### MICRO-CAPITAL GRANT AGREEMENT

# MICRO-CAPITAL GRANT AGREEMENT BETWEEN THE **UNITED NATIONS DEVELOPMENT PROGRAMME**(UNDP) AND HANDICAP INTERNATIONAL FOR THE PROVISION OF GRANT FUNDS UNDER A UNDP-SUPPORTED PROJECT

This Agreement (hereinafter referred to as the "Agreement") is made between the UNDP Sierra Leone and Handicap International.

WHEREAS Handicap International (hereinafter referred to as "HI") has been requested by the United Nations Development Programme ("UNDP") to manage the project defined in the project document "Support to persons with disabilities, and sex workers, two of the most vulnerable groups worst hit by the EVD crisis" with Project ID: 00094847 (hereinafter referred to as "the Project"), implemented at the request of the Government of Sierra Leone.

WHEREAS the UNDP desire to provide funding, in the form of a Micro-Capital Grant (hereinafter referred to as "the Grant") made to HI (the "Recipient Institution") in the context of the Project, and on the terms and conditions set forth in this Agreement; and

WHEREAS the Implementing Partner is ready and willing to accept such funds from the UNDP for the activities described in the following, and on the said terms and conditions;

NOW, therefore, the parties hereto agree as follows:

### Responsibilities of HI

- 1.1 HI agrees to:
  - 1. Undertake the activities described in its **Workplan** and **Budget** which are attached to this Agreement respectively as Annex 2 and Annex 5, or subsequent updates hereof to be approved by the **UNDP** of the Project;
  - 2. Report to the UNDP on the utilization of the Grant in accordance with Article IV below.
- 1.2 HI shall manage its operations in order to maximize its performance
- 1.3 HI commits itself to reaching the performance targets set out in Annex 3 to this Agreement. If the HI fails to meet its responsibilities outlined in article 1.1, or to attain at least 70% of any one performance target for any given period, UNDP will have the right to suspend all or part of the microcapital grant support to HI. Upon request of UNDP, and for its consideration in determining the period of the extension, HI shall be obligated to produce a written explanation detailing the reasons the target was missed, and measures taken by HI to remedy the situation. The suspension shall remain in effect until UNDP is satisfied that HI has achieved the target.
- 1.4 HI shall inform UNDP about any problems it may face in attaining the objectives agreed upon, as soon as such problems are encountered.

### II. Duration



2.1 This Agreement will come into effect on 1<sup>st</sup> April and shall expire on 31<sup>st</sup> July 2015, covering the anticipated term of the project. The Agreement may be extended beyond this period through an exchange of letters between the Parties, noting the new expiration date.

### III. Payments

- 3.1 UNDP shall provide funds to HI in an amount up to the equivalent of 150,000 US Dollars, one hundred and fifty thousand United States Dollars (six hundred and sixty seven million, five hundred thousand Sierra Leone Leones) according to the schedule of the project budget set out in Annex 4, with the equivalent of USD 60,000 to be paid upon signature of this Agreement. The second tranche of the equivalent of USD 60,000 will be paid upon receipt and approval of HI project narrative and financial reports by UNDP. The third tranche of the equivalent of USD 30,000 will only be disbursed after the receipt and approval of the second project narrative and financial reports by UNDP. Payments are subject to HI meeting the outputs as specified in Annex 3 below.
- 3.2 All payments shall be deposited into HI's bank account (especially meant for UNDP Micro-Capital Grant) of which the details are as follows:

LCL – Credit Lyonnais
ASS FEDERATION HANDICAP INTERNATIONAL
ACCOUNT NUMBER: 0000060121Z - 20
IBAN: FR79 3000 2019 5800 0006 0121 Z20

3.3 The amount of payment of such funds is not subject to any adjustment or revision due to changes in prices, exchange rates or the actual costs incurred by HI in the performance of the activities under this Agreement.

### IV. Records, Information and Reports

- 4.1 HI shall maintain clear, accurate and complete records in respect of the funds received under this Agreement.
- 4.2 HI shall furnish, compile and make available at all times to UNDP any records or information, oral or written, which UNDP may reasonably request in respect of the funds received by HI.
- 4.3 Within thirty days after completion of project activities, HI shall provide UNDP with a final report with respect to all expenditures made from such funds (including salaries, travel and supplies) and indicating the progress made toward the goals of the activities undertaken, utilizing the correct reporting format in Annex 6 below.
- 4.4 Provide interim reports to UNDP; and Provide Annual Audited Statements [Income Statement and Balance Sheet].
- 4.5 All correspondence regarding the implementation of this Agreement shall be addressed to:

UNDP Country Director, 55 Wilkinson Road, P.O. Box 1011, Freetown, Sierra Leone HI Country Director, 43 Freetown Road, Lumley, Freetown

### V. General Provisions

- 5.1 This Agreement and the Annexes attached hereto shall form the entire Agreement between **UNDP** and **HI**, superseding the contents of any other negotiations and/or agreements between the Parties, whether oral or in writing, pertaining to the subject of this Agreement.
- 5.2 The HI shall carry out all activities described in its Workplan with due diligence and efficiency. Subject to the express terms of this Agreement, it is understood that HI shall have exclusive control over the administration and implementation of the activities referred to above in paragraph 1.1 and that UNDP shall not interfere in the exercise of such control. However, both the quality of work and the progress being made toward successfully achieving the goals of such activities shall be subject to review by UNDP. If at any time UNDP is not satisfied with the quality of work or the progress being made toward achieving such goals, UNDP may: (i) withhold payment of funds until in its opinion the situation has been corrected; or (ii) declare this Agreement terminated by written notice to HI as described in paragraph 6.8 below; and/or seek any other remedy as may be necessary. UNDP's determination as to the quality of work being performed and the progress being made toward such goals shall be final and shall be binding and conclusive upon HI insofar as further payments are concerned.
- 5.3 UNDP undertakes no responsibilities whatsoever in respect of life, health, accident, travel or any other insurance coverage for any person employed by HI to undertake activities under this Agreement. Such responsibilities shall be borne by HI.
- 5.4 The rights and obligations of HI are limited to the terms and conditions of this Agreement. Accordingly, HI and personnel performing services on its behalf shall not be entitled to any benefit, payment, compensation or entitlement except as expressly provided in this Agreement.
- Nations, UNDP, its officials, agents, servants and employees from and against all suits, claims, demands, and liability of any nature or kind, including their costs and expenses, arising out of acts or omissions of HI, or its employees, officers, agents or sub-contractors, in the performance of this Memorandum of Understanding. This provision shall extend, inter alia, to claims and liability in the nature of workmen's compensation, products liability and liability arising out of the use of patented inventions or devices, copyrighted material or other intellectual property by HI, its employees, officers, agents, servants or sub-contractors. The obligations under this provision do not lapse upon termination of this Memorandum of Understanding.
- 5.6 Assets (Credit Funds and Equipment) supplied by UNDP funds to HI shall be the property of UNDP until the end of the project, at which time UNDP shall determine the best use of these assets, in accordance with its Financial Regulations and Rules. The assets shall be used for the purpose indicated in the Workplan throughout the period of this Agreement.
- 5.7 This Agreement may be terminated at any time by either Party giving thirty (30) days written notice to the other Party. Upon termination of the Agreement, HI shall promptly return any unutilized funds to UNDP.
- 5.8 No modification of or change to this Agreement, waiver of any of its provisions or additional contractual provisions shall be valid or enforceable unless previously approved in writing by

5.9 Any controversy or claim arising out of, or in accordance with this Agreement or any breach thereof, shall unless it is settled by direct negotiation, be settled in accordance with the UNCITRAL Arbitration Rules as at present in force. Where, in the course of such direct negotiation referred to above, the parties wish to seek an amicable settlement of such dispute, controversy or claim by conciliation, the conciliation shall take place in accordance with the UNCITRAL Conciliation Rules as at present in force.

The parties shall be bound by any arbitration award rendered as a result of such arbitration as the final adjudication of any such controversy or claim.

5.10 Nothing in or relating to this Agreement shall be deemed a waiver of any privileges and immunities of the United Nations, or UNDP.

IN WITNESS WHEREOF, the undersigned, duly appointed representatives of **UNDP** and **HI**, respectively, have on behalf of UNDP and **HI** signed the present Memorandum of Agreement on the dates indicated below their respective signatures.

On behalf of UNDP:

Name: Sudipto Mukerjee

Title: Country Director, UNDP

Signature and date:

On behalf of HI:

Name:

inter Cont

Signature and date:

### Annex 1: Project Document

### **Executive Summary**

The main aim of this project is to assist two of Sierra Leone's most vulnerable special needs groups – people living with disabilities and sex workers – to weather the Ebola crisis, to contribute to the Ebola response and to have a head start on the road to sustainable recovery. The main areas of intervention will include: supporting people with disabilities to participate in the EVD response, thereby helping to counter stigmatization against them; bolstering food security and basic needs of people with disabilities who have been substantially affected by the economic and social impacts of the crisis; ensuring access to education for children with disabilities/children living in homes for people with disabilities, while schools are closed during the emergency, and supporting sex workers with knowledge on EVD and HIV prevention and protective equipment. Through empowering sex workers, and helping to prevent Ebola outbreaks in disabled homes and addressing some of the most acute social impacts affecting people with disabilities during the crisis, the project will help to maintain progress made with regards the rights of these special needs groups before the outbreak.

### Situation Analysis

The Ebola Virus Disease (EVD) outbreak in West Africa has been globally described as the largest, most fatal and widespread in history with a reported case fatality rate of about 70%. The epidemic struck first in Guinea on the 6th of December 2013 and then spread to neighbouring Liberia in March. The first confirmed case in Sierra Leone was identified on 25th May 2014. Impacts of the outbreak in Sierra Leone go far beyond EVD. The economy of Sierra Leone has been hard hit by the crisis, and the knock-on social effects — including limited health care for non-Ebola patients, massive disruption in education, increases in sexual and gender based violence, surges in teenage pregnancy, loss of livelihoods and food insecurity — have been far-reaching. As in any crisis, vulnerable groups including women, children and people with disabilities have been particularly affected.

The Ebola outbreak in Sierra Leone has seen the already dire situation faced by persons with disabilities deteriorate rapidly. Many people with disabilities rely on touch for their mobility; people with disabilities therefore find it difficult to avoid body contact. The fact that people with disabilities, marginalized in society, group together and live in close quarters, also puts them at high risk of contracting EVD. In addition, the stigma faced by persons with disabilities has been heightened as a result of the current crisis. Many people see persons with disabilities as infectious, which affects their ability to sustain their livelihoods. Relying on begging in this context when the majority of people have been negatively affected by the economic impact of the crisis is also not feasible. Other sources of livelihood – petty trade, handicrafts and repairs – have been largely depleted.

Children of persons with disabilities are also stigmatized, even when able-bodied. People with disabilities often rely on their children for future security and education is key in ensuring that children will eventually be able to provide a sustainable living for the whole family. The shutting down of schools and the potential for major disruption in education for thousands of children has therefore disproportionately affected people with disabilities.

Until the last quarter of 2014, people with disabilities had been largely left out of the Ebola response. UNDP through partnership with national civil society organization, One Family People (OFP), helped to ensure that preventative messages reach persons with disabilities through community sensitization and dissemination of materials in braille and sign language. UNDP and OFP have ensured that people with disabilities from 45 communities nationwide have benefitted from direct sensitization and that people with disabilities are not just viewed as liabilities to society, but are actively involved as actors in the response. Although substantial successes were booked during the initial intervention, longer-term support is needed to scale up support and to better address existing needs, in line with Transitional Joint Vision Cluster 4: Social Protection, Child Protection,

Gender Equality and Human Rights. The basic rights and dignity of persons with disabilities are threatened by the crisis and women and children with disabilities are even more vulnerable.

According to a study conducted by the National AIDS secretariat and UNAIDS (August 2013) it is estimated that there are approximately between 180,000 and 300,000 female sex workers (FSWs) in Sierra Leone and that approximately 4% to 8% of women in major cities engages in sex work. The majority of sex workers are between the ages of 15 to 24. The high number of children among FSWs is alarming. Conservative estimates indicate that there are over 6000 Female Sex Workers in Freetown.

Ebola is spread through close body contacts and fluids such as blood, sweat, faeces, vomit, semen and spit from an infected person or from sex with a male survivor up to 90 days after he has been declared cured from EVD. Sex workers are therefore at direct and heightened risk of contracting EVD because of the direct body and sexual contact they have with a high number of partners. Levels of awareness and knowledge about transmission, prevention and what to do after having been exposed or when presenting symptoms is lower among women, young people and less educated/illiterate respondents. Sex workers who typically are women, young and less educated are likely to have among the lowest levels of awareness and precise knowledge about Ebola and how to adapt their behaviour to cope with Ebola. Adding to this is the fact that female sex workers have been largely overlooked by the response.

The above-mentioned study also reconfirmed clearly that sex workers are at high risk for the contraction of HIV and STIs. Among the 1021 FSWs interviewed, 434 (43%) reported having had an STI in the previous year, and 668 (68.7%) reported using a condom the last time they had sex with a client. FSWs under 15 years of age were least likely to report condom use with their most recent client (35%). In the same study sex workers reported experiencing stigma, discrimination and violence from community members, family members, paying partners and police.

The changing nature of the EVD epidemic such as a shift from a rural to a predominantly urban epidemic, cases of new infections due to sexual transmission by survivors requires a particular focus on special needs populations and the People Left Behind. Those people that are not effectively reached by interventions targeting the general population for a variety of reasons such as extreme poverty, age, low levels of education and illiteracy, disability, stigma and discrimination and other factors that exclude and marginalize people and communities.

Closing the gap and ensuring the rights of these populations to comprehensive and tailored information on EVD requires putting in place targeted approaches and messaging that overcome the obstacles preventing special needs populations from being reached. This project therefore aims to provide tailored messages about EVD through appropriate channels and approaches targeting two special needs groups.

### Project Justification

Through partnership with local and international organizations that are highly experienced in working with persons with special needs in Sierra Leone and addressing the above mentioned issues, UNDP will assist two of the most vulnerable groups in Sierra Leonean society, not only to successfully weather the crisis, but also to achieve early recovery. Handicap International chairs the EVD cluster meeting on Special Needs, meaning that they are ideally placed to help coordinate the project and ensure that it compliments efforts by other groups and by government counterparts. The emphasis on sustainable livelihoods and education for people with disabilities will have far reaching benefits beyond the life of the project, and beyond the EVD crisis. The inclusion of mapping exercises to identify the various needs of different communities will ensure that the project targets the most vulnerable groups and will also feed into longer-term recovery programming. In addition, the partners will also produce monitoring tools and guidelines to track knowledge, and behaviour

change, which can be used in case of future outbreaks. The targeting of sex workers, who are one of the highest risk groups when it comes to EVD exposure, is extremely timely in order to avoid a spike or revival in case numbers as a result of unprotected sex with male survivors.

### **Project Outcomes and Activities**

### Outcome 1: People with disabilities are supported to contribute and participate in the EVD response, helping to counter stigmatization against them in the short, medium and long term

Activity 1.1: Sensitization efforts scaled up to reach all homes/communities for people with disabilities in Sierra Leone and to appoint focal points (Ebola Outreach Committees) who will speak for their communities on radio and in other forums, ensuring the needs and strengths of people with disabilities are highlighted. Buckets and soap are provided to homes to ensure that they have some of the means to prevent EVD.

Activity 1.2: Representatives of people with disabilities (EOCs) are supported to carry out advocacy with local and national authorities on the specific needs of people with disabilities and the implementation of the Persons with Disabilities Act 2011, during and after the crisis. This will also help to build the capacity of national institutions including the Commission for People with Disabilities.

### Outcome 2: Food security and basic needs of people with disabilities are safeguarded

Activity 2.1: Cash transfers and solidarity kits provided to homes/communities of people with disabilities to mitigate impacts of the crisis, with a view to expanding support for sustainable livelihoods in the early recovery phase

Activity 2.2: A rapid but comprehensive assessment of markets and feasibility for different livelihood initiatives in different homes/communities nationwide will be carried out. Particular attention is paid to livelihoods of women with disabilities who are particularly marginalized and rely more heavily on begging

# Outcome 3: Children with disabilities/children living in homes for people with disabilities have access to education during the EVD crisis and Sex-workers in Western Area can protect themselves from Ebola, HIV and other STIs

Activity 3.1: UNDP will support volunteer teachers to deliver lessons and educational materials to children in homes/communities of people with disabilities

Activity 3.2: UNDP will support communities/homes for people with disabilities to gain access to the radio education programming by the Ministry of Education

Activity 3.3: One on one outreach sessions will be carried out with sex workers in Western Area to provide them with comprehensive and tailored Ebola and HIV prevention information

Activity 3.4: Condoms are distributed to female sex workers in order to prevent Ebola, HIV and other STIs

### Management and coordination arrangements

As the recipient agency, UNDP will manage the project and provide technical support to implementing partners – One Family People (OFP) and Handicap International (HI). UNDP will establish a Steering Committee for the project including implementing partners, the Ministry and Social Welfare, Gender and Children's Affairs, the Commission for People with Disabilities, relevant district councils, Ministry of Agriculture, Ministry of education and UNAIDs. Input from government bodies will help to ensure that there is no duplication and that the intervention is sustainable. Involvement of HI, as the chair of the Ebola Response special needs sub-cluster focusing on vulnerable groups including those targeted, will also ensure that the project is harmonious with efforts of other organizations.

MCG agreements will be signed with the implementing partners, who will work closely together to implement the project activities in different districts. OFP and HI are existing partners, having worked together regularly in the past. HI as an international organization will also bring strong technical expertise and coordination experience, while OFP brings extensive knowledge of the local context and of

communities of people with disabilities nationwide.

### Fund management arrangements

UNDP will be the recipient of the funds and will support the implementation of the proposed activities through OFP and HI. Funds will be distributed in three installments paid as advances to the IPs; 40% upon signing of work plan, 40% upon approval of mid-term narrative and financial progress report by UNDP, and 20% as a third tranche based on approved final narrative and financial reports that outputs have been delivered and 80% of all balances disbursed.

### Monitoring, Evaluation and Reporting

A Project Steering Committee (mentioned above) will be established to monitor the implementation of the project. The Steering Committee will meet once a month in order to discuss progress and any challenges.

The implementing partners will produce mid-term and final narrative and financial reports to send to UNDP. The mid-term reports will be sent to UNDP within 30 days after three months of implementation of the sixmonth project. The final reports will be sent to UNDP within 60 days of the completion of the project. UNDP will be responsible for final narrative and financial reporting to the MPTF.

# Annex 2: Workplan

			Location	5	00	02 2015	
Activity				ling	Ysl	əuı	۸Į۲
	Activity Description	Ξ	OFP	ΙA	ΛΙ	uľ	)[
ec	Outcome 1: People with disabilities are supported to contribute and participate in the EVD response, helping to counter	and participate	in the EVD response	e, helpir	ng to c	ounte	7
	stigmatize against them in the short, medium and long term	rt, medium and	i long term				
	1.1: Sensitization efforts scaled up to reach all homes/communities for persons with disabilities in Sierra Leone and empower Ebola Outreach Committees (EOCs) to continue advocating for their communities on radio and in other forums, ensuring the needs and strengths of persons with disabilities are highlighted. Materials are provided to persons with disability to ensure that they have some of the means to prevent EVD.	es/communities o continue advo of persons with hey have some o	s for persons with disak ocating for their comm disabilities are highligh of the means to prevent	bilities in nunities nted. Ma t EVD.	n Sierra on rad sterials	i Leon io and are	a _
	And the state of t	to see the second secon	PRITE ( MEN) REMINERED AL CARLESTIAN ACCIDENT MANAGEMENT AS A CARLESTIAN ACCIDENT.				
1.1.1	Mapping of 45 homes and communities for persons with disabilities in collaboration with NCPD, MoSW and district coordination mechanisms, UNICEF groups - split chiefdoms	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala				
1.1.2	Development of community mobilisation guidelines including Ebola prevention critical messages and community action plans and coping mechanisms	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala				
1.1.3	Development of monitoring tools and guidelines to track knowledge, and behaviour change	Kono, WARD, BO	Kailahun, Bonthe, Makeni				
1.1.4	Pretesting to adapt Ebola critical messages to be sensitive to the communication needs of people with disabilities in their localities	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala				
1.1.5	Localised training of EOCs on Ebola prevention; PWD Act media engagements, shadow reporting	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala				

					tional authorities bilities Act 2011, the Commission		
	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	: advocacy with local and nat ion of the Persons with Disa ational institutions including	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala
	Kono, WARD, BO	Kono, WARD, BO	Kono, WARD, BO	Kono, WARD, BO	rted to carry out the implementat the capacity of n	Kono, WARD, BO	Kono, WARD, BO
and development of advocacy messages for attitudinal and behavioural changes through media and disable community action plans	Identification of appropriate fora and carrying out public messages (community radio, etc)	Procurement of hygiene kits (Kettles per household, 2 gallon jerry can, dettol and soap)	Development of hygiene kits distribution plan	Mapping of services and Ebola response programs per district for Ebola referral and recovery purposes (creating linkages) - protection desks and participation in District NERC	Representatives of people with disabilities are supported to carry out advocacy with local and national authorities on the specific needs of people with disabilities and the implementation of the Persons with Disabilities Act 2011, during and after the crisis. This will also help to build the capacity of national institutions including the Commission for People with Disabilities.	Rapid needs assessment per DPO / home to support food security; education; access to health services; specific and existing status of disability related services	Development of communication materials using PWD Act for local and national authorities as a lobbying tool to increase livelihood opportunities
	1.1.6	1.1.7	1.1.8	1.1.9	1.2	1.2.1	1.2.2
	Sub activity	Sub activity	Sub activity	Sub activity	Main Activity	Sub activity	Sub activity

			gate impacts								
Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	oilities are safeguarded	f people with disabilities to mitigoods in the early recovery phase	Kailahun, Bonthe,	Makeni, Kabala	Kailahun, Bonthe.	Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni	Kailahun, Bonthe, Makeni Kahala
Kono, WARD, BO	Kono, WARD, BO	ople with disab	/communities of		Kono, WARD		Kono, WARD	Kono, WARD	Kono, WARD	Kono, WARD	Kono WARD
Empowering through logistic support to EOCs and Partner Organisations (POs) to hold lobbying and advocacy meetings with identified local and national authorities; NERC and Ebola response service providers	Strengthen links between POs, DPO / homes with Ebola service providers and NERC at district levels for all Ebola interventions	Outcome 2: Food security and basic needs of people with disabilities are safeguarded	Cash transfers and solidarity kits provided to homes/communities of people with disabilities to mitigate impacts of the crisis, with a view to expanding support for sustainable livelihoods in the early recovery phase	Update criteria for EOC participating in the ongoing solidarity kit project as a basis for the	livelinoods component	Support income generating activities (tele-centres, desk top publishing etc) and livelihoods (including fish ponds, weaving, vegetable gardening etc) and	ensure viability and sustainability	Develop ToRs for cash transfer system to identified income generating/livelihood activities for the period of the intervention	Assist each IGA/livelihood group to develop a 6 month business plan	Deliver refresher training on business management, customer care and mentoring	Monitor progress of IGAs/livelihood per group bi weekly
1.2.3	1.2.4		2.1		T.1.2	=======================================	2.1.2	2.1.3	2.1.4	2.1.5	2.1.6
Sub activity	Sub activity		Main Activity	Sub	activity	Sub	activity	Sub activity	Sub activity	Sub activity	Sub activity

						tives in different of women with					
Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	Kailahun, Bonthe, Makeni, Kabala	different livelihood initiat tion is paid to livelihoods o on begging					
Kono, WARD, (BO)	Kono, WARD, (BO)	Kono, WARD, (BO)	Kono, WARD, (BO)	Kono, WARD, (BO)	Kono, WARD, (BO)	nd feasibility for Particular atten ly more heavily o	Nationwide	Nationwide	Nationwide	Nationwide	Nationwide
Assess current initiatives of solidarity kits / cash transfers in the locality for consistency and effectiveness	Consult local authorities and DPO leaders / focal points to develop criteria for eligibility for solidarity kits and the components of the kits (food security / quick yield / seeds, market garden cone!)	Identify recipients of the solidarity kits with local authorities, DPO leaders / focal points and members	Community sensitisation on the solidarity kits for understanding and transparency on who is receiving what and why	Procurement and Distribution of solidarity kits	Monitoring of use / effectiveness of solidarity kits	A rapid but comprehensive assessment of markets and feasibility for different livelihood initiatives in different homes/communities nationwide will be carried out. Particular attention is paid to livelihoods of women with disabilities who are particularly marginalized and rely more heavily on begging	Development of ToRs for market assessment - link with HI needs assessment	Recruitment of consultant team	Development of assessment tools in collaboration with OFP	Conduct Survey	Data input; analysis and report
2.1.7	2.1.8	2.1.9	2.1.10	2.1.11	2.1.12	2.2	2.2.1	2.2.2	2.2.3	2.2.4	2.2.5
Sub activity	Sub activity	Sub activity	Sub activity	Sub activity	Sub activity	Main Activity	Sub activity	Sub activity	Sub activity	Sub activity	Sub activity

Outcome 3: Children with disabilities/children living in homes for people with disabilities have access to education during the EVD crisis

Main	2	UNDP will support volunteer teachers to deliver lessons and educational materials to children in	ons and educati	onal materials to children in
activity	3.1	homes/communities of people with disabilities		
		Sensitisation with DPO leaders / EOCs / local		
Sub	3.1.1	authorities MSWGCA, MEST on TV/radio education	Kono, WARD,	Kailahun, Bonthe,
activity		In the Ebola Crisis	ВО	Makeni, Kabala
		Development of criteria for participation in the		
Sub	3.1.2	remedial classes preparing children to go back to	Kono, WARD,	Kailahun, Bonthe,
activity		school	80	Makeni, Kabala
Sub activity	3.1.3	Development of methodology and teaching tools in consultation with SLTU		Kailahun, Bonthe, Makeni, Kabala
Sub activity	3.1.4	Selection of homes/communities; logistical planning of teaching program; review of		
		homes/ for selection	Kono, WARD, BO	Kailahun, Bonthe, Makeni
Cub	4	Recruitment and induction / training of volunteer	Kono WARD	Kailahun Rontho
activity	0.1.5	teachers	BO BO	Makeni, Kabala
Sub	3.1.6	In consultation with the MEST, Identify educational materials required (radio/Tv learning curriculum core text books, pens, exercise books etc)	Kono, WARD,	Kailahun, Bonthe,
מרוואווא		Procurement of educational materials	2	MidWellin
Sub	3.1.7		Kono, WARD,	Kailahun, Bonthe,
Sub	3.1.8	Conduct volunteer teaching program	Kono, WARD,	Kailahun, Bonthe,
Sub	3.1.9	Monitoring of volunteer teaching program	Kono, WARD, BO	Kailahun, Bonthe, Makeni Kabala

Main	3.2	UNDP will support communities/homes for people with disabilities to gain access to the radio education programming by the Ministry of Education	ile with disabilit	ies to gain access to the radio e	education
Sub activity	3.2.1	Sensitisation with DPO leaders / focal points / local authorities / parents on accessing the radio learning program	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala	
Sub activity	3.2.2	Continuation and extension of recipients of radios	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala	
Sub activity	3.2.3	Procurement of radios	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala	
Sub activity	3.2.4	Adaptation of MEST radio learning timetables	Kone, WARD, BO	Kailahun, Bonthe, Makeni, Kabala	
Sub activity	3.2.5	Identification of a teaching assistant (from SLTU) in each location for monitoring and moral support	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala	
Sub activity	3.2.6	Distribution of radios and timetables	Kono, WARD, BO	Kailahun, Bonthe, Makeni, Kabala	
Sub activity	3.2.7	Monitoring of access to the radio learning program One on one outreach sessions with sex workers in	Kono, WARD, BO Western	Kailahun, Bonthe, Makeni, Kabala	
<b>Main</b> Activity	3.3	Western Area to provide them with comprehensive and tailored Fbola and HIV prevention information	Area Freetown		
Main Activity	3.4	Condoms distributed to female sex workers to prevent Ebola, HIV and other STIs	Western Area Freetown		

### Annex 3: Description of Activities

Project number: Project ID: 00094847 Project title: "Support to persons with disabilities, and sex workers, two of the most vulnerable groups worst hit by the EVD crisis"

This MCG will enter into force upon signature and will expire on 31st July 2015. The full amount of this MCG is USD 150,000

Section 1) Results to be achieved by HI

### Outputs delivered by HI will be as follows:

### Outcome 1

- i) Homes and communities of PWDs mapped
- ii) Community mobilization guidelines developed
- iii) Monitoring tools to track behavior changed developed
- iv) Advocacy tools and messages developed
- v) Hygiene kits procured and distributed
- vi) Mapping of services and Ebola response programs per district for Ebola referral and recovery purposes (creating linkages)
- vii) Rapid needs assessment per DPO / nome to support food security; education; access to health services; specific and existing status of disability related services
- vii) Communication materials using PWD Act for local and national authorities as a lobbying tool to increase livelihood opportunities
- viii) Meetings with identified local and national authorities; NERC and Ebola response service providers
- ix) Strengthened links between POs, DPO / homes with Ebola service providers and NERC at district levels for all Ebola interventions

### Outcome 2

- i) Updated criteria for EOC participating in the ongoing solidarity kit project as a basis for the livelihoods component
- ii) Income generating activities (tele-centres, desk top publishing etc) and livelihoods (including fish ponds, weaving, vegetable gardening etc) set up
- iii) ToRs for cash transfer system
- iv) 6 month business plan developed by each livelihood group
- v) Refresher training on business management, customer care and mentoring
- vi) Assessment of current initiatives of solidarity kits / cash transfers in the locality for consistency and effectiveness
- vii) Recipient communities for solidarity kits identified
- viii) Community sensitisation on the solidarity kits for understanding and transparency
- ix) Kits procured and distributed
- x) ToRs for market assessment developed link with HI needs assessment
- xi) Assessment tools developed

### Outcome 3

- i) DPO leaders / EOCs / local authorities MSWGCA, MEST sensitized on TV/radio education in the Ebola crisis
- ii) Criteria developed for participation in the remedial classes preparing children to go back to school
- iii) Methodology and teaching tools developed in consultation with SLTU
- iv) Homes selected and logistical planning
- v) Recruitment and induction / training of volunteer teachers
- vi) Procurement of educational materials
- viii) Conduct volunteer teaching program
- ix) Monitoring of volunteer teaching program
- x) Sensitisation with DPO leaders / focal points / local authorities / parents on accessing the radio learning program
- xi) Continuation and extension of recipients of radios
- xii) Radios procured and distributed
- xiii) Teaching assistant identified (from SLTU) in each location for monitoring and moral support
- xiv) One on one outreach sessions with sex workers in Western Area to provide them with comprehensive and tailored Ebola and HIV prevention information
- xv) Condoms distributed to female sex workers to prevent Ebola, HIV and other STIs

### Section 2) Work to be performed by HI

Activities to be carried out by HI: (See work plan and project document above)

Annex 4: Disbursement Plan

Proposal Title: "Support to persons with disabilities, a	"Support to persons with disabilities, and sex workers, two of the most vulnerable groups worst hit by the EVD crisis"	sabilities, and sex worke	rs, two of the r crisis"	most vulnerable	groups worst	nit by the EVE
Outputs	Geographical Area	Target group	Budget HI	First Tranche (40%)	Second Tranche (40%)	Third Tranche (20%)
People with disabilities are supported to contribute and participate in the EVD response, helping to counter stigmatization against them in the short, medium and long term	Kono, Kailahun, Bo, Makeni, Kabala		44,788	17,915	17,915	8,958
People with disabilities safeguarded Kono, Kailahun, Bo, Makeni, with Food security and basic needs Kabala	Kono, Kailahun, Bo, Makeni, Kabala	Targeted communities/homes for people with disabilities	51,986	20,794.5	20,794.5	10,397
Children with disabilities/children living in homes for people with disabilities have access to education during the EVD crisis and Sex- workers in Western Area can protect themselves from Ebola, HIV and other STIs	Kono, Kailahun, Bo, Makeni, Kabala	Children with disabilities/children of people with disabilities	53,226	21,290.5	21,290.5	10,645
		Total (USD)	6	000'09	000'09	30,000
		Total (SLL)		267,000,000	267,000,000	133,500,000
		Grand Total (USD)	(asn		150,000	
		Grand Total (SLL)	(SFT)		667,500,000	

Annex 5: Detailed Budget

	Detailed budget notes		Ē	Unit cost (USD)	Quantity USD	CSD
						80,769
Expatriate Project Staff						12,735
Technical Coordinator		_	Person	8,490	1.5	12,735
National Project Staff						15,000
District Officer (100%)		3	Person	850	4	10,200
Project Manager (100%)		_	Person	1.200	4	4.800
						62,034
Outcome I Social Mobilisation and empowerment						15,466
Localised training of EOCs	Kono 5; Bo 5; WARD 10	20	Training	101	_	2,020
	2 sessions per month per district (3) 4 months	9	radio sessions	225	3	4,050
Procurement of hygiene kits	I public kit = 2 x I gallon jerry cans, and soap, + roap + sticks total 20 kits; I toilet kit = 1 kettle: 4 per home (M/F public toilets) total 20 homes	20	kits	45	_	006

The second secon	to 1 EOC per district for	3	District	-		
Communication materials	meetings and communication Per EOC IEC Materials (20)	.	District	112		336
	EOCs x 30 Brochures + 15 posters	20	Materials	140	_	0000
Cogramme Support to EOCs	300 000 x 20 x 4 months	000				2,000
Outcome 2 Food Security and livelihoods		Q.	Monthly Fund	67	4	5,360
Support for income pervention						23 664
acing acintiles	5 groups each in Kono and Ward	10	IGA			00*****
Business plan training	Treatment of the contract of t		* 1	707	Page	5.620
	t transfilling per district	2	Training	337	-	
mentoring management customer care and	I training per district	2	Training	100	_	674
Procurement and Distribution of solidarity kits	Kono 4; WARD 4; Bo 4 15 kils per site food		0	337	_	674
Market study	educational materials	12	Kits	196	_	11.532
			on the second			
Outcome 3 Education			consultancy firm	4,164		4,164
Induction / training of volunteer teachers						23.904
Signature 1	12 sites, 3 teachers per site = 36 - 3 trainings		Trainino	200		
Volunteer teacher stipends 36 te	r month 3		9	33/		1.011
Procurement of radios		36 Pe	Person	202		7.281
	36 radios 1 per teacher 36			-		
Support to Sex Workers (outreach on EVD prevention and condoms)		1	radio	17 1		612
	Lampsum of \$15000			15,000		15,000

Direct Pray: same Support Costs			
National Support Staff			
Accountant/cashier		1	50,418
Logistician	Mondy		8,732
Driver 100%	1 поиц	1,723	3,446
Travel costs for programme management and monitoring staff	1.5 month		1,686
Perdiem – accommodation			3.600
Transportation cost	2 month		12,592
Vehicles running costs		4 4/6/	12,592
Motorbikes Hire / Running costs	month	996	14,826
Office cost	Month		11,592
Office cost + running cost - Freetown		2	3,234
Office cost + running cost - Koidu	month	2 876	9,304
Office equipment	month		5,752
Laptop		7	3.552
	unit 1.	1.580	1,586
		-	1.580

1.580

Communication cost (Internet+phone)         2         month         564         3         3.384           Indirect Programme Costs - 7%         1	Communication					3,384
	mmunication cost (Internet+phone)	2	month	564	3	3.384
	The property of the second sec					
	Programma Coute 70					440,187
	170 million Costs = 170					9,813

### Annex 6: Financial Reporting Template MODEL UNDP EXPENDITURE REPORT

Paris and	
Period	

EXPECTED CP OUTPUTS and indicators including annual targets	PLANNED ACTIVITIES List all activities to be undertaken during the year towards stated outputs	Planned Budget		Payments and Expenditures		
		Budget Description	Amount	Payments received	Expenditures	Balance
					-	
		Total			1	