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Emergency Plan of Action Final Report

Sudan: Population Movement

 International Federation
of Red Cross and Red Crescent Societies

Emergency Appeal: MDRSD024	Operation n° OT-2014-000001-SDN
Date of Issue:	Date of disaster:
Operation start date: 18 May 2017	Operation end date: 16 Aug 2018
Host National Society: Sudan Red Crescent	Operation budget: CHF 4,184,769
Number of people affected: 351,048	Number of people assisted: 63,540
N° of National Societies involved in the operation: International Committee of the Red Cross (ICRC) is supporting the refugees in all four states in restoring family links.	
N° of other partner organizations involved in the operation: The Government of Sudan – COR (Commission for Refugees), UNHCR - United Nations High Commissioner for Refugees, FAO - Food and Agriculture Organization, IOM - International Organization for Migration, UMCOR – United Methodist Committee on Relief, UNFPA - United Nations Population Fund, UNICEF - United Nations Children's Fund, WFP - World Food Program, WHO - World Health Organization, ASSIST, Pancare, CARE Switzerland, Global Aid Hands, CONCERN	

A. Situation analysis

Description of the disaster

Roughly 4.8 million South Sudanese face severe food insecurity, and more than two million are displaced by conflict. The conflict in South Sudan has further intensified since July 2016, with the exodus of refugees into neighboring countries continuing at an alarming rate, generating Africa's largest refugee crisis. There has been a steady arrival of South Sudanese refugees mostly into East Darfur, South Darfur, White Nile, West Kurdufan and South Kurdufan states. Alarming, more than one-third of the total population in South Sudan are food insecure and the prevalence of global acute malnutrition (GAM) has reached above the 15 percent emergency threshold in seven of ten



Refugees in a camp

states and is approximately double the emergency threshold in Unity and Northern Bahr el-Ghazal states. The country has also suffered a cholera outbreak for the third consecutive year. The Government of Sudan has maintained an open border policy, allowing safe and unrestricted access to its territory for those fleeing the conflict in South Sudan, and has ensured their immediate protection and safety within its borders. As of May 2018, more than 351,0482 South Sudanese refugees have arrived in Sudan since the start of the conflict in December 2013. Thus, this Emergency Appeal was launched to enable IFRC to support SRCS in its emergency response. The SRCS had conducted needs assessment in all states receiving South Sudanese refugees and assessed the overall gaps of humanitarian support needed. Based on the assessments, the appeal interventions focused on emergency needs and reducing immediate vulnerabilities through interventions in Health including Psychosocial Support (PSS), WASH, Emergency Shelter and Settlement (including household items) and National Society Capacity building. The activities targeted the most affected people, mostly new refugee arrivals due to the ongoing conflict and food insecurity in South Sudan.

The Appeal was 3% funded and hence most of the activities could not take place. A decision has however been made to move the activities under the emergency appeal into a longer-term country operational plan. The 2019 Sudan Country operational Plan (CoP), developed in September 2018 cover all the thematics included in the current Appeal (Health WASH and Shelter); thus would address issues outlined.

Summary of response

Overview of Host National Society

The SRCS has been providing humanitarian support to refugees in eight states in WASH, NFI, PSS, health and restoring family links. The SRCS deployed 120 volunteers who supported in registration of new arrivals, preparation of meals and distribution of emergency shelter and NFIs. As part of the disaster management, committee at each state level conducted assessments and coordinated resources for better disaster response in these areas. The SRCS with the support of partner agencies, like UNHCR and Partner National societies, provided support to refugees in emergency first aid, water sanitation and hygiene, emergency shelter construction and provision of emergency NFIs, and reception management.

The SRCS and UNHCR coordinated the delivery of 1,500 NFI kits to Kharasana to respond to the influx, and Concern Worldwide has distributed 1,200 NFI kits to new arrivals at El Meriam. The scale-up of reception services is underway, and UNHCR is supporting COR and HAC to ensure reception centres are fully functional and able to respond to new arrival needs.

The SRCS also completed construction of a reception center at a key transit point for the refugees in Buram. The reception center has been operational from mid-March and provided refugees with initial screening and transportation. The SRCS handed over the facility to COR who took over the management of the reception center.

According to commission for Refugees, in the Eastern part of the country, Sudan hosts more than 102,000 refugees from Eritrea, Ethiopia and other nationality in seven camps of Kassala, one camp in Gedaref and one camp in Gezeira state. The status of the SRCS was further clarified following a Presidential Decree (26 of January 2015) which places SRCS directly under the supervision of Ministry of Presidential Affairs. This is expected to bring many advantages to the SRCS including increased accessibility and a stronger mandate for the National Society.

The National Society has competencies in areas of emergency response, relief, health, water and sanitation. It is also well known by the public for its humanitarian work and community service through years of emergency relief and community-based programming, and close collaboration with Movement Partners, National and International organizations as well as relevant government departments.

The Sudanese Red Crescent has established branches in West Kurdufan, South Kurdufan, East Darfur, South Darfur and have about 250 volunteers throughout the four states. The SRCS Branches offices are well accepted by communities and have been responding to the humanitarian needs through Food distribution, Health & Nutrition, NFIs, Restoring Family link, Dissemination, Livelihoods support, WATSAN, Community Based Disaster Risk Reduction (CBDRR). Through its network of volunteers based at grassroots levels across the country SRCS continues to be amongst the first responders to most of the emergency situations occurring in the area.

Overview of Red Cross Red Crescent Movement in country

Given the evolving humanitarian needs, IFRC with Sudanese RC worked through possible operational scenarios. During a high-level mission led by the IFRC Regional Director to Khartoum issues related to operation and future collaboration between IFRC and Sudanese RC were discussed, and common solutions/next steps were suggested. One of the decisions taken in agreement with the SRCS and partners was for IFRC to support the NS with revision of the current EA. In addition, the IFRC regional office will provide support to develop an overall National Society Development (NSD) plan, focusing on

Organizational Development issues that will inform the partners of the NSD needs. A workshop for senior governance and management that will review the strategy and develop an NSD plan is due to be held in April 2018.

The IFRC Country Office in Sudan provides coordination and facilitation to movement partners with an interest in supporting the humanitarian efforts of SRCS through bilateral and multilateral. The IFRC Country Office and SRCS attended regular United Nations (UN) led coordination meetings. This included participation in the Humanitarian Coordination Country Team (HCT), security, health and logistics sector meetings. In addition, the IFRC held bilateral discussions with foreign missions and other non-movement related key partners, including specialized UN agencies as part of information sharing, coordination mechanisms and forming partnership for support. In operational aspects, the IFRC supported SRCS Directorate of Programs and Disaster Management Department with coordination, information consolidation, reporting, resource mobilization and other technical support. The PNSs present in Sudan include Danish Red Cross, German Red Cross, Netherland Red Cross, Saudi Arabia Red Crescent, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross and Qatar Red Crescent.

After the launch of the operation, the following movement partners funded the operation:

- China RC, Honk Kong Branch (CHF 24,208)
- Japanese RC (CHF 87,386)
- Monaco RC (CHF 23,045)

Overview of non-RCRC actors in country

The National and State level authorities coordinated the overall response to the population movement. Sudanese government authority for refugee's management, Commission of Refugees (COR) and UN agencies (UNHCR, WFP, IOM, UNICEF, WHO) supported the states in managing the camp and non-camp management of refugee's humanitarian support together with SRCS. Other international and national NGOs (CONCERN, CARE SW, Global Aid Hands, ASSIST, UMCOR and NIDO) supported the needy refugee communities in WASH, Education, Shelter, and Health activities.

UNHCR distributed 1,000 NFI kits to new arrivals. WFP dispatched emergency rations to cover the needs of both new arrivals and the pre-existing arrivals. UNICEF provided temporary water trucking to Al Amira reception center and El Leri for 45 days. The state Ministry of Social Affairs coordinated alternative care arrangements for over 1,000 unaccompanied and separated children (UASC). UNHCR and COR worked with local authorities to expand the reception capacity near key border crossing points to provide immediate life-saving assistance to refugees upon arrival in country and support their onward transportation to the main service sites.

Needs analysis and scenario planning

For this section kindly refer to the EPOA and six months operation update

B. Operational strategy and plan

Overall Objective

Basic immediate needs of South Sudan Refugees in West Kurdufan, South Kurdufan, East Darfur and South Darfur camps are met through provision of essential emergency services of water and sanitation, health and hygiene promotion, provision of emergency shelter and in restoring family links to 63,540 people (12,704 HHs) living in camps.

Proposed strategy

This Emergency Appeal operation intended to support the service gaps observed due to the continues influx of south Sudanese refuges in four selected states, namely, West Kurdufan, South Kurdufan, East Darfur and South Darfur. The operation planned to support provision of immediate lifesaving assistance for affected South Sudanese refugees hosted in four selected states. In these states, there are a total of 151,005 people (31,394 HHs) refugees. However, IFRC/SRCS with other development partners planned to address 12,704 HHs or 63,540 refugees to meet their immediate needs under this operation.

Activities included provision of primary health care through procurement of basic medicines and medical equipment's, supporting the rehabilitation of the health centres and building the capacity of health practitioners through trainings. Provision of adequate and clean water, provision of shelters, construction of communal latrines, and restoring & linking families.

The key outcomes of the operations were:

Outcome 1: Reduced immediate health risks to the of affected refugees' populations.

Outcome 2: Reduced risk of waterborne disease amongst affected population through improved access to safe drinking water, safe sanitation and good hygiene behaviours

Outcome 3: The immediate shelter and settlement needs of 4,000 families are met

Outcome 4: Increase capacity of the Sudanese Red Crescent Society to respond to the emergency and needs of the affected population

Outcome 5: Continuous participatory monitoring and assessment to inform program design

After 12 months, the appeal is only 3% funded and most of the planned activities have not been implemented. However, the needs remain on the ground and 200,000 additional refugees are expected to enter the country in 2018. A DCPRR delegate and an RDRT supported an assessment and a decision was made not to revise the EPOA but to convert it into a longer-term Appeal.

Operational support services

Due to poor Appeal coverage (3%) most of the support services were not conducted. The planned personnel who were to be recruited or deployed did not materialise, the procurement which were planned both in country and internationally did not materialise as well, the planned monitoring and evaluation did not take place as well.

C. DETAILED OPERATIONAL PLAN

Health and Care

Reducing morbidity and mortality through improved access to primary health care will be one of the key priorities for SRCS intervention.

Seven fixed health centers and four mobile SRCS clinics in areas in four states of this EA are non-functional due to either staff shortages or state of physical infrastructure. Some need additional support to cater to the needs with increased caseload. To address these gaps in health services, SRCS will work closely with Ministry of Health and humanitarian actors to prioritize locations for interventions. The SRCS interventions will focus on supporting increased access to health care for the affected and prevention of diseases in communities through health and hygiene promotion.

Selected SRCS health clinics will be supported with rehabilitation of infrastructure, provision of essential laboratory equipment and incentives for MoH staff seconded to SRCS health clinics to address the increased caseloads from the influx of refugees.

To reduce risk of communicable diseases spreading and to prevent disease out breaks, SRCS volunteers will be mobilized to provide health education in the camps and to support MoH initiatives.

The main target group will be South Sudanese refugees that have arrived in the camps escaping violence and insecurity and host communities around the camps.

Health and Care

Outcome 1: Reduced immediate health risks to the of affected refugees populations.

Output 1.1: Improved access to health care and emergency health for the targeted population and communities

Output 1.2 Improved knowledge about public health issues among refugees and host communities in the four states.

Activities

- 1.1.1. Rehabilitation of seven health facilities and equipped with basic lab equipment
- 1.1.2. Support increased caseloads at SRCS health clinics by providing incentives for health staff in the 11 health clinics
- 1.1.3 Procurement and deployment of four Interagency Emergency Health Kits (IEHK) in selected SRCS clinics
- 1.1.4. Procurement and distribution of 150 First Aid Kits
- 1.1.5 Refresher training on First Aid in Emergencies for four states for 30 volunteers in each state (120 volunteers)
- 1.1.6. Procurement and installation of big tent hospital (10 x 8m) for new arrivals
- 1.1.7 Conduct MISP training for 20 health staffs
- 1.1.8. Conducting training on nutritional assessment for children for 250 volunteers
- 1.1.9. Conduct orientation for medical staffs
- 1.1.10 Setting up functional referral system for mental health
- 1.1.11 Establish and run child and other friendly spaces (7 camps)

1.1.12 Establish women groups with focus
1.2.1. Health and hygiene promotion campaigns on prevention and control of common communicable diseases such as Malaria, Acute Watery Diarrhoea, Bloody Diarrhoeas, Dermatitis and other outbreaks likely to occur during emergency situations (four states in 9 unites)
1.2.2. Deployment of staff and volunteers for public health campaigns in collaboration with MoH, UNICEF, WHO (55 volunteers per state for 25 campaigns (per diem, transportation, food)
Achievements
The activities could not be implemented due to low funding coverage of the operation.
Challenges
Lessons learned

Water, Sanitation and Hygiene Promotion

Needs analysis:

Ongoing fighting over the last four years in South Sudan and the current food insecurity has led to even more people to influx to Sudan, placing greater strain on already diminished aid services such as healthcare, water supply and sanitation infrastructure. In the nine camps targeted in this EA, there is no permanent access to safe water sources because of this, a significant safe water demand is observed in the camps for drinking and sanitation purposes.

The hygiene and health promotion will be undertaken along with key messages on sanitation, how to use ORS, PUR sachets and mosquito nets. Clean-up campaigns to improve the environmental situation in the camps will be organized.

Population to be assisted:

Main priorities in the WASH sector are to maintain water, sanitation and hygiene services in camps and host communities, to prevent disease outbreaks.

Water, sanitation and hygiene promotion
Outcome 2: Reduced risk of waterborne disease amongst affected population through improved access to safe drinking water, safe sanitation and good hygiene behaviours
Output 2.1 Improved access to safe water and sanitation, improved hygiene awareness and behaviour for the target population in four states
Activities
2.1.1. Hiring of water tankers for water trucking for 12 months and 15 days/month in two states (West Kurdufan and East Darfur)
2.1.2. Procure and install T 95 tanks in ten targeted refugee areas
2.1.3. Procure and install T 45 tanks in ten targeted refugee areas
2.1.4 Provide materials and construct 15 water tap stands for ten locations
2.1.5 Construction of platforms for water points
2.1.6 Rehabilitation of two yards in two host communities ((South Darfur and South Kurdufan)
2.1.7 Construct 40 emergency latrines in nine refugee locations in four states (West/South Kurdufan and South/East Darfur)
2.1.8 Provide materials and construct 15 garbage containers
2.1.9 Rental of tractor for waste disposal for three months in each of the nine locations
Achievements
The activities could not be implemented due to low funding coverage of the operation.
Challenges
Lessons learned

Shelter and Settlements

Needs analysis:

According to the SRCS assessment, about 63,540 people (12,704 household) needs emergency assistance in nine camps of four selected states who are not fully or partially not assisted so far in different emergency assistances. While 50 percent of the shelter needs are expected to be covered through the cluster where partners will be requested to cover remaining needs based on the MoU. The SRCS as a member of the shelter cluster coordination in in these states will support NFIs of 4000 HHs with the shelter needs. NFIs will be procured as per IFRC guidelines.

Population to be assisted:

Families benefiting from these supports will include new refugees

Shelter and settlements
Outcome 3: The immediate shelter and settlement needs of four thousand households are met
Output 3.1. Four thousand households across the four states of East Darfur, South Darfur, West Kurdufan and South Kurdufan are assisted with standard NFI and Shelter Kits
Activities
3.1.1. Procurement of 4000 Emergency Shelter and NFI kits (International) for 20,000 beneficiaries (4,000 households) and transportation/distribution of NFIs
3.1.2 Orientation and training of volunteers and staff on construction of emergency shelters by Shelter Cluster
3.1.3 Distribution of relief items to beneficiary population in four states through volunteers
3.1.4. Procurement of 500 tents
3.1.5. Beneficiary satisfaction survey on the quality and use of the shelter kits is completed
Achievements
824 tarps were procured (without the fixing materials). The NFIs kits were procured as follows: 1,755 kitchen sets, 3,510 mosquito nets, 1,000 sleeping mats, 1,000 blankets.
Challenges
Lessons learned

National Society capacity building

Needs analysis

Primary focus in branch capacity building will be in the areas of advocacy, diplomacy and accountability to beneficiaries. Key staff and volunteers in the 4 branches will be supported in the three areas through training, coaching and mentoring. This EA will have full time staffs at HQ and Branch levels in key areas of interventions to reduces the burden on branches and head office and to deliver quality services on time with timely reporting.

National Society Capacity Building
Outcome 4: Increase capacity of the Sudanese Red Crescent Society to respond to the emergency and needs of the affected population
Output 4.1. Strengthened SRCS's auxiliary role among key stakeholders through coordination, advocacy and diplomacy.
Output 4.2: Branches are equipped and trained to respond to conflict and displacement
Activities
4.1.1. Humanitarian Diplomacy trainings (five trainings) for 30 key SRCS staff and volunteers from the headquarters and the targeted branches to enhance their skills in engaging with non-Movement partners in discussing their auxiliary role.
4.1.2 Coordination and engagement with key stakeholders - Quarterly stakeholder meetings hosted by the branch (HAC, MoH, Community leaders, INGOs, IOM, Red Cross and Red Crescent Movement, UN Agencies and funding agencies). NS to host two meetings.
4.1.3 Documenting good practices
4.1.4 Caring for volunteers' activities
4.2.1. Procurement of computers, laptops, etc.
4.2.2. Recruitment and deployment of staffs

4.2.3 Purchase of fire extinguishers
4.2.4 Procurement of two storage facilities/warehouses
4.2.5. Procurement of two trucks
4.2.6 Procurement of Land Cruiser vehicles (one for East Darfur)
Achievements
The activities could not be implemented due to low funding coverage of the operation.
Challenges
Lessons learned

Quality Programming / Areas Common to all Sectors

Needs analysis:

The operations will maintain high quality in planning, monitoring, evaluation and reporting operational plans and activities. Coordination with internal and external stakeholders, with relevant UN agencies and government authorities will be strengthened. To the extent possible, all SRCS interventions will be part of coordinated response led by state coordination mechanisms. The operations will strengthen accountability to beneficiaries through strengthened beneficiary communications, increased participation of beneficiaries in program plans and activities and through gender mainstreaming ensuring that all vulnerable sections have adequate opportunities for support.

Population to be assisted:

The NS, Branches, staff, volunteers and communities will be the main target group.
Outcome 5: Continuous participatory monitoring and assessment to inform program

Needs assessment
Outcome 5: Continuous participatory monitoring and assessment to inform program
Outcome 6: Implementation of SRCS programming is improved by ensuring effective and timely communication with refugees and engaging them by considering displaced persons opinion and feedback.
Output 5.1 A comprehensive monitoring and reporting framework and system for ensuring accountability to beneficiaries is established
Output 5.2 Strengthened communication with and accountabilities to beneficiaries
Output 6.1 Displaced people are engaged in two-way communication, incorporating their opinions and needs for the implementation of response plans
Activities
5.1.1 Establish needs assessments templates, carry out needs assessments and identify beneficiaries
5.1.2 Establish a Monitoring and Reporting Framework for the operations
5.1.3 Joint monitoring of the operations by SRCS HQ/IFRC and branches
5.1.4 Mid-term review (internal) to include all relevant technical sectors
5.2.1 A beneficiary feedback mechanism is developed and established defining accountability to beneficiaries and to ensure effectiveness of the response
5.2.2. Organize two beneficiary community trainings for key branch staffs and volunteers.
5.2.3 Quarterly meeting with beneficiary committees (one meeting per state at different locations).
5.2.4 Communication brochures and IEC materials about
6.1.1 Setting up of feedback/suggestion boxes and information boards in the community centres;
6.1.2 Conduct of periodic Focus Group Discussions (FGD) to collect beneficiary feedback and incorporate refugee's opinion during EPoA update
Achievements
The activities could not be implemented due to low funding coverage of the operation
Challenges
Lessons Learned

D. THE BUDGET

Under shelter component, the project assisted more people that initially targeted with the allocated budget, thus and overspending recorded under this account line. Also, the initial travel costs were underestimated relating to an overspending in this line; and lastly the project used volunteer who were entitle to payment but this was not budgeted when developing the Appeal budget.

Disaster Response Financial Report

MDRSD024 - Sudan - Population Movement

Timeframe: 18 May 17 to 16 Aug 18

Appeal Launch Date: 18 May 17

Final Report

Selected Parameters

Reporting Timeframe	2017/5-2018/10	Programme	MDRSD024
Budget Timeframe	2017/5-2018/08	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			134,639			134,639	
B. Opening Balance							
Income							
Cash contributions							
<i>China Red Cross, Hong Kong branch</i>			24,208			24,208	
<i>Japanese Red Cross Society</i>			87,386			87,386	
<i>Red Cross of Monaco</i>			23,045			23,045	
C1. Cash contributions			134,639			134,639	
C. Total Income = SUM(C1..C4)			134,639			134,639	
D. Total Funding = B + C			134,639			134,639	

* 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			134,639			134,639	
E. Expenditure			-129,882			-129,882	
F. Closing Balance = (B + C + E)			4,757			4,757	

Disaster Response Financial Report

MDRSD024 - Sudan - Population Movement

Timeframe: 18 May 17 to 16 Aug 18

Appeal Launch Date: 18 May 17

Final Report

Selected Parameters

Reporting Timeframe	2017/5-2018/10	Programme	MDRSD024
Budget Timeframe	2017/5-2018/08	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)				134,639			134,639	
Relief items, Construction, Supplies								
Shelter - Relief	12,313			37,623		37,623	-25,310	
Clothing & Textiles	23,110			12,456		12,456	10,654	
Water, Sanitation & Hygiene	18,000						18,000	
Utensils & Tools	46,337			36,337		36,337	10,000	
Total Relief items, Construction, Sup	99,761			86,417		86,417	13,344	
Logistics, Transport & Storage								
Storage	2,110			2,110		2,110	0	
Distribution & Monitoring	5,876			5,876		5,876	0	
Transport & Vehicles Costs	3,602			10,099		10,099	-6,497	
Logistics Services	11,169			11,169		11,169	0	
Total Logistics, Transport & Storage	22,758			29,254		29,254	-6,497	
Personnel								
International Staff	55			55		55	0	
National Society Staff				64		64	-64	
Volunteers				6,171		6,171	-6,171	
Total Personnel	55			6,290		6,290	-6,235	
General Expenditure								
Travel	2,797			270		270	2,527	
Financial Charges	1,051			-277		-277	1,327	
Total General Expenditure	3,848			-6		-6	3,854	
Operational Provisions								
Operational Provisions	0						0	
Total Operational Provisions	0						0	
Indirect Costs								
Programme & Services Support Recove	8,217			7,927		7,927	290	
Total Indirect Costs	8,217			7,927		7,927	290	
TOTAL EXPENDITURE (D)	134,639			129,882		129,882	4,757	
VARIANCE (C - D)				4,757		4,757		

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[Click here](#)

1. Revised Emergency Appeal budget (*if needed*) [below](#)
2. Click [here](#) to return to the title page

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.

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