



## I. Allocation Overview

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### A) Introduction/Humanitarian situation

- 1. The UN Humanitarian Coordinator (HC) has launched this standard allocation for US \$4.5 million in order to support the implementation of the Jordan Response Plan (JRP) by releasing resources to partners and to respond to urgent and funding gaps in Jordan.**
- 2. As this standard allocation is coming directly on the back of the JRP, activities supported must be within the agreed 'humanitarian parameters' of people recently affected (mainly Syrian refugees by the Syrian crisis, and reflect priority activities outlined in the sector-specific sections.** This strategy paper draws upon sector -led exercises recently completed to identify the most urgent priorities and gaps in assistance within their sectors and as articulated in the sector defense presentations.
3. From a humanitarian perspective, and in recognition of the human tragedy unfolding within Syria, the Government of Jordan has welcomed Syrians seeking refuge, protection, and safety from the conflict. Within that same humanitarian spirit, the government and the people of Jordan have extended public services, facilities, resources and hospitality in an attempt to accommodate the most pressing needs of the Syrian refugees. Since the onset of the conflict in Syria, over a million Syrians have fled to Jordan.
4. Since 2011, Jordan alone has provided refuge to more than 1.3 million Syrians, including 671,148 registered refugees, who face increasing vulnerability as their savings, assets and resources are long exhausted. Around 126,000 of these refugees live in camps, while the remaining have settled in urban and rural areas, primarily in northern governorates and in Amman. The Syria crisis has and is still adding strain on the country's economy and infrastructure and has put pressure on all sectors including education, health, housing, water, municipal services and electricity supply. Jordanians feel acutely the impact of the crisis on their daily lives, particularly in host communities where the share of Syrian refugees, and its pressure on local service delivery, natural resources and the labor market, is highest. Although the impact of reforms related to stimulating private-sector investments and higher<sup>1</sup>.
5. Jordan has received a large share of Syrian refugees and addressing the needs of Syrian refugees has placed considerable strain on national resources and has impacted on the development gains of the last decade. Currently 671,148 Syrians continue to seek refuge in Jordan as registered refugees and overall an estimated total of 1.3 million Syrians now account for 10 per cent of Jordan's population. According to UNHCR's statistics over 80 per cent of the registered refugees live in urban and rural communities across the country, with less than 20% residing in camps.
6. With the Syria crisis now entering its ninth year, Jordan is faced with multiple economic challenges as it struggles to meet the continued needs of refugees in the Kingdom as well as address the needs of vulnerable Jordanians. This places critical pressure on the country's social, economic, institutional and

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<sup>1</sup> JRP 2019

natural resources with increased competition for access to public utilities, schooling, health services, and employment opportunities placing Jordan in a fragile situation.

## B) Jordan Response Plan (JRP)/ Appeal

7. The JRP **2018-2020** is a three-year plan with a total budget of \$ 7.312 billion, including \$ 2.761 billion for subsidy, security, income loss and infrastructure depreciation due to the Syria crisis, \$ 2.126 billion for refugee-related interventions and \$ 2.425 billion for resilience strengthening, including that of communities where both Jordanians and Syrians live. The JRP budget per year is the following: 2018 \$ 2.483 billion 2019 \$ 2.525 billion 2020 \$ 2.304 billion Budget requirements for refugee.
8. Priority needs which will be addressed through this standard allocation are therefore based on those where the impact of crisis on the Syrian refugees is severe and harsh.

## II. 2019 1st Standard Allocation Strategy

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### A) Purpose of the 2019 1<sup>st</sup> Standard Allocation Strategy and linkages to the JRP / Appeal

9. **The allocation Strategy is in line with the objective of the Jordan Response Plan (JRP) to consolidate all efforts to respond and mitigate the impact of the Syria crisis on the country and the people living in it, namely to “Support saving lives, alleviate suffering and increase access to humanitarian response for vulnerable people and those with specific needs.”.** The priorities for the call are to respond to the inter-sectoral priorities in line with the JHF’s objectives and project’s prioritization criteria.
10. **This allocation paper also provides strategic direction and guidance for the allocation process for this call. In line with the JRP priorities, the 1<sup>st</sup> Standard Allocation is focused on providing timely and life-saving life sustaining assistance to people directly affected by the Syria crisis in host community and camps.** Also the allocation will fill the urgent gaps to ensure the continuous support to the affected population and thus in a manner of consonant with the principles of neutrality and impartiality.
11. **Allocation Strategic Priorities:** In order to maximize the impact of this allocation, a limited number of sectors and activities have been selected. Eligible sectors for this allocations are the following: protection, Shelter, Health and WASH. Selected projects will address critical needs of People with Special Needs targeting both Syrian Refugees in host communities and in camps and the most vulnerable in host communities, prioritizing areas with the highest needs.

It is key that this particular allocation ensures complementarity with existing projects and interventions in the targeted geographical areas.

12. **Note for organization submitting projects on Protection and Gender Mainstreaming:** Protection imperatives will be mainstreamed across all prioritized sectors, as part of the commitment to the “do no harm principle and the “centrality of protection” in the humanitarian response. All proposals must demonstrate how protection principles, including child protection, GBV considerations and Gender Equality are incorporated and protection mainstreaming considered in project design.

## B) Allocation Breakdown

**13. JHF Funding Balance:** As of 01 January 2019, the JHF has a balance of US\$ 5 million in contributions and carry over. As of the beginning of 2019 the JHF received contributions from the governments of Sweden, Belgium and Ireland. Both Italy & Germany contributed to the JHF in late December 2018.

**14. The HC decided to allocate a total amount of \$ 4.5 million** from the JHF funds for this first Standard Allocation for 2019. This paper outlines the allocation priorities and rationale for the prioritization.

Standard Allocation envelope	\$ 4,500,000
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**The project proposal submission deadline is set to the 16<sup>th</sup> of April 2019**

## C) Prioritization of Projects

**15.** Only partners that have passed the OCHA JHF Capacity Assessment and “Due Diligence” requirements and are active members of the sectors are eligible to submit proposals for funding.

**16.** Partnerships between new and existing JHF partners are strongly encouraged in line with the JHF’s capacity development objectives.

**17.** Multi-sectoral collaboration and complementarity between the selected sectors in order to provide a comprehensive package through convergence of services, wherever possible.

### Allocation Focus:

Based on the strategic focus of JHF 2019 to support national priorities with special focus on protection and gender as a cross cutting approach while considering the established 5 targets, the Inter-Sector Working Group discussed in the February ISWG meeting on the strategic focus for the 2019 March JHF call, after which the sectors discussed with their members and decided the following priorities with the aim to address the existing gaps in their respective sectors.

In line with the JHF’s guiding principles for 2019 Allocations, the upcoming allocation will put extra focus on responding to humanitarian needs of vulnerable individuals and those with specific Needs. The Fund will especially target critical funding gaps and urgent humanitarian needs of the following specific groups.

Projects submitted for any sector (protection, Health, Shelter and wash) of the mentioned above need to be linked to one of these specific groups:

- 1- Women and Elderly people at risk
- 2- People with disabilities
- 3- Children at risk .
- 4- Unaccompanied children

## PwSN:

**Elderly people:** Older people account for a very important proportion of the Jordanian citizens population and the Syrian refugee population who have basic rights that need to be advocated for and upheld. However, the older people population is overlooked, both within governmental programs as well as in humanitarian outreach programs. Limited efforts have been implemented at the governmental level through the Jordan National Strategy for Senior Citizens, and little data has been gathered that is specific to the needs and experiences of older people. Older people, defined as age 60 and older by the United Nations, have been identified to be among the most at-risk categories of displaced people by UNHCR and are classified as “persons with specific needs”. However, older people are overlooked in refugee needs assessments and reports<sup>16</sup>. Rather than recognizing the uniqueness of older people and their experiences, older refugees are often grouped together with those of younger people. This masks the unique risks for older people and limits understanding of the prevalence of their specific needs. It also means that any potential skills or contributions that older people may wish to make in their community, e.g. through participation in activities, are almost always overlooked. This awareness and knowledge gap about older people and their contributions and also needs negatively impacts how programs and services are developed and implemented<sup>17</sup> and means response programmes are not inclusive of older women and men. The overlooked ageing Syrian refugee population in Jordan demonstrates characteristics suggestive of heightened risk that should not be ignored in humanitarian outreach programs, including high prevalence of chronic diseases and physical impairments, difficulty accessing health services and medications, and psychological distress, as well as protection concerns.<sup>2</sup>

There is limited understanding of the special needs and abilities of older people and a lack of capacity to ensure the full inclusion of this group. As a result, older people face increased challenges in accessing basic services and meeting basic and specific needs because these services are rarely made inclusive and accessible for these groups. The limited availability of services for older people has significant implications on those with specific needs, such as those living with physical disabilities. The vulnerability of individuals and communities to the risks that displacement creates depends on the strength of their coping mechanisms. The most important coping mechanism for older people, and in particular those with specific needs, is often family and community support networks. For older refugees adjusting to new environments and surroundings, knowing where and how to access support and services is a major challenge. If needs are not met, it can lead to increased social isolation and reduced access to services.

**Women at risk:** SGBV prevention and response activities addressing programmatic gaps in underserved areas. SGBV continues to pervade the lives of women and girls and other vulnerable groups in the refugee and host community. Gender norms combined with an extended length of displacement contribute to increase risks of SGBV. Analysis from GBV IMS and other assessments highlight heightened risks faced by women and girls. Although GBV prevention and response services are available in Jordan there are still gaps in terms of geographical coverage as well as gaps in terms of specific programmatic intervention. SGBV services are life-saving thus funding is required to cover existing gaps. 2017-2018 SGBV gap analysis has been updated from 2018 version and it underlines a number of critical gaps in the current response, programmatic priorities listed below are based on this draft document.

The priorities are as well in line with intervention for the prevention and response to sexual and gender based violence under the JRP objective of “Strengthened and expanded national and sub-national protection systems that meet the international protection and social protection needs of vulnerable groups in the governorates most affected by the Syria crisis”.

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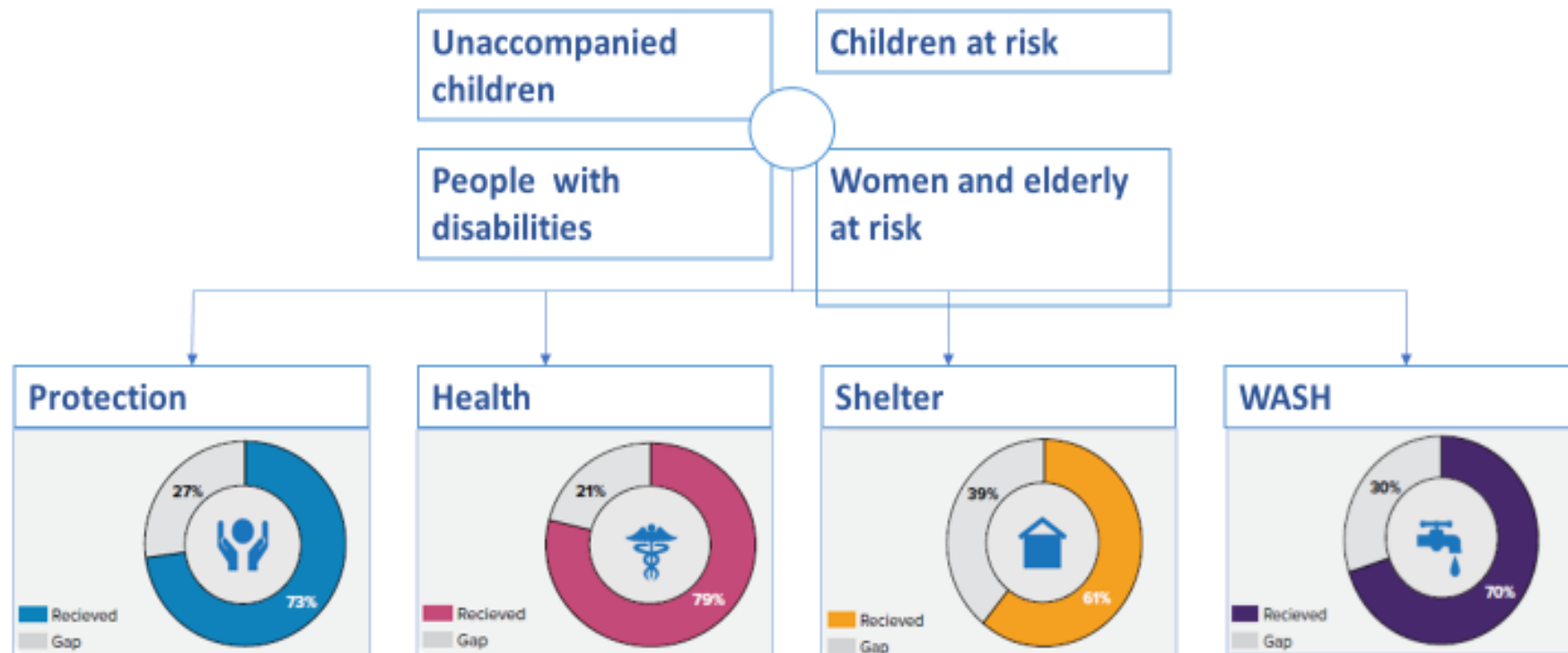
<sup>2</sup> The experiences and inclusion risks of Syrian refugees and older Jordanians/Help Age International report.

**Unaccompanied children and children at risk:** Since the onset of the Syria emergency, refugee children arrived to Jordan separated from their parents or relatives as unaccompanied children. Through targeted case management programs for unaccompanied refugee children, a large number of children was reunified with parents inside or outside Jordan as well as placed with relatives. However, to date, specific protection concerns and emergencies lead to separation of children from parents, care givers or relatives, including death, hospitalization or detention of parents. Unaccompanied refugee children do not consistently receive appropriate care services through the community which has resulted in institutionalization of children. Additionally, community support mechanisms for vulnerable parents are needed to prevent separation of children from parents for their safety and protection, including family-based support networks, peer to peer support, comprehensive prevention and response services to reduce socio-economic vulnerabilities, including through cash-based interventions. While this protection need was identified as a critical humanitarian gap in the child protection response to the most vulnerable, due to limited capacities and lack of funding, this activity has not been covered by any child protection actor in Jordan.

**People & Children with disabilities:** Targeted Protection interventions for children with disabilities: Based on child protection case management data, children with disabilities are at heightened risk of violence, exploitation and neglect. The community, including parents of refugee children with disabilities, has a limited understanding and knowledge of the needs and care for children with disabilities, particularly those with intellectual disabilities. Parents and community members require targeted capacity building support on how to properly take care of children with disabilities to ensure they are included in existing activities and have equal access to services. Particularly in urban areas and southern governorates of Jordan, children with limited mobility face challenges in participating in social and community life. Existing child protection, psychosocial support, health and nutrition services or educational activities in centers do not take needs and rights of children with disabilities into consideration when programming and planning their activities. Similarly, children with disabilities should be supported in accessing justice and protection services

[The JHF will hold a meeting to all partners that are interested to submit their project for a Q& A session to clarify all issues around the priorities on Monday April 8,2019 at 10:30 at the OCHA office in Abdoun.](#)

In line with the JHF’s guiding principles for 2019 Allocations, the upcoming allocation will put extra focus on responding to humanitarian needs of vulnerable individuals and those with specific Needs. The Fund will especially target critical funding gaps and urgent humanitarian needs of the following specific groups:



## Sectors' Priorities and Alignment with the 2019 Jordan Response Plan

This allocation will focus on the following beneficiaries' groups:

1. Unaccompanied children.
2. People with disabilities.
3. Women / Elderly at risk.
4. Children at risk.

For more details on each of the sectors , please refer to Annex No. 4

<b>Protection:</b>		
<b>Child Protection</b>		
<b>Sector Priorities</b>	<b>JRP Sector Specific Objectives</b>	<b>Standard Indicators</b>
Community-based alternative care mechanism	<p>REF 1.8 Providing quality child protection services to the most vulnerable children in Jordan.</p> <p>RES 1.4 Strengthening community-based multisectoral protection mechanisms through outreach and community mobilization.</p>	<p>Number of children who were placed in family-based care [foster care, kinship care], residential care [including small group homes], supervised independent living arrangements, etc.)</p> <p>Number of WGBM accessing community-based protection services</p> <p>Number of institutional capacity development interventions (excluding training) implemented</p>
Access to justice for children	<p>REF 1.8 Providing quality child protection services to the most vulnerable children in Jordan.</p> <p>RES 1.2 Strengthening National Child Protection Systems</p>	<p>Number of institutional capacity development interventions (excluding training) implemented</p> <p>Number of girls and boys with protection vulnerabilities with improved access to protection services</p> <p>Number of children in Jordan who benefited from a diversion order (settlement by police, and at court level) or alternative measure as opposed to a custodial sentence</p> <p>Number of children who were sentenced to an alternative measure</p>

<p>Targeted Protection interventions for children with disabilities</p>	<p>REF 1.8 Providing quality child protection services to the most vulnerable children in Jordan.</p> <p>RES 1.2 Strengthening National Child Protection Systems</p>	<p>Number of institutional capacity development interventions (excluding training) implemented.</p> <p>Number of girls and boys with protection vulnerabilities with improved access to protection services.</p>
<p><b>SGBV</b></p>		
<p>Urgent cash assistance for SGBV survivors in camps and urban integrated in SGBV case management programs</p>	<p>REF 1.7 Preventing and responding to sexual and Gender Based Violence</p>	<p>Number of WGBM (including survivors) accessing SGBV prevention and response services in safe spaces</p> <p>Number of service providers, humanitarian actors and government counterpart trained on SGBV</p>
<p>Innovative prevention activities</p>	<p>REF 1.7 Preventing and responding to sexual and Gender Based Violence</p>	<p>Number of WGBM sensitized on SGBV through awareness raising and outreach activities</p> <p>Number of service providers, humanitarian actors and government counterpart trained on SGBV</p>
<p><b>Health</b></p>		
<p>Access to lifesaving, secondary and tertiary care provided directly or through payment and/ or logistic</p>	<p>Projects that support secondary health care for priority cases, such as Basic Emergency Obstetric care and Newborn Care(BEmONC) and Comprehensive Emergency Obstetric, Newborn Care (CEmONC) including supporting priority medical referrals and comprehensive rehabilitation for children and vulnerable adults</p>	<p>Number of WGBM provided with lifesaving, secondary and tertiary care</p>
<p>Access to emergency obstetric, neonatal and childcare provided directly or through payment and/or logistic.</p>	<p>Projects that support secondary health care for priority cases, such as Basic Emergency Obstetric care</p>	<p>Number of deliveries in presence of skilled Attendant</p>



	and Newborn Care(BEmONC) and Comprehensive Emergency Obstetric, Newborn Care (CEmONC) including supporting priority medical referrals and comprehensive rehabilitation for children and vulnerable adults	
Comprehensive rehabilitation for adults and children with injuries and impairments including mental health provided directly or through payment and/or logistic	Projects that support secondary health care for priority cases, such as Basic Emergency Obstetric care and Newborn Care(BEmONC) and Comprehensive Emergency Obstetric, Newborn Care (CEmONC) including supporting priority medical referrals and comprehensive rehabilitation for children and vulnerable adults	Number of rehabilitation session provided to WGBM
<b>Shelter</b>		
<b>Sector Priorities</b>	<b>JRP Sector Specific Objectives</b>	<b>Standard Indicators</b>
Priority will be given to projects that target vulnerable refugee and host community households living in sub-standard housing conditions. Assistance provided should meet the specific shelter needs that would improve physical living conditions in households as pertaining to safety and protection from the elements. Examples include replacement or maintenance of doors, windows, electrical wiring, as well as maintaining roofs to prevent leaks.	Access to adequate, secure and affordable housing provided for vulnerable refugee and Jordanian women, girls, boys and men in host communities	Number of vulnerable Jordanians and Syrian refugees (WGBM) supported with access to adequate, affordable and secure housing in host communities.  Number of vulnerable Jordanians and Syrian refugees (WGBM) provided with information and awareness on their right to adequate housing.
<b>WASH:</b>		
<b>Sector Priorities</b>	<b>JRP Sector Specific Objectives</b>	<b>Standard Indicators</b>
Private Latrines for disabled and mobility impaired/high need residents in Azraq Camp.	Providing safe and equitable access to gender appropriate sanitation services in camps.	Number of people to benefit from improved wastewater services in the camps.

<p>Provide safe and equitable access to WASH for Women and People with Disabilities.</p>	<p>Sustainable provision of safe and equitable access to water services in <u>camp</u>s as per minimum standards</p> <p>Sustainable provision of safe and equitable access to water services in <u>host communities</u> as per minimum standards</p> <p>Providing safe and equitable access to gender appropriate sanitation services in <u>camp</u>s</p> <p>Providing safe and equitable access to gender appropriate sanitation services in <u>host communities</u></p>	<p>Number of people to benefit from improved water or wastewater services in the camps or host communities</p>
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### III. Project Proposal Preparation and Budget Preparation

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- All project proposals should be submitted via Grant Management System (GMS) **by 16 April 2019 23:55** (Midnight – Jordan time). Any submission after this date will not be considered.
- Once you complete your registration on the GMS, please login to CBPF GMS Support portal and read instructions on how to submit a project proposal. <https://gms.unocha.org/content/partner>
- Project proposals should be prepared in line with the strategic objectives of the JRP and the Allocation Paper. This needs to be supported by clear log frames with outcomes, outputs, SMART indicators and detailed activities.
- Organizations should consult with relevant sector coordinators during the project proposal preparation phase.
- All project proposals must have a detailed budget outlining all the project related expenditures under relevant budget lines. **Please refer to [Operational Manual Annex Project Budget Template](#) and [Annex Budget and Due Diligence Checklist](#) for further details.**
- Budget proposals must reflect the correct and fair budget breakdown of the planned costs and clearly outline units, quantities and percentages. Partners should avoid including only lump sum amounts and provide bill of quantities (BoQs) including list of items and costs per item to total the unit cost for the planned expenditures.
- Provide a budget narrative (as an essential component of the budget) that clearly explains the object and the rationale of any budget line. For example, shared costs, large/expensive assets, and costs/equipment required to support the regular operation of the implementing partner, are clear cases where the provision of details will be necessary in the budget narrative.
- **Project proposals that do not meet the above requirements or with missing financial and budgeting information will not make it to the strategic review stage and project proposal will be eliminated.**

For further guidance on budgeting (eligible and ineligible costs, direct or indirect costs) please also refer to the Operational Handbook for CBPF.

#### A) Eligibility and Allocation Criteria

The review and approval of project proposals are made in accordance with the programmatic framework and focus of the JHF described above and on the basis of the following criteria:

- **Strategic relevance:** clear linkage to JRP strategic and sector(s) objectives, compliance with the terms of the JHF allocation strategy as described in the allocation strategy paper, and alignment of activities with areas of special focus of the Fund;
- **Technical soundness and cost effectiveness:** the proposal meets technical requirements and sector technical guidelines to implement the planned activities; and the budget is fair, proportionate in relation to the context, and adequate to achieve the stated objectives;
- **Needs-based:** the needs are well identified using recent surveys and studies undertaken.
- **Beneficiaries:** beneficiaries should be clearly described and broken-down per type, gender and age. The beneficiaries should be identified based on the vulnerability

- **Appropriateness:** the activities are adequate to respond to the identified needs;
- **Risk management:** assumptions and risks are comprehensively and clearly spelled out, along with risk management strategies;
- **Monitoring:** a realistic monitoring and reporting strategy is developed in the proposal. The JHF encourages the use of participatory approaches, involving affected communities in needs assessment, implementation and monitoring and evaluation;
- **Complementarity with other funding:** Proposal recommending activities that have received funding from other sources should be weighted more favorably than activities that have no other funding,
- **Partnerships:** applicants must provide detailed information about future partnerships under the proposed plan(if any);
- **Value for Money:** projects that can demonstrate the most 'value for money' (e.g. maximum outcome and beneficiary reach for each dollar invested and effectiveness of the intervention) relative to the project budget are prioritized;
- **Accountability to the affected population:** the project must include a section on the Accountability to the Affected Populations and ensure that complaint and feedback mechanisms are in place;
- **Protection, gender, age and disability mainstreaming:** the allocation promotes protection, gender, age and disability mainstreaming and to check the extent to which appropriate measures have been integrated into project design;
- **Environment Marker:** the CRCs verify to which extent the project design is respecting the environmental measures (when it applies);

#### A) Timeline and Procedure

- The HFU will liaise with the implementing partner to determine the start date of the project. The earliest possible start date of the project is the date of signature of the grant agreement by the partner. The agreed upon start date will be included in the grant agreement. If the signature of the grant agreement occurs after the agreed upon start date, the date of the signature of the grant agreement takes precedence. The RC/HC can then sign the grant agreement.
- Upon signature by the RC/HC the HFU notifies the partner that the project has been approved, and sends the agreement for counter signature. Once the partner has countersigned, the agreement will be sent to OCHA FCS Finance Unit in New York for the final signature. Eligibility of expenditures will be determined by the date of implementing partner's signature of the grant agreement.

Task description	Responsible	Key Date
Launch the call and set the allocation parameters in the Grants Management System (GMS)	Humanitarian Financing Unit	2 April 2019
Partners' applications' submission	Implementing Partners Humanitarian Financing Unit	April 2- 16 April

Send application to the Sectors Technical review and recommendations	Humanitarian Financing Unit Sectors' review committees	17 April
Technical Review received from the sector leads	Sector leads	30 April
Inform the AB with the results of the sector committees meetings and share with them list of recommended projects for final recommendation.	JHF Advisory Board, OCHA, HC	7 May 2019
AB to review recommended projects by the sector committees and provide feedback to HFU	AB	12 May 2019
Request the HC's final endorsement	Humanitarian Coordinator	14 May 2019

#### B) HFU information and Complaints Mechanism Contacts

OCHA's Humanitarian Financing Unit (HFU) is the managing agent of the JHF- Jordan, responsible for the daily operations of all programmatic and financial processes, on behalf of the HC and in coordination with the Funding Coordination Section (FCS) at OCHA New York for ensuring compliance with standardized global policies and procedures for Country-based Pooled Funds (CBPFs). The HFU provides support to the partners and clusters during the allocation process, as well as for ongoing project implementation, monitoring, reporting and audits. The GMS Support Help-Portal assists users to navigate through the GMS system with step-by step instructions and screen shots: <https://gms.unocha.org/content/partner>

#### C) Contacts

JHF Manager: Ms. Amani Salah, [salah1@un.org](mailto:salah1@un.org) , +962 (0) 79 535 4227.

JHF Programme Analyst: Mr. Hanna Abubarham, [abubarhamh@un.org](mailto:abubarhamh@un.org) +962 (0) 79 869 0448

JHF Finance Officer: Mr. Abdalrahim Obali, [obali@un.org](mailto:obali@un.org) +962 (0) 79 867 4615

Head of OCHA Jordan Office: Ms. Zola Dowel , +962 (0) 79 897 4078.

#### D) Complaints Mechanism

The following email address, [OCHA-JHFU@un.org](mailto:OCHA-JHFU@un.org) , is available to receive feedback from stakeholders who believe they have been treated incorrectly or unfairly during any of the Fund's processes. OCHA will compile, review, address and (if necessary) raise the issues to the HC, who will then take a decision on appropriate follow-up action.

## E) Acronyms

AB	Advisory Board
CRS	Creditor Reporting System
JHF	Jordan Humanitarian Fund
HRP	Humanitarian Response
CBPF	Country-based Pooled Fund
GMS	Grants Management System
HC	Humanitarian Coordinator
HFU	Humanitarian Financing Unit
JRP	Jordan Response Plan
OCHA	Office for the Coordination of Humanitarian Affairs

## F) Annexes

Annex 1: Gender Guidance

Annex 2: JHF Minimum requirements for Cash-Based Programming

Annex 3: Sector contacts

Annex 4 Sector priorities

## Annex 1 Gender guidance

### **Note for organization submitting projects on Protection and Gender Mainstreaming:**

Protection imperatives will be mainstreamed across all prioritized sectors, as part of the commitment to the “do no harm principle and the “centrality of protection” in the humanitarian response. All proposals must demonstrate how protection principles, including child protection, GBV considerations and Gender Equality are incorporated and protection mainstreaming considered in project design. For example, please consider:

1. How are you ensuring all people can access and use assistance/services provided under the project? Please give specific examples. For instance, what adjustments will be made to ensure elderly or disabled persons can access and use assistance/services? What specific actions will be taken to minimize risks to children’s safety and wellbeing that the project might inadvertently exacerbate?
2. Activity indicators reflecting the project’s considerations of “do no harm” principles, so that protection considerations within the project can be measured.
3. Besides vulnerability criteria, how the project will take the specific needs of vulnerable groups into account? For example, has the method of distribution or the type(s) of service provided been adjusted? How will you ensure that the specific vulnerabilities faced by girls and boys are taken into account when NFI distributions and shelter interventions will be implemented? How will you ensure that distribution points are accessible and safe for women and children? How will you ensure that “less visible” vulnerable groups, such as destitute older persons, people with disabilities, unaccompanied and separated children etc. will have equal access to the services provided based on needs? How will you ensure that the girls and boys of all ages and their caregivers, especially pregnant and breastfeeding women and girls have access to safe and appropriate food?
4. Specific confidential complaints and feedback mechanisms could be set up within to safely receive and respond to allegations of sexual exploitation and abuse experienced by women, girls, boys and men in receiving goods and services provided by the project. Descriptions of the mechanisms should be explained in the proposal for review by Protection sector to ensure that a risk analysis of the complaints and feedback mechanism itself is also conducted.
5. Score the project proposal using the current IASC Gender Marker with clear indications how gender equality elements and measures will be monitored and reported on. This is a self-applied coding system that checks the extent to which gender equality measures have been integrated into project design. It recognises that differences between women, men, boys and girls need to be described and logically connected through three key sections of a proposal:
  - a. The need assessment (context/situation analysis)
  - b. The activities
  - c. The outcomes
6. In all sectors, HF funding will prioritize projects achieving the highest gender marker code signifying that the project has made significant efforts to address gender concerns or the principal purpose of the project is to advance gender equality.

7. Only projects which scores Gender 2A and 2B will be considered for the funding. Exceptions to this requirement must be defended with the intent to build awareness and capacity to ensure the project can achieve the required gender marker during the project period.

The gender marker is only one tool used to promote gender equality. The JHF encourages the use of participatory approaches, involving affected communities (male and females) in needs assessment, implementation and monitoring and evaluation, fielding gender balanced assessment and monitoring teams, developing gender indicators and ensuring programming tools (surveys, strategies, objectives) are gender sensitive.

Please also consult the following link for a specific tip sheet for each cluster. The tip sheet includes a form to assist teams in reviewing project Gender Marker codes. These and other resources are available in four languages (including Arabic) at:

<http://www.humanitarianresponse.info/themes/gender/the-iasc-gender-marker>

<https://www.humanitarianresponse.info/topics/gender/document/gender-marker-tip-sheets-arabic>

<http://www.humanitarianresponse.info/topics/gender/document/gender-marker-tip-sheets-english>

## **Annex 2 Cash Guidance**

### **Background and purpose**

The purpose of this guidance note is to advance the ongoing consultative process within OCHA in order to support Humanitarian Financing Units (HFUs) in:

- a. Ensuring project proposals related to cash transfer programming (CTP) are developed based on agreed sectoral and in-country minimum requirements.
- b. Putting in place appropriate quality assurances (incl. monitoring mechanisms) across funds
- c. Tracking past and ongoing projects with cash-component to compile best practices.

CBPF Partners are expected to adhere to in-country sectoral and government regulations and rules on CTP, noting that adherence to the following requirements does not guarantee the approval of project proposals with cash transfers submitted under CBPF allocations.

### **Minimum Requirement 1: Partner Performance**

1. Partner experience in CTP is evidenced and endorsed by the Cluster or Cash Working Group (CWG).
2. Partner addresses risk of misappropriation of funds, duplication of assistance, security of staff and/or beneficiaries in proposal narrative or through organizational regulations.
3. Partner clearly demonstrates the benefit of cash for beneficiaries versus other interventions.

### **Minimum Requirement 2: Cash Feasibility**

4. Market assessments and analysis have been conducted for the geographic area in question, and the impact of the action on local markets has been evaluated.



5. Acceptance of CTP amongst beneficiaries and Government has been evaluated.
6. Financial service provider capacity and availability of transfer mechanisms have been assessed.

### **Minimum Requirement 3: Distribution of Cash Assistance**

7. Cash transfer mechanism options (such as cash in-hand, vouchers, mobile phone payments, number of instalments, amount, and currency) are clearly explained in proposal.
8. Process and details of distribution are specified, with access constraints addressed and, where relevant, crowd control-flow.
9. Benefit of the chosen distribution modality chosen is clearly demonstrated and Cluster or CWG approved.

### **Minimum Requirement 4: Monitoring and Post-Distribution Monitoring (PDM)**

10. Partner has established a proper PDM mechanism (internal or external, possible role for the CWG), considering access constraints and including a PDM questionnaire.
11. Partner will submit a PDM report to the HFU for endorsement and further sharing with CWG, the Clusters, and OCHA.

### Annex 3:

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# JORDAN REFUGEE RESPONSE

## INTER-SECTOR WORKING GROUP

Priorities for the 1<sup>st</sup> standard allocation – April 2019



### JHF PRIORITIES

The Inter-Sector Working Group discussed the priorities for the purposes of the Jordan Humanitarian Fund (JHF) call for proposals of March 2019.

Based on the strategic focus of JHF 2019 to support national priorities with special focus on protection and gender as a cross cutting approach while considering the established 5 targets, the Inter-Sector Working Group discussed in the February ISWG meeting on the strategic focus for the 2019 March JHF call, after which the sectors discussed with their members and decided the following priorities with the aim to address the existing gaps in their respective sectors.

### Child Protection

#### Background:

Specific groups of refugee children remain at risk of protection risks, including separation from family members or care givers, children with disabilities exposed to violence, abuse and neglect or exploitation as well as children in conflict with the law. In a recent child protection gap analysis, critical gaps have been identified in addressing their needs has been highlighted, including specific protection interventions for refugee children with disabilities as well as innovative community-based responses to specific child protection risks including on alternative care and enhanced access to justice through a restorative approach.

**Outlined gaps are listed as per sector priorities:**

#### 1) Community-based alternative care mechanisms

Since the onset of the Syria emergency, refugee children arrived to Jordan separated from their parents or relatives as unaccompanied children. Through targeted case management programs for unaccompanied refugee children, a large number of children was reunified with parents inside or outside Jordan as well as placed with relatives. However, to date, specific protection concerns and emergencies lead to separation of children from parents, care givers or relatives, including death, hospitalization or detention of parents. Unaccompanied refugee children do not consistently receive appropriate care services through the community which has resulted in institutionalization of children. Additionally, community support mechanisms for vulnerable parents are needed to prevent separation of children from parents for their safety and protection, including family-based support networks, peer to peer support, comprehensive prevention and response services to reduce socio-economic vulnerabilities, including through cash-based interventions. While this protection need was identified as a critical humanitarian gap in the child protection response to the most vulnerable, due to limited capacities and lack of funding, this activity has not been covered by any child protection actor in Jordan.

#### Geographical priority:

- Urban areas in Jordan (all) as there are non-existent for refugee children in urban areas

#### 2) Access to justice for children

Critical child protection gaps for refugee child victims, witnesses, (alleged) offenders have been identified in both judicial and administrative processes. 90% of children in conflict with the law are in pre-trial detention with limited access to child protection and care services. Lack of comprehensive responsive, remedial and environmental building actions in the justice sector negatively impact the protection situation and vulnerability and may lead to delinquency and victimization. According to the law detention of children is the last resort and restorative approaches, including diversion should be assessed prior to placement in detention/ juvenile facilities. The programmatic response will focus on prevention and alternatives to detention. This includes tailored-made prevention activities such as

community and school-based awareness sessions on how to engage with children in conflict with the law after release. Refugee children in detention lack specialized child-friendly legal aid, rehabilitative psychosocial support, formal and non-formal educational (including vocational training, life skills, learning support services) as well as safe recreational activities for children. In addition, aftercare programs for refugee children including case management and follow up, remedial and inclusive educational accompaniment, peer-to-peer support, mentoring programs, psychosocial support, etc. for children released from juvenile centers are a critical gap to ensure children are able to safely and sustainably reintegrate in the community. Capacity-building for justice and social duty-bearers such as on-the-job-training to properly engage with children in conflict and in contact with the law according to child protection standards are highly needed.

**Geographical priority:**

- All urban areas (as there are no juvenile centers in camps, the urban response address children in conflict with law ) but projects in urban areas target all children in conflict

**3) Targeted Protection interventions for children with disabilities**

Based on child protection case management data, children with disabilities are at heightened risk of violence, exploitation and neglect. The community, including parents of refugee children with disabilities, has a limited understanding and knowledge of the needs and care for children with disabilities, particularly those with intellectual disabilities. Parents and community members require targeted capacity building support on how to properly take care of children with disabilities to ensure they are included in existing activities and have equal access to services. Particularly in urban areas and southern governorates of Jordan, children with limited mobility face challenges in participating in social and community life. Existing child protection, psychosocial support, health and nutrition services or educational activities in centers do not take needs and rights of children with disabilities into consideration when programming and planning their activities. Similarly, children with disabilities should be supported in accessing justice and protection services.

**Geographical priority:**

- Mainly urban areas, particular North and South

<b>JRP Sector Priority</b>	<b>Specific priorities based on gap analysis</b>	<b>Specific objective for each priority</b>	<b>Impact indicator</b>	<b>Specific Indicator</b>
Strengthened and expanded national and sub-national protection systems that meet the international protection and social protection needs of vulnerable groups in the governorates most affected by the Syria crisis	Community-based alternative care mechanisms	REF 1.8 Providing quality child protection services to the most vulnerable children in Jordan.  RES 1.4 Strengthening community-based multisectoral protection mechanisms through outreach and community mobilization.	Children separated from families or care givers have access to community-based alternative care mechanisms	# of institutional capacity development interventions (excluding training) implemented  # Number of children who were placed in family-based care [foster care, kinship care], residential care [including small group homes], supervised independent living arrangements, etc.)  #WGBM accessing community-based protection services

<p>Strengthened and expanded national and sub-national protection systems that meet the international protection and social protection needs of vulnerable groups in the governorates most affected by the Syria crisis</p>	<p>Access to justice for children</p>	<p>REF 1.8 Providing quality child protection services to the most vulnerable children in Jordan.</p> <p>RES 1.2 Strengthening National Child Protection Systems</p>	<p>Children in contact with the law are receiving with child-friendly and child-centered services;</p> <p>Parents and community members are sensitized on child protection</p> <p>National institutions are supported to provide necessary service and care for children in conflict with the law</p>	<p># of institutional capacity development interventions (excluding training) implemented</p> <p># of girls and boys with protection vulnerabilities with improved access to protection services</p> <p># of children in Jordan who benefited from a diversion order (settlement by police, and at court level) or alternative measure as opposed to a custodial sentence</p> <p># of children who were sentenced to an alternative measure</p>
<p>Strengthened and expanded national and sub-national protection systems that meet the international protection and social protection needs of vulnerable groups in the governorates most affected by the Syria crisis</p>	<p>Targeted Protection interventions for children with disabilities</p>	<p>REF 1.8 Providing quality child protection services to the most vulnerable children in Jordan.</p> <p>RES 1.2 Strengthening National Child Protection Systems</p>	<p>Children with disabilities at risk have access to case management and specialized services</p> <p>Children with limited mobility are actively participating in social and community life</p>	<p># of institutional capacity development interventions (excluding training) implemented</p> <p># of girls and boys with protection vulnerabilities with improved access to protection services</p>

**SGBV**

Priority: SGBV prevention and response activities addressing programmatic gaps in underserved areas

**Justification:**

SGBV continues to pervade the lives of women and girls and other vulnerable groups in the refugee and host community. Gender norms combined with an extended length of displacement contribute to increase risks of SGBV. Analysis from GBV IMS and other assessments highlight heightened risks faced by women and girls. Although GBV prevention and response services are available in Jordan there are still gaps in terms of geographical coverage as well as gaps in terms of specific programmatic intervention. SGBV services are life-saving thus funding is required to cover existing gaps. 2017-2018

SGBV gap analysis has been updated from 2018 version and it underlines a number of critical gaps in the current response, programmatic priorities listed below are based on this draft document.

The priorities are as well in line with intervention for the prevention and response to sexual and gender based violence under the JRP objective of “Strengthened and expanded national and sub-national protection systems that meet the international protection and social protection needs of vulnerable groups in the governorates most affected by the Syria crisis”.

<b>JRP Sector priorities</b>	<b>Specific objective for each priority</b>	<b>Programmatic priorities</b>	<b>Standard indicator/s</b>
Strengthened and expanded national and sub-national protection systems to meet the international protection and/or social protection needs of vulnerable groups in the governorates most affected by the Syria crisis.	REF 1.7 Preventing and responding to sexual and Gender Based Violence	1. Urgent cash assistance for SGBV survivors in camps and urban integrated in SGBV case management programs:	# of WGBM (including survivors) accessing SGBV prevention and response services in safe spaces # of service providers, humanitarian actors and government counterpart trained on SGBV
Strengthened and expanded national and sub-national protection systems to meet the international protection and/or social protection needs of vulnerable groups in the governorates most affected by	REF 1.7 Preventing and responding to sexual and Gender Based Violence	2. Innovative prevention activities	# of WGBM sensitized on SGBV through awareness raising and outreach activities # of service providers, humanitarian actors and government counterpart trained on SGBV

the Syria crisis.			
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**Programmatic priorities:**

- **Urgent cash assistance for SGBV survivors** in camps and urban integrated in SGBV case management programs: survivors need urgent cash to relocate within or outside the camp as well as to cover other urgent basic needs. Currently there are no urgent cash assistance for SGBV survivors in camps (aside from small scale program in one location), urgent cash assistance is available in urban but some areas are underserved.  
Geographical priority: camps, underserved urban areas (especially South).
- **Innovative prevention activities:** prevention activities continue to remain a major gap in Jordan and there is a need to shift from a response oriented programming towards SGBV prevention. Some of the on-going prevention activities are unstructured and do not always have tangible impact on the ground. Projects focusing on innovative prevention methods will therefore be prioritized, when in line with a behavioural change approach and use of technology or other innovation. The project can include one or more prevention interventions as women empowerment activities, integrated livelihood and SGBV programs as well as outreach and community led prevention activities. Lessons learnt and development of tools for knowledge transfer are encouraged. Geographical priority: Azraq camp, Mafraq, Amman, South (especially programs with mobile component involving outreach to ITS) other underserved urban areas.

**Health**

SSO: Increased equitable access, uptake and quality of secondary and tertiary healthcare for Jordanian and Syrian WGBM in impacted areas.

Objective	Output	Indicator
Projects that support secondary health care for priority cases, such as Basic Emergency Obstetric care and Newborn Care (BEmONC) and Comprehensive Emergency Obstetric, Newborn Care (CEmONC) including supporting priority medical referrals and comprehensive rehabilitation for children and vulnerable adults	1- Access to lifesaving, secondary and tertiary care provided directly or through payment and/or logistic.	# of WGBM provided with lifesaving, secondary and tertiary care
	2- Access to emergency obstetric, neonatal and childcare provided directly or through payment and/or logistic.	# of deliveries in presence of skilled Attendant
	3- Comprehensive rehabilitation for adults and children with injuries and impairments including mental health provided directly or through payment and/or logistic.	# of rehabilitation session provided to WGBM

**Justification**

The health sector in Jordan continues to face increasing needs and vulnerabilities with continued demand for services from refugees, a changing population demographic, changing epidemiology of disease and increasing rates of determinants of poor health. Rising healthcare costs, of both services and supplies, also raise issues of sustainable financing mechanisms for this increased demand. The health sector response strategy will focus on durable solutions and aims to maintain humanitarian programming and continue to meet the immediate and short-term health needs of individual refugees.

In 2018 health sector were able to raise only 78% of their total needs while the current funding levels mean that only 62% of refugees living in urban settings will be covered by health services, leaving over 200,000 people with uncertain access. The Vulnerability Assessment Framework (VAF) health sector vulnerability indicator found that 5% of Syrians are part of households with severe health vulnerability and 50% are part of households with high health vulnerability. Moreover the VAF found 20% of Syrians are severely vulnerable in terms of being able to access health services when needed and 38 % of households have the presence of pre-existing medical conditions (e.g. disabilities or chronic illnesses) that are negatively impacting a family member’s day to day life and of Syrian households report that they spend more than 63% of their expenditure on health care.

Based on the above vulnerabilities, the identified priority to JHF will focus on maintaining long-term affordable access to comprehensive essential health services for all refugees, VAF will be used to identify most vulnerable refugees who can afford service while refugees in the camps and major north urban centers will be the main targeted group for this call.

Finally, all projects and planned interventions should aims to mitigate vulnerabilities that facing refugees and improve the response to ongoing and standing population needs.

## Shelter

<b>SHELTER</b>		
<b>Sector Priorities</b>	<b>JRP Sector Specific Objectives</b>	<b>Standard Indicators</b>
Priority will be given to projects that target vulnerable refugee and host community households living in sub-standard housing conditions. Assistance provided should meet the specific shelter needs that would improve physical living conditions in households as pertaining to safety and protection from the elements. Examples include replacement or maintenance of doors, windows, electrical wiring, as well as maintaining roofs to prevent leaks.	Access to adequate, secure and affordable housing provided for vulnerable refugee and Jordanian women, girls, boys and men in host communities	Number of vulnerable Jordanians and Syrian refugees (WGBM) supported with access to adequate, affordable and secure housing in host communities. Number of vulnerable Jordanians and Syrian refugees (WGBM) provided with information and awareness on their right to adequate housing
Activities: The modality of assistance (in-kind); to be defined by partners	Geographic location: Irbid, Mafrqa, Eastern Amman, Madaba and Zarqa.	
Partners are to outline clear criteria for the selection of locations and vulnerable households - priority will be given to projects that can demonstrate sophisticated targeting methods to reach those with the most difficult housing conditions. Proposed interventions should be in line with existing Shelter Working Group technical guidelines (Upgrading of Sub-Standard Shelters, Sealing Off Kits). Finally, partners are to also demonstrate that projects will be implemented in a timely manner.		
Justification For the purpose of this call, the SWG has focused on the shelter condition ratings in the VAF, as it relates to the physical aspects of the house;		



- 37% of households surveyed in the North reported having sub-standard roofs.
- 47% of households surveyed in the North have sub-standard openings.
- 41% of households surveyed in the North have sub-standard conditions and safety of electrical features.
- In Amman governorate, 11% of people surveyed were found to have no protection from the elements (shelter condition – 4)
- In the north, 45% have substandard and unsafe houses or no protection from the elements.

Jordan Humanitarian Fund JHF/ WASH Sector

Priorities	location	JRP Sector Specific Objectives/outputs	Standard Indicators	Cross cutting issues	Justification
Private Latrines for disabled and mobility impaired/high need residents in Azraq Camp.	Azraq Refugee Camp	SSO 6: Providing safe and equitable access to gender appropriate sanitation services in camps	Number of people to benefit from improved wastewater services in the camps	<p>Disability: The different needs of people with disabilities must be considered when planning and building latrines.</p> <p>Gender: Improved access to private latrines for women who typically carry the burden of domestic care activities for disabled family members.</p> <p>Shelter: Damage and vandalism to existing shelters may be reduced through reduced drivers for community members to vandalise existing structures to construct own private latrines.</p> <p>Protection: Reduced safety risks through reduction in the number of vulnerable people accessing public WASH blocks.</p>	<p>There are over 3,000 WASH blocks across the four villages in the camp. Twelve shelters (one plot) are served by two twin sanitation blocks, comprised of latrine and bathing areas.</p> <p>Community feedback indicates that the current facilities do not provide for the specific needs of women, men, boys, and girls, particularly the elderly and those with disabilities or other mobility constraints.</p> <p>The need for private latrines was the top gap identified in the sector sanitation assessment in Azraq camp, from Nov 2018 to January 2019.</p> <p>A social survey was conducted and includes several questions on the interviewees' priorities to enhance the sanitation system in the camp. The provision of private toilets occupies the highest frequency amongst the other identified priorities for enhancing the sanitation system in the camp. The private latrines can be connected to the existing greywater system (partly constructed using JHF fund), which has the capacity to function as a wastewater system based on the technical design.</p> <p>Privacy and social appropriateness including unwanted interaction with opposite sex, and, safety, are the main reasons why refugees prefer private latrines than communal WASH blocks.</p> <ul style="list-style-type: none"> <li>• Privacy and social appropriateness: Given the conservative culture and social norms of the camp population, using</li> </ul>

				<p>SGBV: Reduced unwanted interaction between community members.</p> <p>Livelihoods: livelihood opportunities to be supported through employment of refugees to implement the works where possible.</p>	<p>public latrines was described as inappropriate and a source of embarrassment, particularly to women.</p> <ul style="list-style-type: none"> <li>• Unwanted interactions with the opposite sex: The possibility of coinciding with other residents using the latrines, particularly members of the opposite sex, is a source of embarrassment on a daily basis to both men and women.</li> <li>• Safety: Risks to the safety of children and women, especially after dark. Children (boys and girls), women, elderly individuals, and persons with disabilities were identified as most vulnerable to the safety concerns.</li> </ul> <p>These findings were further confirmed through the concerns raised in the recent gender analysis work conducted by the WASH Working Group. Not only do people—particularly women and girls—feel unsafe using communal WASH facilities, but it also puts a greater strain on women who are largely responsible for washing children and adults with mobility issues.</p> <p>The project could be initiated across one or all villages and implemented through one or more agencies depending on funding availability. A vulnerability/disability assessment and criteria would form the basis for the provision of private latrines if the program could not be scaled to cover all households.</p>
Provide safe and equitable access to WASH for Women and People with Disabilities.	Camps and Host Communities	SSO 4, 5, 6 and 7  SSO 4: Sustainable provision of safe and equitable access to water services in camps as per minimum standards	Number of people to benefit from improved water or wastewater services in the camps or host communities	Gender: The report’s recommendations focus on gaps by the WASH sector in gender mainstreaming.	In August and September 2018, UN Women carried out a study which resulted in the publication of a ‘Gender Analysis of the WASH Sector – Jordan’. This report focuses on gaps in gender mainstreaming within the WASH sector, including a significant gap in the WASH sectors capacity around the safe identification and referral of SGBV cases.

		<p>SSO 5: Sustainable provision of safe and equitable access to water services in host communities as per minimum standards</p> <p>SSO 6: Providing safe and equitable access to gender appropriate sanitation services in camps</p> <p>SSO 7: Providing safe and equitable access to gender appropriate sanitation services in host communities</p>		<p>Disability: The report's recommendations also focus on People With Disabilities and Older Adults</p> <p>Livelihoods: Livelihood opportunities to be supported through Income Based Volunteering or Cash for Work modalities where suitable. Inclusion of Women in income based opportunities should be prioritised.</p> <p>Protection/SGBV: The report makes a specific recommendation on building capacity for safe identification and referral of SGBV cases for front-line staff.</p>	<p>The report also includes recommendations relating to People With Disabilities and Older Adults.</p>
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