decide for the best price, choosing the stores based on the ease of delivery and service providers on the recognized experience in service delivery. Following the good practices of vetting providers with potential criminal connections or other reports, the official Brazilia transparency system is going to be consulted. Suppliers from outside the municipality or international will always be avoided as our practice is to strengthen as much as the local economy and small businesses.

2.3 Description of Target Population

1. CHS Commitment 1, 9. How do you calculate the beneficiary numbers for this project? *For example, food and hygiene kits given to 2500 families, and 1 family = x beneficiaries.*

The calculation of beneficiaries was made considering an average of 5 people per family. Therefore, with the help of actions with food baskets, hygiene, educational kits, and Cash Intervention 1200 families = 6000 people will be helped, (3000 women, 3000 children).

In the state of Sao Paulo: 800 families.

In the state of Rio (Petropolis): 400 families.

Total of Direct Beneficiaries: 6.000 people

With advocacy in the areas, the target indirect beneficiaries will be reached by the organized action of the 1,200 families organized in Family Nuclei and WhatsApp groups, mobilizing and disseminating information about pressure on the government, basic rights of families, and other relevant information.

54,000 families will be indirectly reached, 44,000 (SP) and 10,000 (RJ) (270,000 people, 48% men, 52% women, 120,000 children, 210,000 adults)

IN TOTAL: 54.000 FAMILIES, 270.000 PEOPLE

2. CHS Commitment 1, 2, 3, 4. Which vulnerable groups are you specifically targeting? What makes them vulnerable? Please explain.

The target beneficiaries of this project are the affected population by the direct or indirect consequences of the last heavy rains in Brazil. The targeted beneficiaries in SP and RJ were affected by flooding, landslides, and other problems. Families living in areas that are at risk due to the presence of dams will also be served.

In São Paulo action will also affect families living in risk areas, which were not affected by the rains of the last few days but are still in areas that could be affected at any time. In RJ, considering the great chaos of the moment, the absence of qualified and professional coordination of the emergency action, also considering the notes that emerged from the focus group meetings held to collect information for the Needs Assessment, it was chosen to act in part from the periphery of Petropolis and in the countryside of the city. Our NA has shown that in these areas the difficulties and lack of help are even greater.

The action strategy described below assumes special support for women, strengthening their leadership and avoiding excessive work and violence, through family visits and meetings in the Family Nuclei composed of up to 10 families. It also provides space, through the psychosocial methodology, to assess specific issues related to the most vulnerable in this situation: women, children, and LGBTQIA+ individuals, that after the project will be strengthened in nuclei as a form of collective action. In RJ in particular, our NA identified an immediate lack of hygiene and cleaning kits and personal hygiene kits for women. In the area defined for work in Petropolis, periphery, and rural areas, there is a lesser context of violence and militia control, which in our initial evaluation allows for an immediate experience in Cash Intervention.

3. CHS Commitment 4. Explain how the target population has been/is involved in the design of the proposed intervention (maximum 5 bullet points)

In SP, the local partner MAB works with families who live in the affected regions or close to them. Listening to these families contributed to the project design and needs assessment. In RJ, families in affected areas were heard through focus groups. The action was designed based on these discussions. The affected families will be involved in the action through collective participation, through Family Nuclei. Each Family Nuclei will be composed of approximately 10 families, each group must choose two people among the people in the group to coordinate it. Always ensuring the presence of at least one woman as coordinator. The Family Nuclei will be the fundamental unit of action. Accompanied by interaction with volunteers, psychosocial assistance, and coordination work, the nuclei will be a space for exchanging information, monitoring and encouraging actions to seek collective rights for the affected families. The action strategy assumes the continuous visit of volunteers to each family, also accompanying the activities of each Family Nuclei. This allows us to listen to people, to carry out Post Distribution Monitoring, and in particular to actively listen to women and LGBTQIA+ people. Those people who do not have their problems monitored by the coordination of Family Nuclei have the possibility of being heard directly by our psychosocial action volunteers. To avoid the work overload of the women of the coordination, the team of volunteers can suggest adjustments in the dynamics of the Family Nuclei's functioning. In the dynamics of the Family Nuclei meetings, there will be specific meetings for women so that they interfere especially in planning changes, without the presence of men.

2.4 Expected Results

1. What will this project's success look like based on your time frame? *Please write your activities milestones including dates.*

About 1200 families will be reached and assisted in order to alleviate suffering, satisfy pressing needs, prevent further harm and build resilience. Protection and psychosocial needs will be addressed with a gender and age approach, through a Psychosocial Support (PSS) methodology developed and successfully implemented during the response to the COVID-19 epidemic (see Annex: to include the description of the methodology). The abovementioned methodology includes advocacy and communications actions, and resilience-building at community level, mostly through the engagement of women leaders. It is expected that advocacy and communication actions reach 54,000 families in the targeted areas. Sexual and Gender-Based Violence (SGBV) will be actively addressed and prevented through field visits and the engagement of women leaders, who will have a critical role in the implementation of the protection methodology as Famili Nuclei Coordinators.

The main milestones for this Action are as follows:

1st month

800 food baskets, in Sao Paulo

800 hygiene and cleaning kits, in São Paulo

400 personal hygiene kits for women, in Rio

480 psychosocial visits in Rio/Sao Paulo

2nd month

800 educational kits for children, in Sao Paulo

400 Cash, in Rio

480 psychosocial visits Rio/Sao Paulo

3rd month

800 food baskets, in Sao Paulo

800 hygiene and cleaning kits, in Sao Paulo

400 personal hygiene kits for women, in Rio

480 psychosocial visits Rio/Sao Paulo

2. Describe the risks to a successful project and how you are managing them.

The risks involved in the project are (i) the event of a new flood due to new summer storms, and (2) violence in the context of high social vulnerability social levels of the assisted communities. For natural and environmental hazards, a risk monitoring system will be set up by MAB specialists, assessing and informing both the volunteers, the staff, and the families. In the communities, there will be an articulation of local leaders and local volunteers to assess the risks and get the community acceptance to work within.

2.5 Monitoring, Accountability & Learning

1. CHS Commitment 7. Describe how you will monitor the project. What monitoring tools and process will you use? How will you gather lessons from the project?

Monitoring the development of the project at each stage will be carried out by the project coordination team and also together with the families involved. Each Family Nuclei will choose two people from the Nuclei to coordinate it. These will be the links between project coordination and Family Nuclei, aided by volunteers. Each coordinator collects evaluation information from the activities implemented in the project. Qualitative and quantitative methods will be conducted to gather data and track performance indicators. Data will be segregated by sex, age, and disability.

Also, in each region where the project is implemented, the coordinators will place a complaints box, which will be available to families and Family Nuclei coordinators and which will remain sealed and will only be opened in the central office by a designated person.

The lessons learned from the action will be collected through the evaluations made with the family nuclei, collected by the coordinators, also through the reports and evaluations on the psychosocial visits (as defined in 2.2 item, psychosocial monitoring includes Post Distribution Monitoring and risk monitoring for LGBTQIA+, women, and children) and general monitoring of the project by the coordination team. Such learning will be a legacy for KOINONIA and MAB (local partner) and also for the organization of families that will remain in the territory through the Family Nuclei.

2. CHS Commitment 8. Does your organisation have a Code of Conduct? Have all staff and volunteers signed the Code of Conduct? *We may ask you to submit copies of the signed Code of Conduct. You can use ACT Alliance's Code of Conduct if your organisation does not have one.*

As in past actions, the ACT Alliance's Code of Conduct will be used, which will be signed by the volunteers. Koinonia's Child and Vulnerable Persons Safeguarding Policy is available in Portuguese and also is going to be signed by the volunteers and staff.

3. How will you ensure you and all stakeholders will be accountable to the affected population. How will you share information. How will you collect and use feedback and complaints? CHS 4 and 5

The entire Koinonia team and the local partner MAB, who are involved in the project, are committed to quality standards and accountability. In this way, such standards are guaranteed in the execution of the action through transparency and collective decision-making in all instances, from administrative decisions to decisions in groups of families. Decisions are taken in collectives, being debated and transmitted to all the families of the groups through their coordination. Families have access to the complaints box in all project activities. The box remains sealed and is held by the heads of families and the volunteers do not have access to it. The contents of the box are only opened in the central office. Complaints boxes are delivered directly and only opened with the authorization of the person designated at the KOINONIA Assembly annually, for the protection protocols for children, the elderly, and vulnerable people. All the FEACT Brasil actions (led here by KOINONIA) are disclosed by all its social network means and sites, as transparently as possible, including the number of means and funds applied, and the means of contact with the beneficiary families when applicable.

actalliance
Rapid Response Fund
Financial Budget and Report

Project Code
Project Name

04/2022
Environmental and Floods Disaster in Brazil

Budget Exchange rate (1 USD to local currency)

0.1950225556

Please use exchange rate from this site:

<https://www.xe.com/currencytables/?from=BRL&date=2022-02-24#table-section>

Description		Type of Unit	No. of Units	Unit Cost		Budget		Actual		Balance		Burn Rate
				local currency	local currency	USD	local currency	USD	local currency	USD	%	
									1.00000			
DIRECT COSTS												
1 PROJECT STAFF												
1.2.1.	Coordinator	per month	3	4,800	14,400	2,808		-	14,400	2,808	0%	
1.2.2.	Advisor senior	per month	3	3,600	10,800	2,106		-	10,800	2,106	0.00	
1.2.3.	Local Advisor 1	per month	3	3,200	9,600	1,872		-	9,600	1,872	0.00	
1.2.4.	Local Advisor 2	per month	3	3,200	9,600	1,872		-	9,600	1,872	0.00	
1.2.5.	Local Advisor 3	per month	3	3,200	9,600	1,872		-	9,600	1,872	0.00	
1.2.6.				-	-	-		-	-	-	-	
TOTAL PROJECT STAFF						54,000	10,531	-	-	54,000	10,531	0.00
2 PROJECT ACTIVITIES												
2.1.	Cash/Vouchers				92,000	17,942	-	-	92,000	(74,058)	-	
2.1.2.	Cash/Vouchers	Cash/Voucher	400	230	92,000	17,942		-	92,000	(74,058)	0.00	
2.2.	Camp Management				-	-	-	-	-	-	-	
2.3.	Education				22,400	4,369	-	-	22,400	4,369	-	
2.3.1.	Children's activity Kit: 2 school notebooks, 2 pencils, 2 erasers, 2 ballpoint pens, 2 box of colored pencils, 2 liquid glue, 2 packages of sulfite paper (50 sheets)	Kit	800	28	22,400	4,369		-	22,400	4,369	0.00	
2.4.	Food/Nutrition				121,600	23,715	-	-	121,600	23,715	-	
2.4.1.	Kit for 2 months per family: 2 kg of beans and 375gr of canned sardines, 500gr of coffee, 10 kg of rice, 1 kg of pasta, 1 liter of soy oil, 280 g of tomato sauce, 1 kg of wheat flour, 1 kg of sugar, 1 kg of cornmeal, 1 kg of salt	Kit	1,600	76	121,600	23,715		-	121,600	23,715	0.00	
2.5.	Health				-	-	-	-	-	-	-	
2.6.	Household items				-	-	-	-	-	-	-	
2.7.	Livelihood				-	-	-	-	-	-	-	
2.8.	Psychosocial				230,400	44,933	-	-	230,400	44,933	-	
2.8.1.	Psychosocial Support Sessions in Groups (volunteers)	Sessions	1,440	160	230,400	44,933		-	230,400	44,933	0.00	
2.8.	Shelter				4,500	878	-	-	4,500	(3,622)	-	
2.9.1.	Shelter	per mouth	3	1,500	4,500	878		-	4,500	(3,622)	0.00	
2.10	WASH				84,000	16,382	-	-	84,000	(11,618)	-	
2.10.1	Kit hygiene and cleaning for 2 months per family: 3 pack of toilet paper with 4 rolls, 2 PCT of feminine absorbents with 8un, 1 toothpaste 90g, 2 soaps 85g, 1 PCT of soap powder 500g, 1 detergent 500ml, 1 disinfectant of 500, 2 LT of bleach, 500 ML of alcohol in gel 70%	Kit	1,600	35	56,000	10,921		-	56,000	10,921	0.00	
2.10.2	Kit personal hygiene for women for 2 months (€	Kit	800	35	28,000	5,461		-	28,000	(22,539)	0.00	
TOTAL PROJECT ACTIVITIES						554,900	108,218	-	-	324,500	(61,215)	0.00
3 PROJECT IMPLEMENTATION												
3.1	Forum Coordination				21,000	4,095	-	-	21,000	4,095	-	
3.1.4	Products for Advocacy on Social media, network	Consultancy	3	7,000	21,000	4,095		-	21,000	4,095	0.00	
3.2	Capacity Development				-	-	-	-	-	-	-	
TOTAL PROJECT IMPLEMENTATION						21,000	4,095	-	-	21,000	4,095	0.00
4 QUALITY AND ACCOUNTABILITY												
4.1	Assessments				-	-		-	-	-	-	
4.2	Complaints and Response Mechanisms	box	30	5	150	29		-	150	29	0.00	
4.3	Safeguarding				-	-		-	-	-	-	
4.4	Communication and visibility (15 Banners, 50€	Kit	1	5,500	5,500	1,073		-	5,500	1,073	0.00	
4.5	Monitoring & evaluation	Researchers	2	6,000	12,000	2,340		-	12,000	2,340	0.00	
4.6	Audit	Audit	1	9,000	9,000	1,755		-	9,000	1,755	0.00	
TOTAL QUALITY AND ACCOUNTABILITY						26,650	5,197					0.00
5 LOGISTICS												
5.1.2	Vehicle Rental	Car/day	312	230	71,760	13,995		-	71,760	13,995	0.00	
TOTAL LOGISTICS						71,760	13,995					0.00

Description	Type of Unit	No. of Units	Unit Cost	Budget		Final Report							
			local currency	local currency	USD	Actual		Balance		Burn Rate			
						local currency	USD	local currency	USD	%			
6 PROJECT ASSETS & EQUIPMENT													
TOTAL PROJECT ASSETS & EQUIPMENT						-		-					
TOTAL DIRECT COST							728,310	142,037	-	-	399,500	142,037	0
INDIRECT COSTS: PERSONNEL, ADMINISTRATION & SUPPORT													
Salaries e. g 10% for Programme Director	person/month	3	3,200	9,600	1,872		-	-	9,600	1,872	0.00		
Salaries e. g 5% for Finance Advisor	person/month	3	2,700	8,100	1,580		-	-	8,100	1,580	0.00		
Salaries for accountant and admin staff	person/month	3	3,600	10,800	2,106		-	-	10,800	2,106	0.00		
Staff Insurance			-	-	-		-	-	-	-	-		
Staff salaries - Cost shared				28,500	5,558		-	-	28,500	5,558	0.00		
Office rent			-	-	-		-	-	-	-	-		
Office Utilities	per month	3	800	2,400	468		-	-	2,400	468	0.00		
Office stationery	per month	3	330	990	193		-	-	990	(797)	0.00		
Office Insurance	per month	3	1,350	4,050	790		-	-	4,050	790	0.00		
Phone and internet charges	per month	3	750	2,250	439		-	-	2,250	439	0.00		
Office Operations				9,690	1,890		-	-	9,690	1,890	0.00		
TOTAL INDIRECT COST: PERSONNEL, ADMIN. & SUPPORT							38,190	7,448	-	-	38,190	7,448	0
Percentage of Indirect Costs against Total Budget							5%	5%					
Total Budget							766,500	149,485	-	-	437,690	149,485	0.00