1.   PROJECT SUMMARY:

Although the spread of COVID-19 in South Sudan offers the opportunity for much-needed solidarity in the face of a new threat, it also risks engendering and exacerbating existing divides, contributing to the continuation of conflict, while at the same time undermining confidence in the peace process and recently formed government. The purpose of this project is to capitalize on the positive opportunities provided by the virus to promote peaceful co-existence, social cohesion and combat stigmatization, engendering the cooperation needed to limit and respond effectively to the spread of the disease. It will do so by training women and youth-led community-based organizations (CBOs) on mediation, conflict resolution and negotiation, as well as support them in encouraging messages of solidarity and in combating hate speech. The project will also create media platforms for CBOs and the communities that they represent to interface with relevant government bodies regarding the COVID-19 response, including the National Task Force and the Ministry of Health. Accordingly, it will have a strong focus on strategic communication and will support research and innovative practice that explores how communication technology can best be leveraged to improve participatory approaches to peacebuilding.

Target beneficiaries encompass community members residing in urban and peri-urban environments with a specific focus on internally displaced persons (IDPs) and returnees, as well as other vulnerable groups, such as persons with disabilities and the elderly. The National Task Force on the COVID-19 Pandemic and Ministry of Health at the national and sub-national levels will also benefit from the project by enabling them to interact with, and respond to the needs of communities, as will the CBOs who will be provided with capacity building and support;

The project will be implemented directly by Save a Life International in collaboration with CBOs who will be provided with capacity building, contributing to the localization of the COVID-19 response and helping agencies reduce their footprint in the long-term. Training will be provided in line with Save a Life *Key IPC/WASH Protocols for Community Meetings:*
Measures to minimize risks of COVID-19 transmissions (Annex 2) and media and technology will be utilized to create platforms for dialogue;

Locations include areas where Save a Life has a strong, existing operational presence to ease delivery of the project and are urban where the spread of the virus is likely to be much more devastating. These locations are Juba and Bentiu.

2.   BACKGROUND

South Sudan confirmed its first case of COVID-19 on 5 April 2020. Weak healthcare systems, lack of access to water, poor hygiene and sanitation services and the challenges to maintaining key humanitarian supply chains through neighbouring countries, will make the spread of the virus catastrophic. The disease has already resulted in sudden migration movements and renewed displacement and will continue to influence population movement patterns, further complicating efforts to limit and contain the disease's spread. This movement of people could precipitate conflicts between internally displaced person (IDP), host and returning populations, which is particularly accurate given the potentially sudden nature of many returns and relocations to areas that have inadequate health and water services and declining resources. In this setting, the risk of violence is high. Only days after the confirmation of the first, case, there has been a considerable rise in xenophobic sentiment and hate speech. Similar dynamics could easily be replicated internally. Depending on clusters of cases, local transmissions could serve as a basis for mobilizing communities against one another for factional gain. As privacy-related rights-based legal safeguards are more or less non-existent, the absence of confidentiality will not only raise social costs and stigmatization for individuals, but for entire communities and groups. As has been revealed by other disease outbreaks, the impacts of epidemic shocks on conflict are frequently localized with infection rates increasing the likelihood of violence in many instances. To the extent that freedom of movement becomes more restricted, there could be a reduction in the level of interaction between communities, raising levels of inter-group suspicion, thereby reifying ethnic and political divides in a country that is already incredibly fractionalized. Additional strains on resources associated with containment will only make matters worse, increasing the prospects for violent competition.

Along these lines, while COVID-19 is a health issue, similar to other disease outbreaks like Ebola, the spread of the virus will have a number of knock-on effects, leading to new conflicts and intensifying existing ones, while also deepening mistrust and confidence in the newly formed Revitalized Transitional Government of National Unity (R-TGoNU) and the peace process as a whole, especially in urban areas that stand to be hardest hit. As it stands, South Sudan's fledging institutions lack the capacity to deal with this crisis and are unable to meet the expanding needs of the people, made worse by the decline in people's coping mechanisms and ability to recover from shocks. The state-citizen contract, which had barely if even begun to take hold before the outbreak of the war at the end of December 2013 has been decimated by conflict and economic collapse, which, coupled with new threats, including the virus, will continue to impede the ability of governance institutions to provide populations with the benefits that the peace deal should afford them, at least in the short to medium-term. Yet, the pandemic also offers a chance for people to come together in the face of a threat that is universal, enhancing trust, confidence and cohesion and supporting the conditions for long-term stability. It also provides a unique opportunity for contemplating new modalities of project implementation, including localization and building the capacity of partners in civil society given the need for agencies to reduce their operational footprint and leverage the trust that local actors already have in their communities.

3. NEED / GAP TO BE ADDRESSED:

Based on the accompanying internal analysis (Annex 1) conducted at the start of the COVID-19 response in South Sudan in March 2019, Save a Life identified a number of needs with respect to the connections between the pandemic and conflict:

- Need to capitalize on universal threat of COVID-19 to promote social cohesion and peaceful co-existence, adapting and creating new programmes that seek to unite conflict transformation with disease prevention and response, working across sectors in new and creative ways;
- Need to combat xenophobia, stigmatization and hate speech to pacify the potential for increased inter-group hostilities and address some of the social dimensions of the pandemic;
- Need to work on building trust with communities and between communities and the newly formed government so as not to exacerbate pre-existing grievances;
- Need to reflect on localization and building the capacity of partners in civil society to respond to COVID-19 in their own communities, leveraging the trust that local CBOs have and helping agencies reduce their operational footprint.

The needs identified in the analysis informed the basis of a pilot approach that Save a Life Transition and Recovery Unit (TRU) hopes to adopt on conflict transformation and COVID-19. Save a Life has identified a number of topics that require more in-depth analysis to serve as an evidence base for this and other quick impact projects, including:

- Analyses on perceptions of host communities towards arrivals form areas with/perceived to have COVID-19 cases and potential impacts on social cohesion;
- Social and cultural behaviours related to disease prevention and response, including attitudes towards frontline health workers;
- The connections between gender-based violence, protection and disease outbreak.

4. GENDER ANALYSIS:

Marginalized groups in South Sudan stand to be some of the worst affected by the outbreak. This is especially true for women and girls whose access to services is already constrained by their traditional gender roles as caregivers. As families become burdened by economic collapse, the exchange of girls for bride wealth as a coping mechanism is all the more likely, leading to escalating levels of child, early and forced marriage. With sharp declines in the overall economy, both husbands and wives will face challenges in providing for their families. Responsibility towards the household will shift further onto the shoulders of women. This could increase intra-familial tensions as women are not able to live up to their expected gender roles and families become more strapped for cash, possibly leading to a rise in inter-personal violence. The increase in responsibility for women not only raises the spectre of domestic abuse, but also opens women up to a host of other kinds of violence. As is well-known in South Sudan, women traveling in order to carry out daily survival tasks are exposed to various forms of gender-based violence (GBV). During a lockdown or strictly enforced quarantine measures, women who have little choice but to find a way to help their families survive will be even more vulnerable. At the same time, with lockdowns and quarantines, the ability of

women to support their family will be constrained. The need to access resources in an environment of sharp economic downturns could open women up to sexual exploitation and abuse (SEA) as they seek alternative ways to make ends meet; opening them up to the risk of contracting not only COVID-19, but other diseases that hospitals and clinics will have limited capacity to manage. As has been the case during other public health crises, people may look to exploit existing structural inequalities that are heightened during an outbreak. Unfortunately, it is exactly when the vulnerabilities of women and girls are at their highest that humanitarian programmes supporting them are undercut. This is likely to amplify the risks that they face.

The project will work with women-led CBOs to ensure that the response is gender-sensitive in the South Sudanese context and work with South Sudanese women to create messaging that seeks to progressively address some of the gender-related impacts of the spread of the disease, such as increased domestic responsibilities, lack of access to livelihoods, exclusion of women from decision-making processes around responses to COVID-19.

5. DESCRIPTION OF BENEFICIARIES:

The project will target communities in urban and peri-urban settings, including displacement settings and neighbourhoods of returns and relocations, as well as informal settlements in Juba and Bentiu, with a particular focus on IDP, returnee and host communities, including marginalized groups of women and youth. As expressed in the 'Project Summary,' however, it is anticipated that entire catchment area of the two target urban centres will benefit from improvements in social cohesion through, for example, a decline in hate speech and reduced inter-group hostilities. Selection criteria for beneficiaries and activities are as follows:
- IDP, returnee status available through IOM Displacement Tracking Matrix (DTM) data, with 75% women and youth representation, respectively;
- Individuals residing in neighbourhoods or areas that have experienced either influxes of IDPs or returnees, or both where the potential for conflict linked to COVID-19 is high, again available through DTM data.

6. PROJECT DESCRIPTION

The project aligns squarely with Outcome 4 in that it works to empower communities to participate in and lead peace actions, as well as engage in decision-making around matters of public concern, specifically health. More broadly, it seeks to deter violence connected to the spread of COVID-19 and promote solidarity and tolerance, as well as build trust between communities and the state institutions responsible for service provision. The outcomes and accompanying activity descriptions are listed below.

Outcome 1: Women and youth-led CBOs are able to play key roles in mitigating and resolving conflicts connected to COVID-19 and its impacts

Recognizing that local actors are uniquely positioned to respond to disease outbreaks and their impacts by leveraging the trust that they have within their own communities when it comes to combating hate speech, stigmatization and promoting solidarity, CBOs will be supported to develop and promote messages of tolerance and peace in relation to COVID-19. They will also be provided with capacity building on conflict mitigation and resolution so as to be able to support in reconciliation between communities, groups and individuals perceived to be impacted by the pandemic and host communities, as well as between disease survivors, families, victims and frontline health workers. Women and youth have a particularly critical role to play in this respect. Young people are able to take on leadership roles in assisting their communities in a situation where the virus threatens the most vulnerable; including the elderly and people with pre-existing conditions and have influence over the behaviours of their peer groups. As mothers, wives, sisters and daughters, women also play a key role in shaping the values and behaviours of their households and communities. This includes behaviours related, not only to peace and conflict, but to health and hygiene.

The project will leverage the use of traditional or mass media in shaping popular views by delivering messages that help prevent violent conflict and promote peace and reconciliation. Recognizing the importance of radio as a communication tool for communities in South Sudan due to the high illiteracy rates, the project will make use radio as a platform to promote unity and ensuring that accuracy and objectivity are maintained in radio programmes when it comes to information on COVID-19. Additionally, solar-powered or wind-up radios will be distributed to listeners.

We and partners will further support the use of mobile phones, crowdsourcing technologies and social networks to enable these messages to be amplified and to open up new spaces for the involvement of individuals and communities to play a role in the various phases of the crisis.

Outcome 2: Women and youth-led CBOs and communities are able to influence government bodies tasked to manage the COVID-19 outbreak and its impacts

The onslaught of COVID-19 comes at a critical phase of South Sudan's transition and one that could shape the way that fledging state institutions respond to the needs of the citizens, either deepening mistrust and lack of confidence, or creating the foundations for a new state-citizen contract and a democratic and civic culture that puts communities first. Providing platforms where CBOs and the wider South Sudanese community can have their voices and concerns with respect to prevention and response efforts connected to COVID-19 is significant not only to ensuring the effectiveness of overall interventions related to COVID-19, but also to restoring trust and confidence in the recently formed government, specifically through the National Task Force on COVID-19 Pandemic and the Ministry of Health.

Given the significance of creating space for dialogue, fostering mutual understanding and strengthening collective identity, the project will have a strong focus on strategic communications and will support research and innovative practice that explores how communication technology can best be leveraged to improve participatory peacebuilding outcomes in a South Sudanese context. Communication technologies will be leveraged as tools to prevent violent conflicts, provide early warning and, ultimately, generate more effective responses to crises.

Outcome 3: Civic engagement and collective action in managing COVID-19 is strengthened

The COVID-19 response risks the further capture of resources and control by militarized and securitized actors in South Sudan, decreasing the already restricted civic space and the development of a flourishing civil society that can effectively advocate for public goods. Patronage-based politics have also divided people in such a way that prevents collective action, which is both reflected in, and enabled by the absence of a sense belonging to the country. Spurring collective action and civic engagement, as well as ownership over health outcomes and their impacts can be important to creating a sense of collective identity and creating buy-in for peace. One way to do this is through the use of small grants mechanisms where CBOs and communities are mobilized to work together to make improvements in their environment related to, for example, water and sanitation. Once work has been completed a small grant will be awarded an infrastructure project that correlates to the COVID-19 response, but benefits the whole of the community, such as the rehabilitation of primary healthcare facilities, or interventions related to access to water.

7.   MANAGEMENT ARRANGEMENTS

Save a Life International will coordinate the project, and provide overall oversight and guidance for implementation of activities. Save a Life will assume responsibility for overall accountability of fund allocation and achievement of results review of implementation progress, including budget revisions. The project will leverage Save a Life current operational presence, existing community and partner relationships and contextual knowledge, including conflict analysis. We as leading agency will receive the funds and work to support and work alongside relevant CBOs in Juba and Bentiu as partners. Once CBOs have been selected, We will establish a Project Committee which will include Save a Life and the CBOs. The Project Committee will meet regularly to ensure sound strategic approach and discuss any management, technical or coordination challenges and ensure transparency and accountability.

ANNEX A: IMPLEMENTING AGENCY PROJECT PROPOSAL RESULTS FRAMEWORK

OUTCOME (S):	OUTCOME INDICATORS:	BASELINE/TARGET:	MEANS OF VERIFICATION
OUTCOME 4: (CIVIC PARTICIPATION & GOVERNANCE) Communities, including women, youth and disadvantaged groups are empowered and increasingly able to meaningfully participate in local and broader political, peace and security processes.	Outcome Indicator 4a: Number of instances where youth and women led Civil Society Organizations are supported to articulate their needs and demands to governance figures/ institutions. Outcome Indicator 4b: Increased frequency of local government officials engaging communities in political, peace and security decision making. Outcome Indicator 4c: Number of R-ARCSS aligned governance reforms and reconstitution of institutions undertaken with the participation of CSOs.	Baseline: TBD Target: 6 Instances Baseline: TBD Target: 18 Instances Baseline: N/A Target: N/A	

OUTPUTS	INDICATORS		BASELINE	TARGET	MEANS OF VERIFICATION
Output 1.1: Women and youth-led CBOs are able to play key roles in mitigating and resolving conflicts connected to COVID-19 and its impacts Activities include: training on conflict mediation, negotiation and reconciliation for CBOs; development of messaging and IEC materials on solidarity and tolerance in the face of COVID-19; distribution of solar-	Output Indicator 1.1.1	ST2/RG 4.1.1. Number of women organizations that are capacitated to advocate for women's participation in national and state-level political and governance discourse	TBD	3	Activity reports, attendance sheets
	Output Indicator 1.1.2:	RC4/RG 1.5.4 Number of individuals reached by sensitization campaigns promoting intercommunal peace and reconciliation	TBD	200,000	Activity report; radio shows; activity photos
	Output Indicator 1.1.3:				

powered and wind-up radios					
Output 1.2: Women and youth-led CBOs and communities are able to influence government bodies tasked to manage the COVID-19 outbreak and its impacts Activities include: creating platforms where CBOs and the wider South Sudanese community can have their voices and concerns heard with respect to prevention and response efforts connected to COVID-19	**Output Indicator 1.2.1:** **Output Indicator 1.2.2:** **Output Indicator 1.2.3:**	RC1/RG 1.3. Number of conflict management and reconciliation activities (dialogue forums, conferences, workshops) implemented at the national and sub-national level Number of people engaged in platforms on prevention and response efforts connected to COVID-19	TBD N/A	12 10,000	Activity Reports, attendance sheets, training reports Activity Reports
Output 1.3: Civic engagement and collective action in managing COVID-19 is strengthened Activities include: use of small grants mechanisms where CBOs and communities are mobilized to work together to make improvements in their environment related to, for example, water and sanitation. Once work has been completed a small grant will be awarded an infrastructure project that correlates to the COVID-19 response, but benefits the	**Output Indicator 1.3.1:** **Output Indicator 1.3.2:** **Output Indicator 1.3.3:**	RS2/RG 2.2.2. Number of assets built, restored or maintained, and livelihoods diversified by targeted households (by type and unit of measure)	TBD	3	Activity Reports

whole of the community, such as the rehabilitation of primary healthcare facilities, or interventions related to access to water.