

Complex Emergency Final Report

Country: Sudan

Emergency Appeal: MDRSD016	Glide n° OT-2014-000001-SDN
Date of Issue: 25/02/2016	Date of Disaster: 15 th may 2013
Operation start date: 16 May 2013	Operation end date: November, 2015
Operation manager: Andreas Sandin, Operations Coordinator	Point of contact: Christopher George, Operations manager
Host National Society: Sudanese Red Crescent Society	Operations Budget: 3,096,686
Number of people affected: 5, 373,993 individuals ¹ (in Sudan affected by conflict or floods)	Number of people reached: 277, 887
N° of National Societies involved in the operation: IFRC, Japanese Red Cross Society, Monaco Red Cross, Swedish Red Cross, Finnish Red Cross Society.	
N° of other partner organizations involved in the operation: USAID	

Appeal history

- This **Emergency Appeal** (EA) was initially launched on 16 May 2013 for 3,711,427 Swiss franc or 8 months to assist 150,000 beneficiaries.
- An **operations update n°1** was issued on 22 July 2013, to provide an update on the donor response to the EA as well as request for continued donor support for appeal.
- An **operations update n°2** was issued on 29 July 2013, to provide an overview of the operations progress to date, an update on the donor response, as well as a summary of the main recommendations from the evaluation of the EAs from 2011 and 2012.
- **Six (6) months operation update** extended the complex EA timeframe from eight to 15 months, until end of August 2014. This was to allow an internal joint assessment by Sudan Red Crescent Society (SRCS) and International Federation of the Red Cross and Red Crescent Societies (IFRC) to review the progress on the appeal and undertake a revision of the activities and the budget according to the assessment findings.
- **An Operation update n°3** was issued on 23 May 2014, to give the implementation status, joint SRCS and IFRC assessments which revealed increased needs due to conflict and informed the revision.
- **A revised EA** for 5,334,295 Swiss francs was launched on 4 June 2014 and the complex emergency timeframe revised from 15 months to 24 months, until 15 May 2015. It consolidated remaining needs from DREF Sudan Population movement 2014 and addressed ongoing needs for displaced populations within 4 states (Khartoum, White Nile, Blue Nile and South Kordofan) covering 213,000 individuals (42,600 House Hold) which was based on assessments of needs of new arrivals from South Sudan due to outbreak of conflict since end of January 2013.
- **An Operation Update** was issued on the 19 February 2015 which provided a brief overview of the progress made since revision of the Emergency Appeal, it also highlighted increased needs due to large numbers of the refugees in the 4 states, which in turn informed the upcoming revision.

¹ Source: Sudan 2014 Strategic Response Plan, UNOCHA p.9 with added 79,973 new arrival from South Sudan since December 2014.

- **Appeal Revision no 2** was issued on 22 June 2015, the appeal time-frame was extended for additional 6 months to cover unmet needs of the targeted population and needs of new arrivals. The appeal was planned to end in November 2015 and accordingly the budget was revised.

A. Situation analysis

Description of the disaster

According to the 2015 Sudan Humanitarian Response Plan, developed under overall coordination of Humanitarian Country Team, as of January 2015, a total of 5.4 million people across the country (about 13% of population) were in need of humanitarian assistance. This figure includes displaced populations in Darfur states, Blue Nile, South and North Kordofan as well as new arrivals from Eritrea and South Sudanese.

Sudanese Red Crescent Society (SRCS) with support from IFRC has over the years, been at the forefront of addressing the needs of the vulnerable communities affected by displacements arising out of emergencies such as violence, conflict and floods among others. Since the increase of violence in the Country in 2011, the SRCS has launched several emergency operations addressing the chronic internal displacement and natural disasters within Sudan. In 2012, an EA was launched to assist vulnerable population affected by movement across the borders of Sudan and South Sudan as a result of secession and formation of the new Republic of South Sudan.

In 2013, the rains and subsequent floods affected nearly half a million people countrywide, SRCS and its branches were at the forefront, reaching out to the most vulnerable and addressing the urgent needs of the flood-affected population (delivering essential relief, emergency health and care, and water and sanitation services) in the targeted areas.

The conflict in South Sudan in December, 2013 witnessed a set of arrivals which compounded the situation further. In addition to the internal displacement within Sudan, the states bordering with South Sudan (South Kordofan, West Kordofan, White Nile, Blue Nile, East Darfur and Khartoum) began to receive displaced people fleeing the conflict in South Sudan. The arrivals included both returnees (Sudanese nationals) as well as South Sudan nationals. The majority of these people were coming into White Nile State through two reception centres located at Kilo 10 and Alagaya. While efforts were on to mediate between the parties to the conflict to secure a ceasefire, fighting continued in several parts of South Sudan. Based on field reports from SRCS field teams, by the beginning of May, 2015, there were more than 2,000 new arrivals per week in White Nile State, 1000 in South Kordofan and Blue Nile states.

As of January 2015, according to the United Nations High Commissioner for Refugees (UNCHR), Sudan had registered 120,401 South Sudanese in Sudan. The majority of the arrivals remained in White Nile state, while others moved further to Khartoum, Kordofan states. SRCS White Nile branch has been working closely with UNHCR through a partnership agreement and has a mandate to support registration of new arrivals. The arrivals to Khartoum State who travelled from White Nile and South Kordofan settled into areas that were left vacant after the separation of South Sudan.

The IFRC, on behalf of the Sudan Red Crescent Society would like to extend many thanks to the Danish Red Cross, Finnish Red Cross, Japanese Red Cross, Monaco Red Cross, Swedish Red Cross, USAID/OFDA and other supporters, for their generous financial and in kind contributions to this operation. Financial coverage against original appeal was 51%.

Summary of response

Overview of Host National Society

SRCS was established in 1956 as a voluntary association aimed at alleviating human suffering and strengthening capacities of vulnerable groups in community. It has a strong legal base and mandate to manage First Aid, emergency response, health interventions and other humanitarian operations. Following the emergence of South Sudan as an independent nation in 2011, ten (10) of its branches became part of South Sudan Red Cross. Currently, SRCS has established presence in all eighteen states of the country. It has about 500 staff across the 18 state branches, Seventy-five (75) provincial sub-branches and administrative units. It has a Nationwide community-based network of over 35,000 trained volunteers.

The NS has extensive experience in emergency response, relief, health, water and sanitation. It is well known by the public for its humanitarian work and community service as a leading responder during emergencies. It is supported by Movement Partners and is a key partner for various United Nations (UN) organizations in the field of humanitarian assistance.

SRCS is a member of the international Red Cross/Red Crescent Movement and in Sudan, has mandate to manage First Aid, emergency response, health interventions and other humanitarian operations. SRCS has been one of the leading humanitarian agencies responding in the complex operating environment of Sudan. Main activities carried out by SRCS under the operation were:

Health:

SRCS supported the provision of medical consultations and treatment through management of mobile clinics and support to primary health centres in the targeted states. Volunteers were mobilized from both host and displaced communities. SRCS works closely with the Ministry of Health (MoH), the World Health Organization (WHO), United Nations Children's Fund (UNICEF) and other actors in this sector for various joint activities, including carrying out vaccinations, nutrition, and other health activities.

Water and sanitation:

Through deployment, operation and management of water treatment plants in White Nile and rehabilitation and maintenance of hand pumps. National Society (NS) also organized community cleaning campaigns reaching people with hygiene promotion and sanitation messages. UNHCR, UNICEF and the state department of Water and Environmental Sanitation (WES) were the main partners for SRCS in WASH.

Restoring Family Links (RFL) / tracing services:

In 2014, the National Society (NS) supported restoring family links (RFL) and provision of psycho-social support for vulnerable children through establishment of child friendly spaces (CFS).

NFI and emergency shelter material distributions:

SRCS also supported the distribution of essential basic non-food items (emergency shelter materials, blankets, jerry cans, tarpaulins, kitchen sets, hygiene kits and others) to the displaced South Sudanese in Sudan.

Beneficiaries reached through SRCS support by State

	No.	State	Number of target beneficiaries (as of March, 2015)
The EA	1	White Nile	70,654(62654camp 8000 host)
	2	South Kordofan	South Sudanese and IDP 74,433
	3	Blue Nile	South Sudanese and IDP 26,800
	4	Khartoum	South Sudanese and IDP 106,000
		Total	277, 887(46,314 Households)

supported 8 Primary Health Care clinics and 6 mobile clinics in 4 states to meet the primary health needs of the affected population. The EA also supported SRCS in the management, maintenance and operation of water treatment units in White Nile state, rehabilitation of hand pumps in Blue Nile and South Kordofan states, it also supported water purification in the targeted states, health and hygiene promotion, sanitation campaigns and volunteer support.

The final implementation was 100%

Overview of Red Cross Red Crescent Movement in country

Besides the International Federation and ICRC, there are 10 Partner National Societies (PNS) based in Khartoum and supporting various activities of SRCS in the country. The PNS are Danish Red Cross, German Red Cross, Iranian Red Crescent, Netherlands Red Cross, Norwegian Red Cross, Qatar Red Crescent, Saudi Red Crescent Authority, Spanish Red Cross, Swedish Red Cross and Swiss Red Cross).

While IFRC has been supporting emergency operations and organizational development of the NS through its Development Operation Plans, bilateral partners support generally covers Health, HIV, Food Security, Livelihood, Nutrition as well as development programmes. ICRC maintained limited operations throughout the year 2015.

Overview of non-RCRC actors in country

SRCS has partnered with a number of non-movement actors, UN agencies: UNHCR, United Nations Population Fund (UNFPA), WFP and UNICEF and is also recipient of funds from UN Common Humanitarian Funds (CHF).

Agency	Programme	Location,
UNHCR	Assistance for arrivals from Eritrea, Ethiopia	Kassala (Eastern Sudan)

UNHCR	Assistance for arrivals from South Sudan	White Nile, Khartoum
UNHCR	Shelter and NFI distribution	Internally Displaced Persons (IDPs) nation-wide.
UNFPA	HIV	River Nile, Northern State, Khartoum, Al Gazira
WFP	Food Distribution	Blue Nile, South Kordofan, Greater Darfur, Red Sea, Kassala
UNICEF	Emergency Health, Nutrition	South Kordofan, White Nile and Blue Nile
WHO	Emergency Health	White Nile
CHF	Emergency Health	South Darfur, South Kordofan, Blue Nile

Coordination and Partnerships

SRCS coordinates its activities with other actors through existing national and state coordination mechanisms. For issues related to South Sudanese displaced population in Sudan, the Government formed an emergency coordination committee with the HAC as the lead agency, supported by the Commission of Refugees and the High-level Technical Committee.

At the National level, there are several inter-agency technical sectors/cluster coordination mechanisms in place (Health, WASH, Shelter/NFI, Food Security) coordinated by UN OCHA and cluster partners (Health – WHO, WASH – UNICEF, Shelter/NFI – UNHCR, Food Security – FAO, etc.). SRCS has been sharing information and coordinating their activities with other actors through this fora.

At the state level, there are coordination mechanisms set up by local governments comprising of local Government/Administration, local departments of the Ministry of Health, Water and Environment Sanitation agency (WES), HAC, and SRCS which serves as a coordinating body and information sharing fora for the involved actors. The SRCS branches are active members of these state working groups.

The NS also works in close collaboration with several agencies in addressing the needs of the displaced population from South Sudan, including UNHCR, WFP, International Organization for Migration (IOM), UNFPA, WHO, UNICEF, Plan Sudan, Médecins Sans Frontières (MSF) and others, particularly, at the reception centres in White Nile and South Kordofan.

The IFRC Country Office supported the NS in coordination through joint participation and information sharing at the Humanitarian Country Team and other relevant meetings

Needs analysis and scenario planning

The 2014 Strategic Response Plan (SRP) prepared by OCHA for Sudan estimated that a total of 6.9 million people, representing, 17% of Sudan's total population, would be in need of some form of humanitarian assistance in 2015. This included 127, 655 persons arriving from South Sudan. The EPoA targeted all displaced persons, since separating internally displaced persons (IDPs) from South Sudanese in this complex environment proved to be a great challenge. SRCS activities therefore intended to benefit all vulnerable IDP groups.

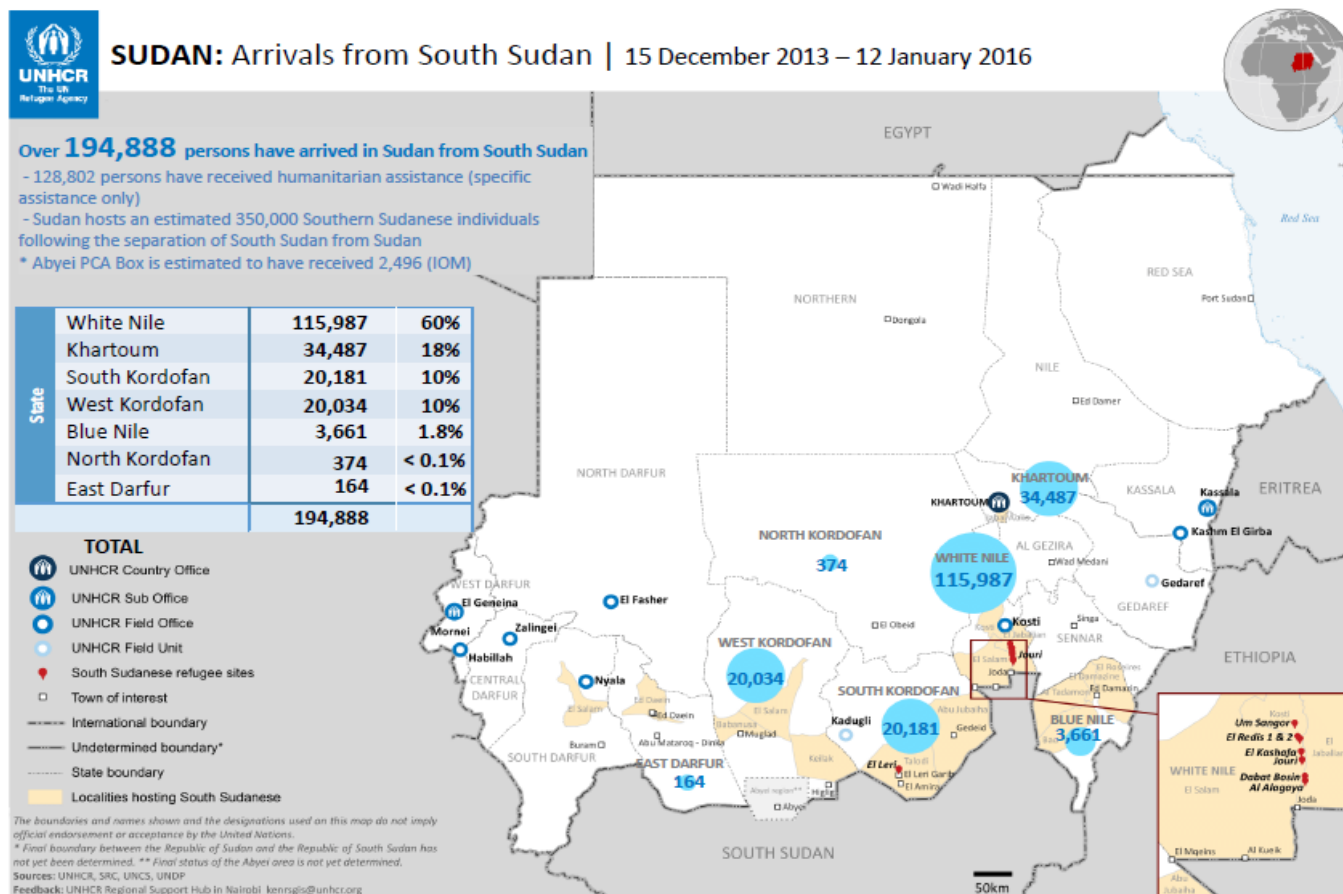
According to the UNCHR, by 25 March 2015 an estimated 129,000 South Sudanese refugees had arrived in Sudan². There was a dramatic increase of refugees crossing into the country in the past two weeks, following renewed fighting in South Sudan's Upper Nile State. To cater for the needs of this new influx, a second reception center was opened at Kuek in White Nile State and Um Sangour camp was established in White Nile State (Kosti). During the first quarter of 2015, about 13,500 from South Sudan sought refuge in Sudan.

In March 2015, SRCS and UNHCR undertook needs assessment of the situation in White Nile state which witnessed increased number of new arrivals due to the ongoing conflict in South Sudan. SRCS White Nile Branch was mandated by HAC to manage the reception centers. The Branch staff provided essential relief services which included shelter, healthcare, water, sanitation, hygiene promotion, health education, cleaning

² Humanitarian Bulletin Sudan Issue 13, 23-29 March, 2015

campaigns and vector control. In Blue Nile and South Kordofan states, SRCS state branches and technical coordinators participated in the assessments carried out by Sudanese local NGOs.

SRCS actions were in line with the 2015 Humanitarian Needs Overview findings, and where partners identified four main population categories most vulnerable: a) IDPs; b) food insecure and GAM affected children under 5; c) refugees, asylum seekers and South Sudanese; and d) IDP returnees. According to 2015 SRP, Khartoum, South Kordofan, Blue Nile and White Nile states were among the most affected in addition to the 5 states in Darfur. As of 31 December, 2015 registered South Sudanese arrivals since December, 2015 in Sudan is 194,782.



Risk Analysis

Risks identified for this operation were:

1. Further complication of the situation due to natural hazards and general insecurity for affected population and actors involved in the response persist in Sudan.
2. Ongoing internal insecurity resulted in prolonged displacement as well as accessibility challenges to the most vulnerable enhanced the constant presence of protracted emergency situation in Sudan.
3. The impact and escalation of conflict in South Sudan with consequent increase in new arrivals into Sudan posed a further challenge to the situation within the country. It was possible that the number of refugees arriving from South Sudan will be more than anticipated.

Risk management

1. 2015 flood season remained calm in Sudan and rainfall recorded was below normal.
2. Internal insecurity continued especially in South Kordofan and Blue Nile states which affected monitoring plans. However, White Nile and Khartoum states remained calm.
3. Arrivals from South Sudan were as expected, and the White Nile branch was provided with additional support by UNHCR to manage the situation. ICRC also contributed to SRCS response in White Nile state.

B. Operational strategy and plan

The original appeal aimed to support 213,000 internally displaced persons which included South Sudanese arrivals, Returnees (of Sudan origin) and IDPs displaced as a result of 2013 floods. Key activities in this appeal were: Restoration of Family Links, Water, Sanitation and Hygiene interventions (hygiene awareness, Primary Health care, provision of reproductive health care, First Aid and Nutrition, Distribution of Non Food Items, and Food items in collaboration with WFP.

The revised EA targeted the increasing needs in the camps and settlements due to the increasing numbers of new returnees from South Sudan and IDPS.

The revised operational strategy and emergency plan of action was developed by SRCS during a three-day consultative meeting in Khartoum held between 23-25 March 2015 with implementing branches and technical staff from the 4 states (South Kordofan, Blue Nile, White Nile and Khartoum), in which IFRC country and country cluster support team operations staff participated. The extended plans were to cover health and WASH activities in the four states. Main activities agreed included maintenance of water purifications units, repair and rehabilitation of hand pumps, manage health clinics (both static and mobile) in support of the IDPs and promotion of health and hygiene in communities.

Overall Objective

Provide lifesaving assistance to affected population by improving the living conditions of around 277,887 Sudanese (IDPs, and host communities) and new arrivals from South Sudan by providing safe water, essential household items, restoring family links and access to basic health services.

Strategy

According to findings from a joint SRCS/UNHCR needs assessment White Nile in March 2015, assessments carried out in Blue Nile and South Kordofan states and EA planning meeting with SRCS staff from HQ and targeted branches, there were increased number of new IDPs in need of immediate and long term assistance: Based on these findings, SRCS response strategy was designed.

Immediate

- Emergency Health & Care – to be provided through emergency health facilities and mobile health centres.
- Non Food Items (NFIs) – through provision NFIs (tarpaulins, blankets, mosquito nets, sleeping mats, kitchen sets, jerry cans, digging tools).
- Water, Sanitation and Hygiene (WASH) - provide safe drinking water through management and maintenance of water purification units and rehabilitation of hand pumps;
- Relocations for the new arrival refugees to the new sight Umsangoor that was intended for refugees. - support relocation of new arrivals in White Nile State in the area of transportation, set up of new settlement area, and provision of relief assistance (coordinated with GoS and relevant agencies).
- Humanitarian Diplomacy training for SRCS National Headquarters (NHQ) and targeted branches and support with dissemination of RC values and principles and on community engagement.

Medium-term (further in-depth assessments planned in four targeted states)

- Emergency Health & Care – ensuring access to primary health care facilities (with by support on existing facilities or by mobile clinics) is maintained by continuing the operating health centres, prepositioning of emergency health and hygiene supplies.
- WASH –continue operations of water treatment units ensuring access to safe water, rehabilitation of water sources and continue with, appropriate sanitation and hygiene promotion and vector control activities.
- RFL activities such as (Child Friend Spaces, Psycho Social Support and telephone services).
- Strengthen Humanitarian Diplomacy capacity for SRCS NHQ and targeted branches following the 1st workshop and community engagement

Long-term

- Plan of Action will be adjusted informed by ongoing assessments and outcome of monitoring and evaluation of the appeal operations.
- Support to permanent emergency coordination centres at SRCS headquarters and four targeted branches (telephone, IT and internet equipment) by renewing or supplying equipment.
- Support to SRCS warehouse and supply chain management.
- Capacity development of SRCS disaster management (DM) department
- The extended time frame of the appeal focussed on the immediate needs of the new IDPs. The extended plans were mainly funded by USAID. Also, since funding was limited, Coordination, Health and WASH services were prioritized to be supported in the extended time frame. Activities related to Shelter and Restoring Family Links (RFL), although planned, were not covered.

- Four Health Clinics at IDP camps at Alagaya, Umsangoor and Ridase (1 and 2) in White Nile state, two clinics at guli and Graiwa in Blue Nile and two clinics at El Abassey, and Kaduguly were supported. Mobile Clinics services covered El Tadamen and Buw in Blue Nile state, Al Abassaya and Rashad in South Kordofan and El Fotohat and Krari in Khartoum state.
- WASH support included management of water purification units in White Nile state, repair of hand pumps in Blue Nile and South Kordofan states, cleaning campaigns, hygiene promotion and sanitation. These were complementary to the health services.

Logistics and supply chain

International procurements for First Aid kits, Health kits, multi-purpose tents and water bladders were carried out by IFRC Sudan office. Cleaning tools, vector control equipment, hand sprayers and chemicals were procured locally through SRCS Logistics.

Communications

IFRC-SRCS Operations team continued to monitor situation of IDPs in the targeted locations and provide weekly updates to IFRC regional office. Humanitarian diplomacy initiatives at White Nile branch were initiated by SRCS Communications department to raise awareness and better understanding of humanitarian values, and building a culture of peace among authorities and target groups. IFRC regional communications team supported SRCS in developing Facts and Figures for operations communicating to wider audience.

Security

Security situation in Khartoum state and White Nile state remained calm. Blue Nile and South Kordofan state witnessed disturbances. IFRC Regional Security Coordinator provided security advice for IFRC country office.

Planning, monitoring, evaluation, & reporting (PMER)

Integrated monthly reports were received regularly from the branches. White Nile branch, which has a high caseload of South Sudanese arrivals, provided additional operation reports.

Field Visits to Khartoum and White Nile branches were carried out by joint IFRC-SRCS team. Field visit to South kordofan and Blue Nile states were carried out by external consultant contracted to evaluate the complex emergency appeal plan of action.

Regional PMER supported revision of planning process and revision of this plan.

Operational support services

An Operations Manager was recruited by IFRC Sudan to support and coordinate implementation of extended plans. A Finance Delegate to support the operations and Finance Development at SRCS was planned but not recruited. The operations taskforce at the NHQ was revived and technical counterparts engaged in the implementation of the plans. Two joint IFRC-SRCS monitoring visits were carried during this period.

The contributed to supporting the following SRCS staff through the appeal:

SRCS Staff - Logistics Coordinator HQs	1
SRCS Staff - PMER Officer HQs	1
SRCS Staff - Project accountant HQs	1
SRCS Staff – Driver	1
SRCS Staff - DM director HQs	1
Water Treatment Unit worker	1
SRCS Branch - Relief Officer Field	4
SRCS Branch - Project accountant Field	4
SRCS Branch - Warehouse stock Keeper Field	4
SRCS Branch - Warehouse Guard field	4
SRCS Branch - Emergency Health Coordinator Branches – Salary	2
SRCS Branch - Emergency WASH coordinator Branches – Salary	2

C. DETAILED OPERATIONAL PLAN

Quality Programming / Areas Common to all Sectors

Outcome 1: The quality of the operation is ensured and documented by participatory in-depth needs assessments and accountability measures.

Output 1.1: The management of the operation is informed by a comprehensive monitoring and evaluation system which will enhance branch capacity to report on the operations.

Activities Planned

- Rapid and detailed assessment of the situation, contributing to inter-agency multi-sectorial assessment and in-country coordination.
- Training 180 volunteers on rapid assessment and field data collection and analysis in the 4 States
- Joint monitoring of the operations by SRCS and IFRC.
- Coordination and engagement with key stakeholders jointly by SCRS and IFRC.
- Planning, monitoring, evaluation, and reporting training of project staff in operational branches in targeted branches.
- Training of trainers (TOT) course in community mobilization.
- Support to quarterly meetings with SCRS headquarters and targeted branches.
- Conduct lesson learned workshop with targeted branches and National Society staff.
- Undertake external evaluation and final evaluation of the emergency operation.
- Exit strategy developed for operational areas and branches.

Achievements

Through the EPoA, the NS has been supported to ensure quality of programming through PMER monitoring and technical support. Branches were assisted to submit regular monthly reports. The reports were reviewed by the technical departments. SRCS-IFRC Operations management team was revived and met regularly to review the operational plans and progress of implementations. Technical support for programme and finance management in branches were strengthened through joint review of reports received submitted by branches. The operations management team regularly monitored situation in the states through participation in coordination meetings, review of updates and providing weekly updates to East Africa country cluster support team operations Unit in Nairobi.

In August, 2015, joint field visit by the IFRC and SRCS was undertaken in White Nile state to review progress of implementation of operational plans. Three project locations Aburamad, Alagaya 1 and Alagaya 2 where SRCS manages water purification units and IDP camps were visited. Other locations in the state could not be visited due to bad road. Monitoring visits to South Kordofan and Blue Nile were not carried out due to insecurity. An external evaluation of the operation was also commissioned towards the end of the appeal time frame, during which visits to all project locations including Blue Nile and South Kordofan states were carried out. According to the discussions with WHO and SMoH during the evaluation field visits, SRCS operations support covered one third of the needs of displaced population and more than 60% of the health needs. This is because SRCS Operations during the extended time frame were restricted health and WASH support. The SMoH in the four states also acknowledged that SRCS health and WASH interventions contributed in particular to the reduction and spread of communicable and water-borne diseases among the affected populations.

RCS operations are implemented in close coordination with relevant state level stakeholders to avoid duplication and to maximize resources. This include the SMoH, HAC, WES, UN partners and NGOs involved in the operation. In White Nile state, SRCS also has partnership with UNHCR to support registration of new arrivals at the reception centres and provision of essential services not covered through the IFRC supported operation. While this sometimes overstretch the abilities of the branch, it has contributed to improving the technical capacities of branch, its staff and volunteers in managing assistance programmes for the displaced including reporting skills.

Challenges

Main challenges were:

1. Inadequate support from SRCS PMER unit for the operations. The SRCS PMER unit was established only in 2014 and its functions and roles are still in early development stages. This limited its ability to provide adequate support to the operations.
2. Insecurity due to conflicts in South Kordofan and Blue Nile also affected travels including provision of monitoring support for branches.
3. Limited involvement of technical sectors for the operation.
4. Delays in financial reporting affected activity planning and implementation.

Lessons Learned

5. Although, SRCS has long years of experience in responding to emergencies, SRCS DM and Operations department needs to be further strengthened to effectively respond to multiple emergencies and to ensure that there is greater participation of all key sectors in the operations.
6. Future operations should also strengthen mechanisms for Monitoring, Reporting and Accountability, since securing travel permits is sometimes lengthy and challenging. During the time of this operation, IFRC had supported initiatives for strengthening Beneficiary Communication and Accountability to beneficiaries. Although it was too early for these initiatives to have an impact on the operations, the support has been well received by the national society to be included in all its plans. HQ linkages with branches in PMER needs to further strengthened to ensure timely support from partners. Branches in general were seen to be in need of better guidance and support from higher levels. This was also evident from the partnership between White Nile branch had with UNHCR through which, field based presence and support of UNHCR contributed to regular and improved quality of reports from the branch.
7. There is also need to provide greater support for financial management at all levels within the national society. Delayed financial reporting from branches and from headquarters to IFRC has been a problem and which affected activity planning and implementation. Improvement of financial management procedures and systems can contribute to more effective response.

Health and Care

Outcome: Improved health situation in four targeted States through the provision of basic health services including First Aid among host community, IDPs and refugees.

Output:1.1 Emergency health care is provided to the affected population, through first aid services and referrals to appropriate health facilities in 4 targets states.

Output 1.2 The resilience of the community is improved through better health awareness, knowledge and behaviour

Needs analysis:

Seven (7) clinics were set up in the camps, to support the health needs of the IDPs in camps with adequate staff providing Primary Health Care level services (consultation, ante natal care, immunization and referral). The clinics required support in the form of staffing, medical supplies and running costs. SRCS supported 4 out of the 7 clinics. Main health issues related to overcrowding and poor sanitation facilities.

There were need for providing health care services in areas of IDP concentration, where access to health services was difficult. This was implemented through mobile health clinics. SRCS branches also assisted in conducting health education and campaigns including immunization campaigns led by Ministry of Health.

Population to be assisted:

SRCS services benefited IDPs as well as host communities. In White Nile state, majority of the beneficiaries were South Sudanese and Returnees. In Blue Nile state, beneficiaries were mostly IDPs. Beneficiaries in South Kordofan and Khartoum states included IDPs, Returnees and South Sudanese. The services were provided under the guidance and coordination of Humanitarian Aid Commission (HAC) and other agencies.

Activities Planned

Output 1.1

- Training of 200 volunteers (first aid, epidemic control, social mobilization health promotion, vector control in targeted states and diarrheal cases)
- Deployment of 8 mobile clinics

- Rehabilitation of 2 health centres in Khartoum
- Secondment of 2 medical personnel per unit and operation of 8 mobile clinics for 12 months.
- Secondment of 2 medical personnel per unit and operation for 11 PHC clinics for 12 months
- Procurement and distribution of 630 First Aid kits.
- Procurement and deployment of 6 international emergency health kits (IEHK).
- Procurement of large tents for temporary clinic or communal shelter during emergencies.
- Provision of first aid services.
- First Aid in emergencies refresher training.
- Training course in IMCI 30 medical staff (2 course)
- Training course in infection prevention in emergency settings for 70 medical staff
- Training course in nutritional assessment for 50 volunteers
- MISP training in 4 states for 20 staffs in health facilities/mobile clinics in each state.

Output 1.2

- Printing of IEC materials with Public Health Messages on glossary papers.
- Training volunteers on fire awareness.
- Deployment of staff/ volunteers for public health campaigns in affected states.

Achievements

In White Nile, health services provided through health clinics extended to about 78,411 beneficiaries. About 10% of the beneficiaries were from host communities. Services provided were basic health services and included Consultations, Emergency First Aid, Referrals and health promotion in communities and home visits. In South Kordofan, the clinics supported by SRCS catered to a population of 25,776 (mostly IDPs and host communities) while mobile clinic services supported a population of 16,987. In Blue Nile state, the two PHCs supported in two localities had 3,883 beneficiaries, whereas, mobile clinic support covered 5,307 beneficiaries. Mobile clinics run by Khartoum state branch targeted 29,160 beneficiaries in two locations. The facilities had dedicated human resources staff, sufficient medical supplies including drugs and referral support. Clinic and health reports were submitted to the state Ministry of Health.

SRCS volunteers also participated in immunization and health awareness campaigns conducted by MoH. Most common diseases among the displaced were Respiratory Tract Infections, Diarrhoea, Dysentery and Malaria. Volunteers also supported antenatal care, basic services for mother and child health including nutrition screening and referrals.

Health education sessions in White Nile mainly targeted the IDP camps and reached 68,731 beneficiaries. Volunteers also supported 724 cases with referrals for specialized care and treatment. In South Kordofan state, 1,043 home visits were carried out reaching 2,326 beneficiaries with health messages and 133 health sessions in communities were conducted which directly benefitted about 3,389 individuals. The topics covered included Malaria, Environmental Health, Malnutrition, Personal hygiene, Children's nutrition, using latrines, Diarrheal diseases, clean water and Breast feeding.

Blue Nile branch reported visiting 111 homes with health messages and reaching 687 beneficiaries. In addition, six health education sessions in communities which covered 267 beneficiaries were conducted.

To support SRCS activities in clinics and in communities, 150 First Aid kits and two Inter Agency Health Kits were procured during the extended period. two multi-purpose tents for White Nile branch to be used for screening new arrivals and treating patients were also procured. 480 First Aid kits were purchased during 2013 and 2014 to support the operations.

WHO contributed medicines and medical equipment to the IFRC supported operation. WHO contribution was mainly rapid response kits containing 50 items of medication to all age groups and covers 500 persons for three months.

In Blue Nile there was difficulties to access health care due to the rainy seasons, sporadic fighting and limited number of reliable vehicles; Blue Nile branch managed to provide health and WASH services to IDPs and returnees settled in the suburb of Damzein and Tadamon localities. According to the monthly reports a total of 7,460 ill and wounded persons received first aid, consultation and medication, in addition to ante-natal care, health and hygiene education from the Complex Emergency operation. Provision of basic health services was facilitated through mobile health clinics. MoH reported that the complex emergency operation provided support to a one third of the affected population

in the state. More than 73% of the beneficiaries were women and children. Mothers from IDPs and returnees interviewed during the evaluation acknowledged that the messages about mother and child health was useful and helped them to understand importance of immunization and they had their children immunized.

SRCS branches actively participated in the cluster meetings conducted at state level, led by SMOH and supported by partners. SRCS branches also worked closely with the Humanitarian Aid Commission and participates in inter agency assessments.

Challenges

1. The health services supported by SRCS through support of health clinics and mobile clinics were costly. Therefore, only a limited number of clinics and limited services could be supported.
2. Technical support from health department of SRCS for the operations at the branches was limited due to capacity limitations. Due to the internal conflict in some of the states, access to health and care was a challenge to the beneficiaries.
3. Complex Emergency health assistance was partially supported with WHO emergency response kits, but did not include medications for chronic diseases i.e. hypertension and diabetes.

Lessons learned

Services provided by SRCS have been timely and life-saving. Feedback received from beneficiaries acknowledged that services provided by SRCS contributed to reduction in incidence of malaria, diarrhoea, eye infections and have also contributed to filling major gaps in assistance for the displaced. There is however, need to strengthen SRCS capacities at national and branch levels in health programming. There is also need to strengthen advocacy and SRCS visibility to distinguish SRCS from MoH staff.

Water, Sanitation and Hygiene Promotion

Outcome 1: Reduced risk of waterborne diseases amongst affected population by provision of safe drinking water, safe sanitation and an appropriate hygiene.

Output 1. Improved access to safe water and sanitation and improved hygiene awareness and behaviour for 46,666 people in 4 states

Needs analysis:

As of March, 2015 drinking water supplies were low in three out of four visited camps, only El Kashfa camp had enough water due to the availability of a water station. Shortage of storage bladders (flexible tanks) in all waiting points, led to overcrowding and insufficient 9-11 liters of water /person/day at the distribution points. Need for more bladders was urgent to increase the water distribution and reduce overcrowding and time at distribution points.

Huge gaps in the number of latrines available and the need to construct latrines at all reception areas/waiting points were also identified. The shortage was leading to open defecation and the consequences of risks of spreading diseases related to environmental sanitation among the new arrivals and host community. There was also a need of rehabilitation of latrines in all camps. Vector control inside the reception canters were recommended as they were situated close to the river White Nile which increased risk for malaria.

Population to be assisted:

SRCS services intended to benefit IDPs as well as host communities. In White Nile state, majority of the beneficiaries were South Sudanese and Returnees. In Blue Nile state, beneficiaries were mostly IDPs. Beneficiaries in South Kordofan and Khartoum states included IDPs, Returnees and South Sudanese. The services are provided under the guidance and coordination of Humanitarian Aid Commission (HAC) and other agencies.

Activities Planned

- Training and mobilization of 200 volunteers
- Facilitate community cleaning campaigns in 26 communities
- Rehabilitation of 4 purification units, 3 water systems and 30 hand pumps
- Hygiene promotion campaign for 46,666 (280 hygiene awareness sessions and 8,500 home visits)
- Procurement of water tanks (10) and bladders (4) for water storage and distribution during emergencies
- Procurement of vector control equipment and insecticide

- Procurement and distribution of hygiene kits.
- Procurement of volunteers Protection Kits
- Procurement of insecticide-treated mosquito bed nets
- Rehabilitation of Improved Ventilated Pit (VIP) latrines
- Construction new of Improved Ventilated Pit (VIP)
- Construction of 42 Communal latrines
- Printing of IEC materials with WASH messages
- Maintenance and management of emergency water treatment unit (including supply of chemicals)
- Rehabilitation of hand pumps
- Training and equipping hand pump mechanics
- Procurement of water chemicals for 2 purification units for 3 months.
- Procurement and distribution of water purification tablets
- Clean-up campaigns
- Conduct 3 water chlorination trainings in each state targeting 60 WASH volunteers
- Refresher training on PHAST-ER

Achievements

SRCS White Nile branch managed the operation and maintenance of 5 water purification and treatment units which mainly served the IDP camps, host communities and the returnees. 76,120 beneficiaries in the 5 locations benefitted from this support. 15% of the beneficiaries were either host communities or returnees.

During 2015, eighteen hand pumps in Kadugli, Dallami, Abbasia, Habil and Talud localities in South Kordofan were repaired which benefitted both IDPS and host communities. In Blue Nile, three hand pumps were repaired benefitting IDPs and host population in Damzein and Tadamon localities.

Thirty-six (36) cleaning campaigns involving 2,520 beneficiaries including engaging more than 200 community members led by SRCS volunteers in South Kordofan. In Abbasia locality, the branch supported construction and rehabilitation of Latrines including maintenance of Abbasia hospital latrine which serves visitors to the hospital and the people in the neighbourhood. In Blue Nile state, SRCS WASH activities included clinic-based and house-to-house health hygiene education and complemented by cleaning campaigns. The activities were acknowledged by SMOH as significant factor in contributing to reduction of new incidence of hepatitis that cropped up during early 2015. In Blue Nile state, WASH activities implemented were 15 cleaning campaigns supported by 100 volunteers and rehabilitation of 10 hand pumps.

In White Nile state SRCS branch also supported the rehabilitation or construction of 105 Latrines in the IDP camps, conducted 14 sessions on hygiene awareness and sanitation and assisted 36 cleaning campaigns in the IDP camps. The branch also trained twenty volunteers in operation and management of water purification units and five volunteers were trained in First Aid, Social Mobilization and PHAST.

A total of 5 water bladders were procured to support branch activities in camps. Vector control equipment, vector hand sprayers and chemicals were purchased locally to support cleaning campaigns. In 2014, 3,000 hygiene kits were also purchased to support SRCS plans.

Challenges

Due to increase in the number of arrivals, overcrowding and limited funding, water provided and latrine facilities available did not meet sphere standards. In some locations, newly constructed latrines were reported to have collapsed due to the type of soil. According to branch, these challenges contributed to increased cases of diarrheal diseases, malaria, urinary tract infection (UTI) and skin infections among the population.

Lessons learned

SRCS interventions in WASH has had very positive impact on the targeted population and acknowledged by the state Ministry of Health. However, expectations by other humanitarian actors from SRCS have been greater than existing NS capacities. A comprehensive strategy for WASH in emergencies and prioritizing interventions based on SRCS strengths and capacities will assist SRCS to be more effective and have better visibility.

Although water production did not meet sphere standards, WASH assistance under the Complex Emergency was acknowledged by WES programme as providing good quality safe drinking water that contributed to reducing incidence of diarrheal and other waterborne diseases among the affected population. By working in close collaboration

with WES and SMOH, SRCS interventions have contributed to sustainability in provision of services for affected communities.

Shelter and settlements (and household items)

Outcome 1: Vulnerability is reduced among host community, IDPS and refugees through provision of non-food items to 46,314 households (277,887 beneficiaries) , in Khartoum, Blue Nile, South Kordofan and White Nile States.

Output 1.1: 4 targeted States receive essential NFI

18,000 HH of which 73% will be covered by UNHCR and SRCS will cover 5,000 HH. Most vulnerable households will be assisted with NFI kits procured through IFRC Dubai Logistic centre for distribution in White Nile, South Kordofan and Khartoum states. Needs assessment will be undertaken for Blue Nile state. Finnish Red Cross donation of 7,000 kitchen sets will be distributed under this revised appeal. Training in relief operations will be given to SRCS volunteers and staffs who will conduct the distributions.

Activities Planned

- Procurement and distribution of NFIs targeting 5,000 households, complementing UNHCR shelter support for the displaced.
- Transportation of NFIs from Khartoum to targeted states.
- Refresher training of volunteers and staff on relief operation and distribution.
- Deployment of staff and volunteers for the distribution of relief items to beneficiary population in 4 states.
- Procurement of fire extinguishers
- Training course in fire extinguishing

Achievements:

- With supplies provided from different organizations, including UNHCR, UNICEF, UNFPA, IOM, Plan Sudan, governmental agencies and others, as well as from the NS' own stocks. In 2015, SRCS received 2,000 NFI kits from ICRC for responding to needs in Blue Nile state.
- 700 pieces of tarpaulins were purchased locally in 2014 to support shelter needs within the operation. 7,000 kitchen sets were donated in-kind by Finnish Red Cross in December, 2013 to respond to 2013 floods. Due to customs delays, the items were released and received only in September 2014 and prepositioned. Since no floods or emergencies were experienced in 2015 these stocks are kept as part of emergency preparedness stocks.

Challenges:

No specific challenges were reported for this activity.

Lessons learnt:

Through various partnerships with organizations outside the RCRC Movement, SRCS has been able to reach out to more vulnerable people. Organizational development support for SRCS and branches will be future priorities so that the NS is able to meet the expectations of partners.

Food security and nutrition

Outcome 1: Food insecurity of 166,574 individuals reduced through the distribution of WFP food assistance for the target population in the target states.

Output: 22,318.5 metric tonne food parcels will be distributed to 166,574 individuals

The activity involved increasing food security of families is reduced through distribution of World Food Programme food parcels.

Activities Planned

- Refreshment training for 42 volunteers in rapid assessment

- Conduct rapid needs assessment in Blue Nile, South Kordofan, and Khartoum states
 - Mobilization and refreshment training for volunteer in food distribution
 - Distribution of 22,318.5 metric tonne of food commodities to 166,574 individuals in the target areas
 - Distributions using the Mega V barcode system
- Conduct post monitoring beneficiary survey.

Achievements

The Activities included mobilisation and training of volunteers for food distribution and were supported by WFP through a bilateral agreement between WFP and SRCS. 166,574 Individuals in White Nile, Blue Nile and South Kordofan states were covered through this activity.

Challenges

Since this activity was implemented through a bilateral agreement, getting accurate information on the plans as well as implementation was a challenge.

Lessons learnt

SRCS is seen as an important partner for WFP in Sudan. During late 2015, a framework agreement on resilience in Sudan was also signed between WFP and SRCS.

Restoring Family links

Outcome 1: Enhanced protection for minors, women and the elderly and reunification of families in three targeted States.

Output: In collaboration with key stakeholders, tracing services (telecommunications) are provided in White Nile, South Kordofan and Khartoum states for missing persons and families are supported in reunification.

Activities Planned

- Rapid assessment on RFL needs in the 3 states
- Training on PSS for 60 volunteers in the 3 states
- Refresher training for RFL for 60 volunteers in the 3 states
- Provision of telephone service for RFL in 7 locations in White Nile State
- Creation and operation of 5 child friendly spaces receptions centres in White Nile State

Achievements

- Activities supported under this outcome included telephone services in two locations in each state refresher training for in RFL and psychosocial support for 60 volunteers in each of the four states and establishment of Child Friendly Spaces.
- The SRCS conducted specific tracing needs in the target states and has handled 191 RFL cases. The National Society has also organized over 26 psychosocial support events. In South Kordofan, 364 South Sudanese children in El Leri locality have been reached through child support activities (sports, arts and drawing), while in White Nile, the SRCS reached 414 South Sudanese children in Alagaya with similar activities in collaboration with UNICEF and UNHCR. Over the reporting period, the SRCS partnered with the Ahfad University for Women in Khartoum to conduct a three-day psychosocial support in child-friendly spaces training. The training was held on 23- 25 September 2014 with participation of eight staff and 17 volunteers (25 participants in total) from White Nile, Blue Nile, South Kordofan and Khartoum states as well as the SRCS staff from headquarters. The participants learnt about the concepts of identifying the causes and contributing factors that have effects on psychological and psychosocial aspects of a child in emergencies, acquired knowledge about tools on linking psychosocial support to children in-need, and other relevant aspects. The RFL supported the incoming refugees and IDP in the camp.

Challenges

Child Friendly Spaces were discontinued in 2015 due to lack of funding.

Lessons learnt

SRCS branch capacities in advocacy and dissemination needs to be strengthened so that needs of the most vulnerable can continue to be addressed in a sustainable way.

National Society capacity building

Outcome 1: Enhanced operational capacity of SRCS to respond to emergencies in the 4 targeted States within this appeal.

Output: Increased capacity of SRCS staff and volunteers to respond to disaster and promote peace through in humanitarian diplomacy and strengthened partnerships.

Activities Planned

- 2 humanitarian diplomacy in emergency follow up trainings for SRCS staff (30 people)
- Purchase ODK/ Mega V
- Documenting lessons learnt and best practices
- Participation in national and regional fora such as the World Humanitarian Summit preparatory work
- Procurement and installation of telephone and internet equipment for the Emergency Operation Centre (EOC) at SRCS HQ.

Achievements

- A 2 day's work shop on Disaster Laws was implemented at Khartoum in December. The work shop which was part of IFRC supported humanitarian diplomacy initiatives was implemented in December. The workshop focussed on strengthening legal frameworks for disaster response in Sudan. Forty-four people including twenty-one from various government entities participated in the deliberations.
- In November, the SRCS DM Director was also supported to participate in a refresher training on Emergency Needs Assessment conducted in Nairobi.
- Procurement and installation of telephone and internet equipment for the Emergency Operation Centre (EOC) at SRCS HQ and four targeted States were carried out during 2014. No further procurements were carried out in 2015.

Challenges

- The workshop was originally planned to be implemented during mid 2015 was first postponed to be conducted in September and again postponed to December.

Lessons learnt

- The 2-day introductory workshop on disaster laws has generated great interest among participants. This is a significant progress for SRCS, considering that Sudan is vulnerable to multiple disasters and Sudanese Red Crescent is increasingly seen as the major responder to disasters in Sudan.
- SRCS plans in 2016 will further build on these successes.

D. THE BUDGET

In 2015, the emergency appeal budget was revised down based on actual and anticipated income to CHF 3,096,686. Total expenses by end of December, 2015 was CHF 2,688,388, which is 98% of actual income. The unspent balance 54,373 Swiss francs will be reallocated to Strengthen the capacities of the National Society in migration programming (Code: PSD051). Project title: Assistance to victims of trafficking and smuggling. with an overall objective; to provide humanitarian assistance (lifesaving, protection and legal issues) to the victims of trafficking and smuggling from migrant's community in Eastern states of Sudan and some funds will be relocated to complete the unfinished DM activities in PSD160.

Expenditure was within the income as the activity plans were revised. Detailed financial report is attached.

Contact information

For further information, specifically related to this report, please contact:

- **Sudanese Red Crescent Society:** Osman Gafer Abdalla, Secretary General Sudanese Red Crescent Society; Phone: +249 8378 48 89; email: sg_srcs@yahoo.com
- Rahama M. Ibrahim, SRCS Head of Disaster Management; Phone: +24983772011; email: rahamamohamed@yahoo.com
- **IFRC Country Office:** Christopher George, Operations Manager, Khartoum; phone: +249912168630; email: christopher.george@ifrc.org
- **IFRC Africa Region:** Farid Abdulkadir Aiywar, Head of Disaster Management Unit, Africa region; Phone: +254 731 067 489; email: farid.aiywar@ifrc.org
- **In Geneva:** Christine South, Operations Support, Phone: +41.22.730.4529, email: christine.south@ifrc.org

For Resource Mobilization and Pledges:

- **In IFRC Africa Region:** Fidelis Kangethe, Resource Mobilization Coordinator; phone: + 251 930 03 4013, email: fidelis.kangethe@ifrc.org

For Performance and Accountability (Planning, Monitoring, Evaluation and Reporting)

- **In IFRC Africa Region:** Robert Ondrusek, PMER/QA Delegate for Africa; Nairobi; phone: +254 731 067277; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

www.ifrc.org
Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

Disaster Response Financial Report

MDRSD016 - Sudan - Complex Emergency

Timeframe: 15 May 13 to 30 Nov 15

Appeal Launch Date: 15 May 13

Final Report

Selected Parameters

Reporting Timeframe	2013/5-2016/8	Programme	MDRSD016
Budget Timeframe	2013/5-2015/11	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget		3,096,686				3,096,686	
B. Opening Balance							
Income							
Cash contributions							
<i>Danish Red Cross (from Danish Government*)</i>		46,458				46,458	
<i>Finnish Red Cross</i>		150,664				150,664	
<i>Japanese Red Cross Society</i>		93,677				93,677	
<i>Other</i>		3,466				3,466	
<i>Red Cross of Monaco</i>		37,120				37,120	
<i>Swedish Red Cross</i>		203,913				203,913	
<i>United States Government - USAID</i>		2,207,414				2,207,414	
C1. Cash contributions		2,742,711				2,742,711	
C. Total Income = SUM(C1..C4)		2,742,711				2,742,711	
D. Total Funding = B + C		2,742,711				2,742,711	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income		2,742,711				2,742,711	
E. Expenditure		-2,688,338				-2,688,338	
F. Closing Balance = (B + C + E)		54,373				54,373	

Disaster Response Financial Report

MDRSD016 - Sudan - Complex Emergency

Timeframe: 15 May 13 to 30 Nov 15

Appeal Launch Date: 15 May 13

Final Report

Selected Parameters

Reporting Timeframe	2013/5-2016/8	Programme	MDRSD016
Budget Timeframe	2013/5-2015/11	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			3,096,686			3,096,686		
Relief items, Construction, Supplies								
Shelter - Relief	423,800		34,190			34,190	389,610	
Water, Sanitation & Hygiene	501,900		397,370			397,370	104,530	
Medical & First Aid	448,404		373,414			373,414	74,990	
Teaching Materials	6,000						6,000	
Utensils & Tools	156,299		36,174			36,174	120,125	
Other Supplies & Services	42,240		15,389			15,389	26,851	
Total Relief items, Construction, Sup	1,578,643		856,538			856,538	722,105	
Land, vehicles & equipment								
Computers & Telecom	15,500		2,079			2,079	13,421	
Total Land, vehicles & equipment	15,500		2,079			2,079	13,421	
Logistics, Transport & Storage								
Storage	96,620		86,015			86,015	10,605	
Distribution & Monitoring	27,000		54,718			54,718	-27,718	
Transport & Vehicles Costs	113,942		63,801			63,801	50,141	
Logistics Services			25,380			25,380	-25,380	
Total Logistics, Transport & Storage	237,562		229,914			229,914	7,648	
Personnel								
International Staff	240,257		207,296			207,296	32,961	
National Staff	25,616		75,484			75,484	-49,868	
National Society Staff	451,846		723,731			723,731	-271,885	
Volunteers	86,191		113,370			113,370	-27,179	
Total Personnel	803,910		1,119,881			1,119,881	-315,971	
Consultants & Professional Fees								
Consultants	18,000		50,348			50,348	-32,348	
Total Consultants & Professional Fees	18,000		50,348			50,348	-32,348	
Workshops & Training								
Workshops & Training	96,887		59,226			59,226	37,661	
Total Workshops & Training	96,887		59,226			59,226	37,661	
General Expenditure								
Travel	35,264		29,472			29,472	5,792	
Information & Public Relations	12,000		12,817			12,817	-817	
Office Costs	23,000		65,696			65,696	-42,696	
Communications	14,242		5,058			5,058	9,184	
Financial Charges			-28,867			-28,867	28,867	
Other General Expenses	992		21,601			21,601	-20,609	
Shared Office and Services Costs	71,686		76,555			76,555	-4,869	
Total General Expenditure	157,184		182,334			182,334	-25,150	
Indirect Costs								
Programme & Services Support Recover	189,000		162,521			162,521	26,479	
Total Indirect Costs	189,000		162,521			162,521	26,479	
Pledge Specific Costs								
Pledge Earmarking Fee			23,750			23,750	-23,750	
Pledge Reporting Fees			1,748			1,748	-1,748	
Total Pledge Specific Costs			25,498			25,498	-25,498	
TOTAL EXPENDITURE (D)	3,096,686		2,688,338			2,688,338	408,348	

Disaster Response Financial Report**MDRSD016 - Sudan - Complex Emergency**

Timeframe: 15 May 13 to 30 Nov 15

Appeal Launch Date: 15 May 13

Final Report

Selected Parameters

Reporting Timeframe	2013/5-2016/8	Programme	MDRSD016
Budget Timeframe	2013/5-2015/11	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			3,096,686			3,096,686		
VARIANCE (C - D)			408,348			408,348		

Disaster Response Financial Report**MDRSD016 - Sudan - Complex Emergency**

Timeframe: 15 May 13 to 30 Nov 15

Appeal Launch Date: 15 May 13

Final Report

Selected Parameters

Reporting Timeframe	2013/5-2016/8	Programme	MDRSD016
Budget Timeframe	2013/5-2015/11	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
BL2 - Grow RC/RC services for vulnerable people							
Disaster response	3,096,686		2,742,711	2,742,711	2,688,338	54,373	
Subtotal BL2	3,096,686		2,742,711	2,742,711	2,688,338	54,373	
GRAND TOTAL	3,096,686		2,742,711	2,742,711	2,688,338	54,373	