TECHNICAL ANNEX

TURKEY

FINANCIAL, ADMINISTRATIVE AND OPERATIONAL INFORMATION

The provisions of the financing decision ECHO/WWD/BUD/2019/01000 and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document.

The activities proposed hereafter are subject to any terms and conditions which may be included in the related Humanitarian Implementation Plan (HIP).

1. CONTACTS

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2. **FINANCIAL INFO**

Indicative Allocation: EUR 640 000 000\(^2\) (of which an indicative amount of 80 000 000\(^2\) for Education in Emergencies)

Breakdown per actions as per Worldwide Decision (in million euros):

<table>
<thead>
<tr>
<th>Country</th>
<th>Action (a)</th>
<th>Action (b)</th>
<th>Action (c)</th>
<th>Actions (d) to (h)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Man-made crises and natural disasters</td>
<td>Initial emergency response/small-scale/epidemics</td>
<td>DIPECHO</td>
<td>Transport / Complementary activities</td>
<td></td>
</tr>
<tr>
<td>Turkey</td>
<td>640</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>640</td>
</tr>
</tbody>
</table>

3. **PROPOSAL ASSESSMENT**

Under the EU Financial Regulation, grants must involve co-financing; as a result, the resources necessary to carry out the action must not be provided entirely by the grant. An action may only be financed in full by the grant where this is essential for it to be carried out. In such a case, justification must be provided in the Single Form (section 10.4).

3.1. **Administrative info**

**Allocation round 1**

a) Indicative amount: up to 506 000 000\(^2\)

b) Under the allocation round partners can make proposals for the continuation of the Emergency Social Safety Net, and proposals to modify the current Conditional Cash Transfer for Education contract.

c) Costs will be eligible from 01/01/2019.\(^3\) Actions may start from 01/01/2019.

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\(^2\) The release of the full HIP amount is conditional on the payment of Member State contributions to the Facility for Refugees in Turkey in 2019.

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d) The initial duration for the Action may be up to 24 months, including for Actions on Education in Emergencies or Disaster Preparedness.

e) Potential partners\(^3\): All DG ECHO Partners for the continuation of the Emergency Social Safety Net; UNICEF for the modification of the current Conditional Cash Transfer for Education contract, as this is a modification to an existing contract.

f) Information to be provided: Single Form\(^5\)

g) Indicative date for receipt of the above requested information: by 11/01/2019.

**Allocation round 2**

a) Indicative amount: up to 134 000 000\(^6\)

b) Under the allocation round partners can make proposals for projects in the field of Education in Emergencies (including to continue the Conditional Cash Transfer for Education Programme), health and protection.

c) Costs will be eligible from 01/01/2019.\(^2\) Actions may start from 01/01/2019.

d) The initial duration for the Action may be up to 24 months, including for Actions on Education in Emergencies or Disaster Preparedness.

e) Potential partners\(^3\): All DG ECHO Partners.

f) Information to be provided: Single Form\(^4\)

g) Indicative date for receipt of the above requested information: by 29/03/2019.

**Further allocation rounds**

Information on further allocation rounds may be presented as an amendment to this Technical Annex.

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\(^3\) The eligibility date of the Action is not linked to the date of receipt of the Single Form. It is either the eligibility date set in the Single form or the eligibility date of the HIP, whatever occurs latest.

\(^4\) For UK based applicants (non-governmental organisations): Please be aware that you must comply with the requirement of establishment in an EU Member State for the entire duration of the grants awarded under this HIP. If the United Kingdom withdraws from the EU during the grant period without concluding an agreement with the EU ensuring in particular that British applicants continue to be eligible, you will cease to receive EU funding or be required to leave the project on the basis of Article 15 of the grant agreement.

\(^5\) Single Forms will be submitted to DG ECHO using APPEL.

\(^6\) The release of the full HIP amount is conditional on the payment of Member State contributions to the Facility for Refugees in Turkey in 2019.
3.2. **Operational requirements:**

3.2.1. **Assessment criteria:**

1) **Relevance**

   – How relevant is the proposed intervention and its coverage for the objectives of the HIP?

   – Do joint (prioritised) needs assessment and coordination mechanisms of the humanitarian actors exist, and if so, has the joint needs assessment been used for the proposed intervention and/or has the proposed intervention been coordinated with other relevant humanitarian actors?

2) **Capacity and expertise**

   – Does the partner, with its implementing partners, have sufficient country / region and / or technical expertise?

   – How good is the partner’s local capacity? Is local capacity of partners being built up?

3) **Methodology and feasibility**

   – Quality of the proposed response strategy, including intervention logic / logframe, output & outcome indicators, risks and challenges.

   – Feasibility, including security and access constraints.

   – Quality of the monitoring arrangements.

4) **Coordination and relevant post-intervention elements**

   – Extent to which the proposed intervention is to be implemented in coordination with other actions (including where relevant use of single interoperable registries of beneficiaries).

   – Extent to which the proposed intervention contribute to resilience, LRRD and sustainability.

5) **Cost-effectiveness/efficiency/transparency**

   – Does the proposed intervention display an appropriate relationship between the resources to employed, the activities to be undertaken and the objectives to be achieved?

   – Is the breakdown of costs sufficiently displayed/explained?\(^7\)

\(^7\) In accordance with the relevant section of the Single Form guidelines (section10)

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In case of actions ongoing in the field, where DG ECHO is requested to fund the continuation thereof, a field visit may be conducted by DG ECHO field expert (TA) to determine the feasibility and quality of the follow-up action proposed.

3.2.2. Specific operational guidelines and operational assessment criteria:

This section outlines the specific operational guidelines that need to be taken into account by DG ECHO partners in the design of humanitarian operations supported by DG ECHO. It also lists and explains the assessment criteria – based on those outlined in section 3.2.1 - that will be applied by DG ECHO in the specific context of the HIP to which this Technical Annex relates when assessing proposals submitted in response to the related HIP.

Where assistance is to be delivered in the form of cash transfers, particular attention will be paid to the principles laid down in DG ECHO's cash guidance note, which will form the basis for the assessment and selection of partners, in particular in the case of large scale transfers. Partners will be expected to demonstrate a satisfactory efficiency ratio and, to the extent possible and taking into account the operational context, partners will be assessed on their ability to work on the basis of common targeting criteria, single or interoperable beneficiary registries, a single payment mechanism, a common feedback mechanism and a common results framework. In line with the cash guidance note DG ECHO will expect partners to strive for segregation of duties and full transparency on the costs of implementation. For the delivery of smaller-scale cash transfers, DG ECHO will assess proposals paying particular attention the Guidance note's principles of coordination, harmonisation and multi-partner approach. A good efficiency ratio will also be expected for small-scale projects.

3.2.2.1. Continuation of the Emergency Social Safety Net to respond to basic needs

In line with commitments of the Grand Bargain and the ECHO Cash guidance note, ECHO will continue funding the Emergency Social Safety Net (ESSN) to respond to the basic needs of refugees in Turkey. The ESSN should aim for improvement in the following areas:

i. Efficiency and cost-effectiveness,
ii. Accountability;
iii. Governance, management and M&E

In addition, proposals should elaborate an exit strategy.

Partners must demonstrate their capacity to ensure the continued implementation of a complex programme like the ESSN ensuring continued and improved efficiency, effectiveness, accountability, transparency and protection.
DG ECHO encourages proposals to comply as much as possible with the Cash guidance note, with particular reference to the efficiency ratio and the segregation of duties.

The programme should continue to be based on the approach of a single unrestricted monthly transfer for unconditional cash, with a unique targeting system based on verified and agreed socio-economic vulnerability indicators and thresholds to capture the most vulnerable households. It must meet an indicative efficiency ratio of at least 85:15 for the delivery of the multipurpose cash transfer (ie 85% directly reaching beneficiaries in form of cash).

The proposal should demonstrate how the partner will make efforts to minimise operational overheads and deliver the best value for money, as outlined in DG ECHO's Cash guidance note. In line with the Cash guidance note, proposals should outline a segregation between partners of on the one hand components A (covering all fundamental elements of a cash transfer programme cycle) and B (covering the pure delivery of the cash transfer), and on the other hand component C (covering the independent Monitoring, Evaluation, Accountability and Learning - MEAL).

**Accountability and Protection**

Proposals should include:

- A robust appeals system to guarantee accountability to affected populations (AAP), equity and transparency.
- Feedback and accountability mechanisms integrated into programme design, development and M&E to improve policy and practice in programming.
- Accessible and timely information to affected populations on organizational/programme procedures, structures and processes.
- Improved referral system to ensure linkages with relevant services, existing outreach systems and complementary measures.

**3.2.2.2. Education in Emergencies (EiE)**

In addition to the general principles reflected in the Thematic Policies Annex, the following applies to the Turkey context. ECHO will fund a continuation of both the direct cash transfers and child protection components of the Conditional Cash Transfer for Education. DG ECHO will support new initiatives only if the proposal targets Out of School Children (OOSC), is built on those existing initiatives and enables solid complementarity. Initiatives that contribute to evidence on the needs of OOSC and provide outreach to effectively bring them into education systems (NFE or formal education) will be considered. Any new education initiatives should demonstrate clear complementarity and added value to CCTE, ESSN and wider Ministry of National Education (MoNE) education initiatives. In particular, actions should be complementary to the EU-funded

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action “Promoting Integration of Syrian Children into the Turkish Education System (PICTES).”

3.2.2.3. Health

No new primary health care facilities will be supported, except for newly identified emergencies or newly and clearly identified gaps in service provision by the GoT. All such engagements need to be appropriately documented, following in-depth needs assessment and highlighting uncovered humanitarian healthcare needs.

MHPSS actions should address mental health and psychosocial needs in an integrated manner, aligned with the Ministry of Health (MoH) policy. MHPSS activities must be needs and evidence based, and should be guided by the IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings. Health interventions may also cover specialised treatment and care as part of Physiotherapy and Physical Rehabilitation (PPR) services for war-wounded or injured. PPR activities should generally be guided by technical guidelines formulated by specialized and acknowledged organisations, e.g. ICRC, Handicap International (Humanity and Inclusion). The DG ECHO partner must document, also for their implementing partners, an appropriate institutional capacity (including HR and prior field experience) to manage a PPR or MHPSS projects (or project component). In all cases, interventions should include an exit strategy.

As services targeting SGBV and sexual and reproductive health (SRH) will be integrated into Medical Health Centers, DG ECHO will only support actions in cases where there are gaps in state services or in the case of new emergencies. Any actions in this area should provide comprehensive care for victims, both female and male, including MHPSS, as well as covering legal and security aspects.

All actions should be based on a quantitative needs analysis. Health Data, disaggregated according to sex and age group, should be collected and analysed on a monthly basis. Actions should also measure the quality of health care services provided.


In the case of continuations of previously funded Actions, projects should highlight the advances made and changing needs over the past period(s).

Do no harm principles should be respected especially related to medical waste management; safety (quality) of medicines avoiding duplication of existing health systems and protection of human resources, premises and means (medicine stocks).

The DG ECHO partner and any potential implementing partner should indicate in the proposal their procurement plans with regards to medicines and medical materials. All DG ECHO partners are encouraged to procure medicines and medical materials through DG ECHO identified Humanitarian Procurement Centres (HPCs), yet should this option not be
followed, the DG ECHO partner is encouraged in the proposal to highlight the alternative procurement source. All DG ECHO partners are reminded of the DG ECHO regulations and policies regarding the procurement of medicines and medical materials. http://dgecho-partners-helpdesk.eu/_media/annexiii_en_131112.pdf. Capacity gaps at the level of the local health system should be identified, substitution avoided and capacity building promoted, in a coordinated manner. Trainings need to be as much as possible in line with existing curricula and HR management frameworks.

DG ECHO may consider the inclusion of home-based support in health actions to address acute medical needs for vulnerable persons of concern who cannot access health care facilities by competent medical actors only, duly justified, based on vulnerability. DG ECHO may also consider actions using mobile support to address at risk, hard to reach groups.

3.2.2.4. Protection interventions

The core of DG ECHO’s strategic response in Turkey is to increase the protection of refugees and persons eligible for subsidiary protection and other persons of concern – preventing, limiting and mitigating the effects of protection risks and threats. Protection programming must articulate clear protection outcomes for the beneficiaries of the project. Protection activities must possess a comprehensive overview of government and non-government services in their areas of operation, and should always attempt to ensure access to government services for their clients, when and where available, to ensure sustainability. This includes increasing the knowledge of procedures, rights, entitlements and available protection services among persons of concern and service-providers on applicable legislation, rights and obligations as well as existing referral pathways. Where Government services do not exist or are over-stretched, specialised protection services including community based programming is encouraged.

DG ECHO partners are encouraged to work with specific at risk groups/communities, for targeted protection and humanitarian programming, in close collaboration with all local service providers to ensure complementarity, avoid duplication and maximise impact.

Considering that vulnerable groups are both urban and rural, DG ECHO protection partners are encouraged to develop a comprehensive strategy to address acute needs wherever they are, including from a mobile programming perspective when required, with a clear exit strategy. Priority will be given to partners who can:

- identify specific threats and modalities for addressing the threats, based on a contextual protection risk analysis;
- ensure that protection monitoring looks at protection risks, and is based on data that can allow for trends analysis. Linkages to advocacy should be mentioned, if applicable;
- adhere to specific protection guidelines as described in the Thematic Policy Annex.
All humanitarian interventions funded by DG ECHO must take into consideration, together with other protection concerns, any risk of gender-based violence and develop and implement appropriate strategies to prevent such risks. Moreover, in line with its life-saving mandate, DG ECHO encourages the establishment of quality, comprehensive and safe response services to prevent and respond to gender-based violence (GBV) from the onset of emergencies. For further details, please refer to DG ECHO 2013 Gender policy available at


**Key components**

**Outreach**

Outreach serves as the entry point for further protection services and is here defined as a mean to increase the knowledge of procedures, rights, entitlements and available protection services among persons of concern and service-providers on applicable legislation, rights and obligations as well as existing referral pathways.

In Turkey, outreach could be provided in static locations or by mobile outreach teams.

1). *Static approach to outreach:*

DG ECHO could envisage funding protection activities such as information dissemination, counselling (individual and group) and modalities of individual protection assistance within centres or other static locations as an outreach point for protection services.

2). *Mobile approach to outreach:*

Outreach teams are relevant both in rural areas (where the population density may not be sufficiently substantial to set up a community centre), but also at neighbourhood level in larger cities where persons of concern may live in isolation due to a variety of factors. Outreach teams should be capable of providing information about basic legal issues (e.g. registration), access to services, and provide referrals to specialised services (internally or externally).

As such, both mobile and static outreach must possess a comprehensive overview of access to government and non-government services in their areas of operation, and should always attempt to ensure access to government services for their clients.

**Individual Protection Assistance (IPA)**

DG ECHO will support varied modalities of individual protection assistance, based on an adequate and targeted assessment. Individual protection assistance must always have a protection outcome intending to reduce, eliminate or prevent an individual’s protection risks. Persons requiring assistance should be assessed prior to determining the modality of assistance, and several modalities may be required – for example an individual may require legal aid support as well as accompaniment to access medical services. It is ECHO/TUR/BUD/2019/91000
recommended that referral to state services and/or state social assistance schemes is considered as the first option in IPA.

All individual protection assistance should be considered sensitive, and it is paramount to respect guiding principles such as - but not limited to – confidentiality, informed consent, and active engagement of beneficiaries.

Skills and competencies of staff are vital to implement any type of individual protection assistance in a safe and professional manner. Assessment of skills and competencies of staff should take place as part of the recruitment processes and should represent the basis for capacity building activities. Additionally, due to the potential complexity of individual protection assistance modalities, partners should be able to demonstrate an adequate level of technical supervision, as well as adherence to Codes of Conduct and a partner policy on self-care for staff. Mental health level services should always be provided by professional health providers.

**Protection Monitoring**

Protection monitoring is documenting trends and identifying primary protection threats and risks in a given location. Protection monitoring is used to develop a better understanding of the situation faced by different population groups as a basis for designing an evolving protection response which incorporates preventative measures.

Protection monitoring must produce trends analysis that can inform programming and advocacy.

**Protection Advocacy**

Protection advocacy should focus on access and enforcement of rights and obligations of persons benefitting from international, subsidiary and temporary protection and asylum seekers and other persons of concern in Turkey, as well as significant context changes and persons/groups at risk. Advocacy activities must always be evidence-based and should include a clear and well defined advocacy plan including potential ways to mitigate risks. When appropriate, partners should endeavour to exchange views on issues of common interest with actors present in the field (e.g. authorities, EU, UN, donors, etc.).

**Protection Coordination and Good practices**

DG ECHO will support partners that can demonstrate experience and compliance with international good practices within the protection sector – including in issues such as data protection. DG ECHO encourages all partners to actively participate in coordination structures, including technical groups to enhance programming through lessons learned and analysis of Turkey specific information.

Further information on DG ECHO’s protection approach can be found in the HIP Policy annex and in the DG ECHO Humanitarian protection policy (available at http://ec.europa.eu/echo/sites/echo–
site/files/staff_working_document_humanitarian_protection_052016.pdf), which also includes an indicative typology of responses (section 10.7) and global good practices.

DG ECHO partners should actively engage with relevant authorities when feasible and appropriate.

**Protection mainstreaming**

Mainstreaming of basic protection principles in all programmes (regardless of the sector) is of paramount importance to DG ECHO. It refers to the imperative for each and every humanitarian actor to prevent, mitigate and respond to protection threats that are caused or perpetuated by humanitarian action/inaction, by ensuring the respect of fundamental protection principles in humanitarian programmes – no matter what sector or objective. While mainstreaming protection is closely linked to the 'do no harm' principle, it widens it to prioritising safety and dignity and avoiding causing harm, ensuring meaningful access, accountability, participation and empowerment. All proposals must demonstrate integration of these principles in its substantive sections, i.e. the logical framework, result and activity descriptions, etc.

**Social Stability**

Actions aiming to mitigate tensions resulting from the profound impact of the crisis on local communities, through a comprehensive set of interventions at local and national level, could be envisaged. Actions should tackle both the expression and causes of conflicts and community tensions, to manage them peacefully, in order to prevent collective violence or rights’ abuse. Potential activities could include establishing dialogue fora and committees at community level to react and manage tensions, or supporting the capacity of municipalities and other local and national institutions to manage local pressures.

**Mental Health and Psycho-Social Support (MHPSS)**

MHPSS is considered a priority in humanitarian interventions as reflected in the DG ECHO Health and Protection Policies, and ensuring that a proper referral pathway is in place between the different levels before embarking on any MHPSS intervention is essential. MHPSS partners are encouraged to ensure case management coordination. Accordingly, focused non-specialised support – for example in the form of individual or group counselling – may be provided at community centres, schools etc. provided that this is done by trained staff supervised by a qualified psychosocial expert. Provision of medical mental health assistance (i.e. specialised services) should always be carried out by a psychiatrist, psychotherapist or a clinical psychologist, and ideally contribute to expanding the mental health GAP strategy.

In proposals, partners must specify what kind of MHPSS activities they plan to do, as part of a protection, who the target group will be and what the expected outcome will be. Please note that recreational activities are not considered PSS activities. Proposals based on quantification of the “demand” for those services will also be prioritised, and gender
diversity must apply in terms of target groups. Any PSS activity must measure improvement of well-being.

MHPSS should follow the IASC Guidelines 2007\(^9\) and the DG ECHO health consolidated guidelines\(^{10}\), as well as the above mentioned DG ECHO Protection guidelines

3.2.2.5. Coordination, Reporting, Monitoring and Evaluation

A reporting system and IT platform is currently under development with the aim to consolidate data on planned and actual progress of Actions funded by DG ECHO in Turkey. The reports produced by this information system will provide for: improved and efficient follow-up of Actions by DG ECHO; up-to-date reporting to the Facility Steering Committee, European Parliament, EU Member States and Turkish authorities; and, information useful for the humanitarian community for operational coordination purposes.

For this reason, quarterly reporting will be required from DG ECHO partners. This frequency could change to monthly reporting requirements, in case of a rapid response to new humanitarian emergencies or upon request of the Facility Steering Committee. To achieve this, harmonised results and indicators will be required in certain sectors of activity of the Single Form. Appropriate reporting templates and relevant guidance on the reporting content and the specific reporting schedule will be shared by DG ECHO to all partners receiving funds under this HIP.

The monitoring of humanitarian interventions under the Facility will in part be served by the above platform. DG ECHO partners are also expected to have in place monitoring and evaluation systems for their actions. In addition, DG ECHO will also conduct independent evaluations for a broader and more holistic assessment of the effects and impact of the humanitarian strategy under the Facility. It will be expected that DG ECHO partners funded under this HIP extend their cooperation in this regard.

3.2.2.6. Partnerships

Local civil society organisations (CSOs) and national NGOs (NNGOs) have had and continue to play an indispensable role in responding to the humanitarian needs in Turkey. Indeed, the majority of DG ECHO funds has and will be translated into services and assistance provided primarily by local actors. As such, DG ECHO will continue to require strategic partnerships of FPA/FAFA partners with local CSO and NGOs.

Recognising that meaningful partnerships are built over time, continuation or expansion of successful existing partnerships with national organisations will be privileged. Partnerships should strive to be in line with the Principles of Partnership (https://www.icvanetwork.org/resources/principles-partnership).


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In accordance with the Financial and Administrative Framework Agreement and pursuant to the EU Financial Regulation, indirect costs shall not exceed 7% of direct eligible cost of the Action.

Business continuity planning for primary FPA/FAFA and their partners will be expected.

3.2.2.7. Capacity-strengthening

DG ECHO will support initiatives to strengthen the capacity of its partners and their implementing partners to the extent that the final objective is an improvement in the quality, sustainability and coverage of services delivered to beneficiaries. Capacity-strengthening plans should be based on an organisational capacity assessment, carried out internally by each organisation, in order to identify and prioritise the relevant skills, systems and procedures requiring development. Following this assessment, the different providers of the capacity-development should be identified, as well as the modalities. Development modalities such as coaching and mentoring, rather than classroom-style trainings, will be privileged.

With reference to the specific guidelines on partnerships above, given that the ability to initiate and nurture partnerships is an organisational capacity in itself, initiatives targeting the improvement of the partnering skills of DG ECHO FPA/FAFA partners and their implementing partners alike will be considered.

3.2.2.8. Visibility and Communications

Standard visibility (http://www.ECHO-visibility.eu/) is a contractual obligation for all DG ECHO-funded projects.

However, we also highly encourage partners with strong and ambitious communications ideas, aiming at reaching principally EU audiences, and with a demonstrated media/communications capacity to apply for above-standard visibility (http://www.ECHO-visibility.eu/above-standard-visibility-template/). DG ECHO can provide additional budget should a partner want to carry out such more elaborate communication actions. Communication actions must always be designed to fit the target audiences, the key messages, the concrete project and the capacity of the partner. Relevant actions could include for example audio-visual productions, journalist-visits to project sites, poster-campaigns, exhibitions or other types of events with an important outreach to the European public and media.

A separate communications plan, costed, with an estimated audience reach and a timeline, must be submitted and approved by DG ECHO’s Communication Unit (ECHO.D2) prior to the signing of the contract. The plan must be inserted as an annex in the Single Form (under point 9.2). Partners will normally maintain contact to the Communication Unit and/or the relevant Regional Information Officer in the course of the implementation of the plan.

Above-standard visibility/communication is additional to standard visibility. Therefore, in all projects standard visibility, including on-site display of the DG ECHO ECHO/TUR/BUD/2019/91000
visual identity will still need to be implemented based on the specifications in the Single Form.

Communication actions must always be designed to fit the target audiences, the key messages, the concrete project and the capacity of the partner. Relevant actions could include for example audio-visual productions, journalist-visits to project sites, poster-campaigns, exhibitions or other types of events with an important outreach to the European public and media.