

Final Report

School Health First Aid and Emergency Response Capacity Building Program

Final Report for the School Health First Aid and Emergency Response Capacity Building Program in the Gaza Strip

Target Areas: North Gaza, Gaza City, Middle Gaza, and Khan Younis and Rafah

Implementation Period: 23/06/ 2026 – 4/07/ 2026

Project Code: FG-SFA-ER-2026

Date: 5 / 07 / 2026

1. Executive Summary

In light of the ongoing humanitarian crisis in the Gaza Strip, the school environment has become increasingly exposed to health, humanitarian, and security risks, particularly in schools located in border areas or areas frequently affected by emergencies. Recurrent escalations of violence, displacement, overcrowding, destruction of infrastructure, and limited access to emergency health services have directly impacted the safety and wellbeing of students and educational staff.

In response to these challenges, **FAJR Global Medical Organization** implemented the **School Health First Aid and Emergency Response Capacity Building Program**, aiming to strengthen schools' capacities to provide an initial response to injuries and emergency situations before the arrival of specialized medical teams or the transfer of casualties to healthcare facilities.

The program targeted **100 School Health Coordinators** from **50 government schools**, with two coordinators selected from each school. The training focused on equipping participants with the theoretical knowledge and practical skills required in first aid, Basic Life Support (BLS), management of bleeding and wounds, burns and fractures, primary triage, mass casualty incident response, and Psychological First Aid (PFA).

The project adopted a practical, simulation-based training methodology that ensured the effective transfer of knowledge from theory to practice within the school environment. In addition, participants were provided with standardized First Aid Kits to strengthen school preparedness and enable rapid response to daily incidents and emergency situations.

The project contributed significantly to improving school preparedness, promoting a culture of safety, and enhancing the ability of school personnel to provide immediate life-saving interventions. Furthermore, it strengthened coordination and collaboration between schools and the relevant health and education authorities.

2. Humanitarian Background and Rationale

Over the past years, and particularly during periods of escalation, the Gaza Strip has witnessed a significant deterioration in both the educational and healthcare environments. Many schools have suffered direct or indirect damage, while others have been transformed into shelters or gathering centers for displaced populations, placing additional pressure on educational institutions and their staff.

Schools across Gaza face multiple challenges related to safety and public health. These challenges include injuries resulting from daily accidents, fainting episodes, burns, bleeding, fractures, choking incidents, and acute psychological conditions caused by fear, trauma, and prolonged stress. In many cases, intervention during the first few minutes is critical to preventing complications and saving lives.

The importance of such interventions is further amplified by the limited accessibility of ambulances to certain areas, the overwhelming pressure on hospitals and healthcare facilities, and the difficulties in movement caused by security and logistical constraints. Therefore, the presence of school personnel trained in first aid represents a fundamental component of the community emergency response system.

Against this backdrop, the project was designed to address a clear gap in school preparedness by building the capacities of School Health Coordinators and empowering them to provide an initial response to emergency situations within schools. The intervention is fully aligned with FAJR Global mission to protect health and strengthen the resilience of communities affected by crises.

The project recognizes schools not only as educational institutions but also as protective environments where students spend a substantial portion of their daily lives. Consequently, investing in the preparedness of schools and equipping educational personnel with emergency response skills is considered a strategic investment in safeguarding children's health and wellbeing.

Moreover, strengthening school-based emergency preparedness contributes to reducing the burden on healthcare facilities, improving referral mechanisms, and promoting a culture of prevention and safety within the broader community. This approach supports the development of more resilient educational systems capable of adapting to and responding effectively to humanitarian emergencies and public health crises.

The School Health First Aid and Emergency Response Capacity Building Program was therefore conceived as a practical and sustainable intervention to strengthen the resilience of schools, enhance emergency response capacities, and ensure that schools are better equipped to protect students and staff under challenging humanitarian conditions.

3. Project Description

Overall Goal

The project aims to improve the preparedness of the targeted schools in the Gaza Strip and strengthen their capacity to respond to emergency situations by building the capacities of School Health Coordinators in the fields of First Aid and Emergency Response.

Specific Objectives

1. Train **100 School Health Coordinators** from **50 government schools** on First Aid and Emergency Response skills.
2. Strengthen participants' theoretical knowledge and practical skills in dealing with common emergency situations within schools.
3. Enable schools to provide an initial response to accidents and injuries until the arrival of medical teams or the referral of cases to healthcare facilities.
4. Provide participants with First Aid Kits and essential tools that support the application of the acquired skills.
5. Promote a culture of safety and prevention within the school environment.
6. Strengthen referral mechanisms and coordination between schools and the relevant health and education authorities.

4. Training Curriculum and Training Materials

The training curriculum was designed to combine theoretical knowledge with practical application, with particular emphasis on emergency situations that schools may encounter within the current humanitarian context in the Gaza Strip. The training content was prepared in a simplified and practical manner that corresponds to the roles and responsibilities of School Health Coordinators.

Module One: Introduction to School Health and Emergency Preparedness

This module introduced the concept of school health, the role of School Health Coordinators in prevention and emergency response, and the importance of establishing an emergency preparedness plan within schools. It also focused on risk assessment within the school environment and the identification of vulnerabilities that may affect the safety and wellbeing of students and school personnel.

Module Two: Basic Life Support (BLS)

This module focused on essential life-saving skills, including Cardiopulmonary Resuscitation (CPR), management of respiratory arrest, airway opening techniques, choking management, and the recovery position. Practical demonstrations and hands-on exercises were conducted to ensure that participants were able to perform these essential procedures correctly and confidently.

Module Three: Management of Injuries, Wounds, and Bleeding

This module covered the identification of different types of wounds, methods of controlling bleeding, wound cleaning and dressing, management of minor and moderate injuries, and the identification of cases requiring urgent referral to healthcare facilities.

Module Four: Burns, Fractures, and Immobilization

This module addressed the initial management of burns, assessment of fractures and sprains, application of immobilization techniques, and the safe transportation of injured individuals, with a strong emphasis on minimizing pain and preventing further complications or aggravation of injuries.

Module Five: Mass Casualty Incidents and Primary Triage

Participants were trained on the principles of managing incidents involving multiple casualties, including prioritization of cases, application of primary triage principles, scene organization, and communication with relevant authorities to ensure a more effective and coordinated response.

Module Six: Psychological First Aid (PFA)

This module addressed the recognition of signs of psychological distress among children and educational staff, the provision of safe and respectful Psychological First Aid, and the identification of cases requiring specialized referral and mental health support.

The curriculum was delivered through an interactive and participatory approach that combined lectures, group discussions, case studies, practical demonstrations, and simulation exercises.

This approach ensured the effective transfer of knowledge and skills and enabled participants to apply what they had learned to realistic school-based emergency scenarios.

In addition to the training curriculum, a range of training materials and practical tools were utilized throughout the workshops, including anatomical models, CPR mannequins, splints, bandages, trauma management materials, First Aid Kits, and visual training aids. These resources significantly enhanced the quality of the learning experience and enabled participants to acquire hands-on competencies essential for responding effectively to emergencies within schools.

5. Target Groups and Selection Criteria

The project targeted School Health Coordinators working in government schools located in the areas most vulnerable to risks and emergencies. A total of **100 participants** were selected from **50 government schools**, with **two coordinators from each school**.

Selection Criteria

The selection of schools and participants was based on a set of criteria designed to ensure that the intervention reached schools with the highest needs and the greatest potential impact. The main selection criteria included:

1. The school's location in a border area or a high-risk area affected by conflict and emergencies.
 2. The large number of students benefiting from the school's educational and health services.
 3. The frequency of emergency incidents affecting the school or its surrounding community.
 4. The limited availability of personnel trained in First Aid and Emergency Response within the school.
-

5. The school's need to strengthen its health preparedness and preventive capacities.
6. Coordination with the Ministry of Education and Higher Education and the relevant Education Directorates.

These criteria contributed to ensuring that the project reached the schools with the highest level of vulnerability and greatest need, thereby maximizing the expected impact on students, teachers, and educational personnel.

6. Implementation Methodology and Work Modality

The project was implemented through an integrated methodology that encompassed preparation, training delivery, distribution of First Aid Kits, and monitoring and evaluation.

First: Preparation and Coordination

The preparation phase included extensive coordination with the relevant educational authorities, identification of target schools and participants, development of training materials and manuals, preparation of training schedules, and the mobilization of trainers and the necessary training supplies.

Particular attention was given to ensuring that all logistical and operational arrangements were in place prior to the commencement of the training sessions. This included venue preparation, procurement of training equipment, and coordination with school administrations to facilitate the participation of School Health Coordinators.

Second: Training Delivery

The training was conducted over **two training days** for each group, with a total of **15 training hours**. The training methodology adopted an interactive and participatory approach, combining lectures, group discussions, practical demonstrations, group exercises, and case studies.

The sessions were designed to encourage active participation and knowledge exchange among participants, while also ensuring that theoretical concepts were linked to realistic school-based emergency scenarios.

Third: Practical Application and Simulation

A substantial component of the training was dedicated to practical application and simulation exercises. Participants practiced life-saving skills such as Cardiopulmonary Resuscitation (CPR), bleeding control, splinting and immobilization techniques, burn management, primary triage, and Psychological First Aid through realistic scenarios that simulated emergency situations within schools.

The simulation exercises enabled participants to develop confidence in applying their newly acquired skills, improve teamwork and communication, and strengthen their ability to make rapid and appropriate decisions under pressure.

Fourth: Distribution of First Aid Kits

Participants were provided with standardized First Aid Kits to enhance school preparedness and support the practical application of the acquired skills. The training also included a detailed explanation of the contents of the kits, instructions on their proper use, guidance on safe

storage, and recommendations for monitoring the validity and replenishment of medical supplies contained within the kits.

The provision of First Aid Kits represented an important component of the project, ensuring that participants would have the necessary tools to provide immediate assistance and respond effectively to emergencies within their schools.

Fifth: Monitoring and Evaluation

Pre- and post-training assessments were conducted to measure improvements in participants' knowledge and understanding of First Aid and Emergency Response concepts. In addition, practical evaluations were carried out to assess participants' ability to perform essential life-saving skills and apply the techniques learned during the training sessions.

Participant feedback was systematically collected through evaluation forms and satisfaction surveys to assess the quality and relevance of the training, identify strengths and areas for improvement, and inform the design of future capacity-building interventions.

The monitoring and evaluation process demonstrated the effectiveness of the training methodology and highlighted the importance of combining theoretical instruction with practical exercises and simulation-based learning to maximize learning outcomes and strengthen school preparedness.

7. Geographic Coverage and Beneficiary Scale

The project was implemented across four governorates in the Gaza Strip, namely **North Gaza, Central Gaza, Khan Younis, and Rafah**, with priority given to schools located in border areas and communities exposed to recurrent emergencies and humanitarian risks.

The geographic distribution of schools and beneficiaries was designed to ensure equitable access to the intervention while focusing on areas with the highest vulnerability and greatest need for emergency preparedness and school health support.

Area	Number of Schools	Number of Participants	Estimated Indirect Beneficiaries
North Gaza	15	30	10,000
Central Gaza	8	16	5,000
Khan Younis	12	24	15,000
Rafah	15	30	15,000
Total	50	100	45,000 – 50,000

This geographic distribution reflects the project's commitment to targeting schools located in diverse areas across the Gaza Strip while prioritizing communities facing the highest levels of risk and humanitarian vulnerability. The intervention is expected to extend its impact beyond the direct participants to reach tens of thousands of students, teachers, and school staff through the presence of trained School Health Coordinators within the targeted schools.

By strengthening the emergency preparedness capacities of schools across different governorates, the project contributes to building a more resilient educational system capable of responding effectively to health emergencies and crisis situations.

8. Results, Outputs, and Humanitarian Impact

1. Operational Results (Outputs)

The project successfully achieved a number of direct outputs and operational results, including:

- Training **100 School Health Coordinators**.
- Covering **50 government schools** across different governorates of the Gaza Strip.
- Delivering **15 training hours** for each participant.
- Distributing **100 First Aid Kits** to participants and targeted schools.
- Conducting practical exercises and simulation sessions on school-based emergency scenarios.
- Strengthening participants' understanding of referral pathways and coordination mechanisms during emergencies.

The successful completion of these activities demonstrates the effectiveness of the project implementation methodology and its ability to deliver high-quality capacity-building interventions under challenging humanitarian circumstances.

2. Knowledge and Skills Outcomes

The training contributed significantly to improving participants' ability to recognize emergency situations and respond to them in a safe, organized, and effective manner. The practical exercises and simulation-based learning approach played a crucial role in increasing

participants' confidence and enhancing their readiness to manage injuries and health emergencies within the school environment.

Among the most significant expected outcomes are:

- Improved theoretical knowledge of First Aid principles and emergency response procedures.
- Enhanced ability to manage bleeding and wounds effectively.
- Improved competence in performing Basic Life Support (BLS) and Cardiopulmonary Resuscitation (CPR).
- Strengthened skills in splinting and immobilization techniques.
- Better understanding of primary triage principles during Mass Casualty Incidents (MCIs).
- Enhanced capacity to provide Psychological First Aid (PFA) to children experiencing distress or trauma.

These outcomes are expected to contribute to the establishment of a sustainable culture of safety and preparedness within schools and to strengthen the role of School Health Coordinators as first responders within their educational communities.

3. Humanitarian Impact

The project contributed to strengthening schools' capacity to protect students and educational personnel and to reducing the risks associated with delays in providing First Aid and emergency care. It also enhanced the resilience of school communities by equipping schools with a minimum level of health preparedness and initial response capacity.

The humanitarian impact of the project extends beyond the direct participants. Through the presence of trained School Health Coordinators within schools, thousands of students, teachers, and staff members are expected to benefit from improved emergency preparedness and increased access to immediate life-saving interventions.

Furthermore, the project contributes to:

- Improving school safety and emergency preparedness.
- Increasing access to immediate life-saving interventions.
- Reducing the risk of complications resulting from delayed emergency response.
- Strengthening the resilience and preparedness of school communities.
- Enhancing coordination between schools and health service providers.
- Promoting a culture of prevention, safety, and health awareness among students and educational personnel.

The project demonstrates that investing in school-based emergency preparedness and First Aid capacity building is an effective strategy for protecting children and educational staff, especially in fragile and conflict-affected settings such as the Gaza Strip. The intervention also provides a scalable and replicable model that can be expanded to additional schools and communities in future phases.

9. Monitoring, Evaluation, Accountability, and Learning (MEAL)

Monitoring, Evaluation, Accountability, and Learning (MEAL) components were integrated throughout all stages of the project to ensure the quality of implementation, measure outcomes

and impact, and promote continuous learning and improvement. The MEAL framework was designed to provide reliable information on project performance while ensuring accountability to participants, schools, and relevant stakeholders.

Verification and Documentation

Comprehensive documentation and verification mechanisms were applied throughout the project implementation. Attendance sheets, training records, photographic documentation, and First Aid Kit distribution lists were utilized to ensure that all activities were properly recorded and that clear and verifiable records were maintained for monitoring, reporting, and auditing purposes.

Documentation procedures also ensured transparency and facilitated the tracking of participant attendance, completion of training sessions, and receipt of training materials and equipment. All records were maintained in accordance with FAJR Global's documentation and information management procedures.

Knowledge and Skills Assessment

Pre- and post-training assessments were conducted to measure improvements in participants' knowledge and understanding of First Aid and Emergency Response concepts. These assessments provided quantitative evidence of learning outcomes and enabled the project team to evaluate the effectiveness of the training curriculum and methodology.

In addition, practical competency assessments were carried out through direct observation during practical exercises and simulation sessions. Participants' abilities to perform essential

skills, including Basic Life Support (BLS), bleeding control, splinting, triage, and Psychological First Aid, were evaluated against predefined competency standards.

The assessment process demonstrated significant improvements in participants' theoretical understanding and practical competencies, highlighting the effectiveness of combining classroom instruction with hands-on training and simulation-based learning.

Feedback Mechanisms

Participant feedback was systematically collected throughout the project implementation to assess the quality and relevance of the training. Evaluation forms and satisfaction surveys were administered to gather participants' views regarding:

- The quality and relevance of the training content.
- The clarity and effectiveness of the training materials.
- The performance and competency of trainers.
- The applicability of the acquired skills within the school environment.
- Recommendations for improving future training programs.

The feedback received contributed to identifying strengths and areas for improvement and provided valuable insights for enhancing future capacity-building initiatives.

Learning and Continuous Improvement

The monitoring and evaluation process generated several important lessons and observations that were documented and integrated into future program design and implementation.

The findings highlighted that practical training and simulation exercises are among the most effective approaches for enhancing participants' confidence and ability to apply emergency response skills. The project also demonstrated the importance of providing regular refresher trainings to maintain competencies and ensure the sustainability of learning outcomes.

Furthermore, the experience underscored the value of integrating First Aid, emergency preparedness, and Psychological First Aid into a single training package, as this comprehensive approach better reflects the realities and needs of schools operating in humanitarian settings such as the Gaza Strip.

10. Challenges, Mitigation Measures, and Lessons Learned

Key Challenges

During the implementation of the project, several challenges were encountered that had the potential to affect the efficiency and timeliness of activities. The main challenges included:

- Security restrictions and movement limitations between certain areas of the Gaza Strip.
 - Limited availability of suitable and safe training venues.
 - Difficulties faced by some participants in adhering to training schedules due to prevailing field conditions and competing responsibilities.
 - Challenges related to the procurement and timely delivery of certain training and medical materials.
 - Time constraints and the need to complete training activities within a relatively short implementation period.
-

These challenges reflect the complex humanitarian context in which the project was implemented and required continuous adaptation and flexibility from the implementation team.

Mitigation Measures

To address these challenges and ensure the continuity and quality of project implementation, a number of mitigation measures were adopted, including:

- Developing flexible training schedules that accommodated participants' circumstances and local conditions.
- Conducting early and continuous coordination with educational authorities to facilitate participant attendance and workshop organization.
- Preparing training materials and supplies as early as possible to minimize procurement and logistical delays.
- Reducing the time gap between preparation and implementation phases to ensure operational efficiency.
- Strengthening the role of the field team in coordination, follow-up, and logistical organization.

These measures enabled the project team to adapt effectively to the operational environment and ensured the successful completion of project activities despite existing constraints.

Lessons Learned

The implementation of the project generated several important lessons that can inform future interventions and strengthen school-based emergency preparedness programs.

The key lessons learned include:

1. Practical and simulation-based training is more effective than theoretical instruction alone in building participants' confidence and competencies.
2. The availability of a First Aid Kit within the school environment significantly enhances participants' ability to apply the skills acquired during the training and improves the school's readiness to respond to emergencies.
3. Early coordination with educational authorities facilitates participant selection, workshop organization, and overall project implementation.
4. Regular refresher trainings are essential to maintain participants' competencies and sustain preparedness levels over time.
5. Integrating Psychological First Aid into the training curriculum reflects the actual needs of schools operating in the current humanitarian context and enhances the capacity of School Health Coordinators to respond holistically to emergencies.

Overall, the lessons learned from this project emphasize the importance of investing in school-based emergency preparedness and adopting comprehensive, practical, and context-specific approaches to capacity building. These insights will guide the design and implementation of future interventions aimed at strengthening the resilience and safety of schools in the Gaza Strip.

11. Financial Analysis

The total project budget amounted to **USD _____**, covering the costs associated with training preparation and implementation, procurement of First Aid Kits, provision of training

materials and medical supplies, trainers' fees, logistics, transportation allowances, and Monitoring and Evaluation activities.

Budget Line	Amount (USD)
Training Materials	
First Aid Kits	
Medical Training Supplies	
Trainers' Fees	
Venue and Logistics	
Transportation Allowance for Participants	
Monitoring and Evaluation	
Administrative Costs	
Total	USD

The project budget was carefully designed to ensure the efficient utilization of resources while maximizing the direct impact on beneficiaries and targeted schools. Priority was given to activities directly related to capacity building, practical training, and the provision of essential emergency response equipment.

A significant proportion of the budget was allocated to practical training materials and First Aid Kits, recognizing their critical role in enabling participants to acquire hands-on skills and apply them effectively within their schools. Resources were also dedicated to ensuring the availability of qualified trainers, appropriate training venues, and logistical support necessary for the successful delivery of the workshops.

Furthermore, budget allocations for transportation allowances contributed to facilitating participants' attendance and reducing barriers to participation, particularly for schools located in remote or high-risk areas. Monitoring and Evaluation costs ensured systematic tracking of project performance, assessment of learning outcomes, and documentation of lessons learned.

This financial analysis reflects the nature of the project as a health and capacity-building intervention focused on strengthening school preparedness and providing practical emergency response tools. Resources were strategically directed toward activities with the greatest direct impact, particularly practical training and the provision of First Aid Kits.

12. Governance, Transparency, and Accountability

The project was implemented in accordance with FAJR Global's policies and procedures, while adhering to the principles of good governance, transparency, accountability, and sound resource management.

This included the documentation of procurement processes, maintenance of invoices and supporting documents, separation of duties across planning, implementation, and monitoring functions, and ensuring the proper and efficient use of financial and material resources. These measures contributed to minimizing risks, enhancing operational integrity, and ensuring compliance with organizational standards and donor requirements.

Transparent procurement and financial management procedures were applied throughout the project lifecycle. All procurement activities were conducted according to established organizational policies, ensuring fairness, competitiveness, and value for money. Financial expenditures were subject to internal review and verification processes to guarantee accuracy and accountability.

The project also emphasized the protection of participants' dignity, privacy, and personal data throughout training and documentation activities. Photographs, records, and participant

information were used solely for professional, reporting, and documentation purposes and were managed in accordance with ethical standards and data protection principles.

Furthermore, communication and feedback channels were made available to participants and stakeholders to facilitate the submission of comments, suggestions, and complaints. These mechanisms strengthened accountability toward beneficiaries and partners and contributed to improving the quality and responsiveness of project implementation.

By integrating governance, transparency, and accountability principles into all project components, FAJR Global ensured that the intervention was implemented efficiently, ethically, and in a manner that upholds the trust of beneficiaries, partners, and stakeholders while maximizing the project's humanitarian impact.

13. Conclusion and Recommendations

The **School Health First Aid and Emergency Response Capacity Building Program** has demonstrated the importance of investing in the capacities of schools, particularly within complex humanitarian settings such as the Gaza Strip. The project contributed significantly to strengthening the preparedness of **50 government schools** and empowering **100 School Health Coordinators** with essential knowledge and practical skills that enable them to provide an initial response to emergency situations and health incidents occurring within schools.

This type of intervention is considered essential for protecting students and educational personnel, reducing health-related risks, and promoting a culture of safety and prevention within educational institutions. Furthermore, the project represents a scalable and replicable

model that can be expanded to additional schools, thereby contributing to the establishment of a more effective and sustainable school emergency response system throughout the Gaza Strip.

The experience gained through this intervention has also demonstrated that strengthening school-based emergency preparedness not only improves schools' ability to respond to emergencies but also contributes to enhancing community resilience and reducing the burden on healthcare facilities during crises and emergencies.

Moreover, integrating First Aid, emergency preparedness, and Psychological First Aid into a single capacity-building program provides a comprehensive approach that addresses the multidimensional needs of schools operating in humanitarian contexts. Such an approach enhances the ability of educational institutions to protect students, support staff, and maintain a safer learning environment even under challenging circumstances.

Recommendations

Based on the results achieved and lessons learned during project implementation, FAJR Global recommends the following:

1. Expanding the program to cover additional schools across all governorates of the Gaza Strip to ensure broader access to school-based emergency preparedness and First Aid services.
2. Conducting regular refresher trainings for School Health Coordinators to maintain competencies, update knowledge, and sustain preparedness levels over time.

3. Establishing School Emergency Response Teams within each targeted school to strengthen coordination and ensure a more organized and effective response to emergency situations.
4. Equipping schools with additional First Aid Kits and essential emergency response equipment to enhance operational readiness and improve the quality of initial interventions.
5. Strengthening coordination and collaboration between schools, Education Directorates, healthcare providers, and relevant authorities to improve referral mechanisms and emergency response systems.
6. Integrating Psychological First Aid and Mental Health and Psychosocial Support (MHPSS) components into all school safety and preparedness programs to address the psychological and emotional needs of students and educational personnel.
7. Developing and distributing a simplified School First Aid Manual to serve as a practical reference for School Health Coordinators and educational staff.
8. Establishing a regular follow-up and monitoring system to assess the utilization of First Aid Kits, evaluate the application of acquired skills, and measure the long-term impact of the training on school preparedness and emergency response capacities.

In conclusion, the School Health First Aid and Emergency Response Capacity Building Program represents an important investment in the safety, health, and resilience of schools in the Gaza Strip. The continuation and expansion of such initiatives will contribute to building stronger educational institutions that are better prepared to protect students and staff and to respond effectively to emergencies in an increasingly challenging humanitarian environment.

14. Actual Budget for the First Aid Project

	Category	Line Item Description	Unit cost	Quantity	Total Cost
Over ALL project cost					9,174
A Start-Up (One- Time Costs)					
A1	Emergency First Aid Bags	Procurement and distribution of fully equipped Emergency First Aid Bags for participating School Health Coordinators to support emergency response and first aid interventions within targeted schools.	17	55 Bag	845
A2	Medical Training Equipment (One-Time Purchase)	Purchase of medical training equipment and simulation tools, including CPR manikins, trauma management materials, immobilization devices, and practical demonstration aids required for hands-on training sessions.	—	Lump Sum	502
A3	Project Banners and Visibility Materials	Design, production, and installation of project banners and visibility materials for training venues and project communication purposes, in accordance with donor visibility requirements.	—	Lump Sum	190
A4	Training Venue Rental	Design, printing, certification, and issuance of accredited training certificates for participants who successfully complete the School Health First Aid and Emergency Response Training Program.	5	105	280
A7	Total Start-Up / Capital Costs				1,817
B Operational and Administrative Costs					
B1	Lunch Meals (8 Training Days)		10	280 Meals (35 Participants x 8 Days)	3030
B2	Trainees' Transportation Allowance	Provision of transportation allowances to trainees to cover travel expenses incurred while attending training workshops and practical sessions throughout the project implementation period.	8.6 \$*2 Day= 17.2	100 TRAINER *17.2	1720
B3	Morning Refreshments (Bottled Water and Chocolate)	Provision of bottled water and chocolate for participants during morning training sessions to support participant well-being and engagement throughout the training program.	\$10 water Boxe + \$8 chocolate Cartons	24 Water Boxes + 12 Chocolate Cartons	440
	Team Transportation and Logistical Support for the 8-Day Training Program	Transportation and logistical support for project staff during the implementation of the 4-day training program, including coordination, supervision, and operational follow-up activities.	—	Lump Sum	1730
B4	Total Operational Costs				6920
C Contingency Reserve					
C1	Contingency Reserve (5%)	Reserve for unforeseen project expenses and operational contingencies.	—	Lump Sum	436.85