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Final report

Uganda: Population Movement S.Sudan

 International Federation
of Red Cross and Red Crescent Societies

Emergency Appeal: MDRUG037	Glide n° OT-2014-000013-UGA
Date of issue: 1 July, 2015.	Date of disaster: December 2013.
Operation manager: Dennis Kjeldsen, Programmes Coordinator, EAI/OI Regional representation office.	Point of contact: Dennis Kjeldsen, Programmes Coordinator, EAI/OI Regional representation office.
Operation start date: 11 February 2014.	Operation end date: 31 March 2015 (operational activities ended 15 December 2014)
Operation budget: CHF 2,364,705.	
Number of people assisted: 25,000.	
Host National Society Presence (n° of volunteers, staff, branches): 240 volunteers, 10 staff and 4 branches in the regions bordering South Sudan.	
Red Cross Red Crescent Movement partners actively involved in the operation: IFRC, ICRC, German RC, Canadian RC, British RC and Finnish RC	
Other partner organizations actively involved in the operation: Government of Uganda, Adjumani District Local Government, Arua District Local Government, UNHCR, WFP, UNICEF, ADRA, IOM, WHO, War Child Canada, Care International, IRC, Caritas, World Vision, TPO, IOM, URCS, LWF, OXFAM, ACF, DRC, ACORD, MSF France, MTI, Baylor, PLAN International, World Vision International and Save the Children.	

Period covered by this Final Report: 11 February 2014 to 31 March 2015.

Appeal target (current): CHF 2,364,704;

Appeal history:

- This [Emergency Appeal](#) was initially launched on 11 February 2014 for CHF 1,722,559 and aimed at assisting 25,000 beneficiaries.
- [Operations update no. 1](#) was issued on 25 February 2014, [operations update no. 2](#) on 24 March 2014.
- A [Revised Emergency Appeal](#) was issued on 17 September 2014 increasing the budget to CHF 2.3m to support 25,000 beneficiaries until March 2015.
- A [six-month update](#) was issued on 30 September 2014.
- A [Preliminary Final Report](#) was issued on 30 April 2015 pending the fully accounting of the working advances held by the National society.
- CHF 170,000 was initially allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support the national society in responding by delivering assistance



New borehole drilled and equipped. Photo: URCS

The activities of this appeal ended on 15 December 2014 due to integrity issues which made funding to URCS by IFRC, PNS and ICRC impossible.

The major donors and partners of this appeal multilaterally include: American Red Cross, British Red Cross, Canadian Red Cross and Canadian Government, Finnish Red Cross and Finnish Government, Japanese Red

Cross, Japanese Red Cross (Panasonic Corporation), Red Cross of Monaco, Swedish Red Cross, Austrian Red Cross and Norwegian Red Cross.

On behalf of the Uganda Red Cross Society, IFRC would like to sincerely thank all partners for their generous contributions and support to this Emergency Appeal.

[<click here to view the contact details and here for the final financial report >](#)

A. Situation analysis

Description of the disaster

The escalation of fighting in South Sudan from December 2013 onwards resulted in displacement of people, including refugees to Uganda. As the areas affected by the armed conflict continued to expand, thousands of refugees continued to be uprooted from their homes resulting into mass population displacement within South Sudan. By end of November 2014, Uganda had received more than 129,000 South Sudanese refugees. While new arrivals continue to be received and registered at transit and reception centres, the rate of newcomers has dramatically reduced. The operation focused on refugee settlements in Northern Uganda (West Nile Sub Region, Arua and Adjumani districts).

URCS, through its branches in Arua and Adjumani and with support from International Committee of the Red Cross (ICRC), as part of response continued to provide humanitarian assistance to the newly arrived refugees in the transit centres and settlements with Restoration Family Links (RFL) activities, support which were complimented by support from the IFRC supported Emergency appeal. Through the appeal URCS rolled out hygiene promotion activities, registration of new arrivals, psychosocial support activities, provision of clean water, ambulance services, and activities preventing spread of communicable diseases with final touches on rolling out of emergency shelters.

Mainly due to the fact that the situation is now considered in the recovery phase and no longer an emergency, along with the internal problems the URCS is facing, a decision was made to stop activities in December 2014. The situation was under observation in the event the condition worsened.

Summary of response

Insecurity and violence that flared up following an alleged attempted coup in Juba degenerated into full scale armed conflict in several states of South Sudan. As the areas affected by the armed conflict continued to expand, thousands of South Sudanese people continued to be uprooted from their homes resulting into mass population displacement within South Sudan. Hundreds of thousands of the displaced crossed the South Sudan border in pursuit of safe havens within the neighbouring countries.

Uganda which shares a common border with South Sudan has received the bulk of the fleeing refugees with reported daily influx of up to 300 South Sudanese refugees at one point in 2014. An emergency appeal was jointly prepared by URCS and the IFRC to support 25,000 refugees in dire need of emergency medical care, shelter, food, water and sanitation facilities. The number of newly arrived South Sudanese refugees in Uganda was estimated by UNHCR at 129,913 on 21 November 2014.

The budget for this operation amounted to CHF 1,722,558 and the operation was scheduled to end in August 2014. A start-up DREF of CHF 170,000 was allocated from the IFRC on 11 February 2014 to support Uganda Red Cross Society (URCS) in delivering humanitarian assistance to those refugees. The operation was subsequently revised in September, raising the budget to a total of CHF 2,364,704 and extending the timeframe of the programs until March 2015.

The rate of the implementation was affected by internal problems at the national society. Nonetheless activities were rolled out and some assistance was provided to the refugees in the region. The main achievements include the deployment of WatSan Kit 5's which produced a total of more than 3,050,000 litres of clean water for the refugees. Seven new boreholes were dug and equipped, as well as seven more rehabilitated, providing clean water to more than 14,000 people. In addition 22 water tanks were deployed to the settlements for water storage for beneficiaries' usage. NFIs which were distributed included 7,000 jerry-cans and 4,000 bars of soap as well as 5,782 hygiene dignity kits were also distributed in both Arua and Adjumani. It is important to note

that latrines were also constructed in sufficient numbers to attain the SPHERE standards in the settlements managed by the URCS. The volunteers reached 7,200 people with various hygiene and sanitation messages (i.e. topics such as latrine use, refuse management, hand washing, water management) and also reached more than 8,000 people with health promotion (sessions on prevention of common diseases (i.e. Malaria, HIV/AIDS, diarrhoeal diseases) messages).

This operation was halted in December 2014 following allegations of corruption and mismanagement in 2013 which made the Uganda Red Cross Society experience an increasing set of institutional challenges, resulting in continuing concerns regarding the integrity and effectiveness of URCS programmes, finance and logistics management. As a result a decision was made by IFRC, ICRC and PNS in-country to cease funding and stop their support to the Uganda Red Cross (URCS) activities. This decision led the IFRC in consultation with PNS in country to close operational activities with effect from 15 December 2014 and subsequently close and report on the operation by 31 March 2015.

The final report has however been delayed due to unremitted working advances from URCS which has now been cleared.

Coordination and partnerships

Office of the Prime Minister (OPM) on behalf of Government of Uganda and the UNHCR were coordinating the overall refugee response operations in the north of Uganda. A number of partners had been identified as implementing partners for both Arua and Adjumani, along with the URCS. There were a number of operating agencies among them: international relief agencies, international and local NGOs and UN agencies on ground providing humanitarian assistance to the South Sudan refugees' influx. Depending on the capacity and willingness of these different bodies, each was assigned either a sector of activity and/or a particular area within the refugees' settlements. URCS therefore agreed to manage a settlement in Adjumani, namely Mungula, and a section of Rhino Camp (Arua).

UNHCR and OPM jointly launched a humanitarian appeal towards the South Sudan Refugee Influx response and continued to request aid agencies to jointly support in addressing existing gaps in terms of provision of services to the refugees. As part of operation coordination, weekly sectorial meetings were being held by the different sectors in both Arua and Adjumani while at the broader level, monthly interagency coordination meetings were being conducted in the settlements by OPM and UNHCR. At the national level, bi-weekly interagency meetings continued to be convened by OPM and UNHCR in Kampala.

The RCRC emergency appeal covered essential parts of the inter-agency response towards the South Sudan refugee influx. As part of this commitment the IFRC deployed an Operational Support Unit to Uganda to support the URCS and provide technical assistance towards the implementation of the emergency appeal intervention.

Needs analysis and scenario planning

Amongst the urgent needs/gaps identified in the inter-agency assessment report are the following:

Health and Care: The health situation of the refugees and host communities remained challenging given that the number of medical staff and prescription drugs available remains low. The gap in health infrastructure was existent prior to the refugees arriving and the situation was been exacerbated by the additional needs created by the arrival of the newcomers.

Water, sanitation and hygiene promotion: The affected refugees had limited access to safe drinking water and sanitation facilities. The good hygiene practices and behaviours were lacking due to limited awareness among the refugees.

Shelter and settlements (and household items): The shelter needs of the displaced persons continued from the initial assessment and were anticipated to worsen with the continuing rains. The existing rudimentary structures required repair and reinforcement to withstand effects of the rainy season.

Food security, nutrition and livelihoods: There were some gaps in food security, nutrition and livelihood activities that were not covered by other organizations. Generally the assistance was on a small scale and

required to be expanded. The agencies focused on nutrition programming in Adjumani were concentrating on treatment and supplementary feeding and the link with food security access and agricultural activities was limited.

Capacity building: There was a need to enhance capacity at branch level as well as to ensure the lessons learnt from this response helped improve the National Society's overall disaster management systems.

B. Operational strategy and plan

Overall Objective

To improve the living conditions of around 25,000 South Sudanese refugees (5,000 families) by providing safe water, shelter, and improved access to health services.

Proposed strategy

Findings from the inter-agency assessment report indicated that there were huge needs still not addressed, in particular in areas of shelter, water and sanitation, health and care and psychosocial support. In addition to the primary sectors, needs/gaps that were identified from the assessment mission were the following: Restoring Family Links (RFL); protection of vulnerable groups; first aid services; psychosocial support. The 25,000 targeted beneficiaries were those refugees that originated from South Sudan and had fled to Uganda, with 3,000 households in Adjumani and 2,000 in Arua/Koboko). Beneficiaries for the health activities were specifically focused on the chronically ill, pregnant women, persons with disability, and the elderly.

Generally communal WatSan facilities were strategically located in the underserved areas/camps (Rhino and Baratuku) where there was no other actor involved or the response provided was insufficient to address the needs of the refugees. Priority was given to areas where the service coverage was below SPHERE standards and those with increasing diarrheal disease prevalence. The hygiene promotion and awareness campaigns were carried out in the camps to benefit the refugees and host communities as well. The host community also benefited from some of the planned services (an estimated 3,000 households close to the camps)

The operation was structured into continued response, incorporating elements of recovery and disaster preparedness activities incorporating two intervention areas supporting the immediate life-saving and medium-term recovery needs in the following sectors: WASH health, shelter, food-security and nutrition, and epidemic preparedness for response. Uganda Red Cross Society assistance in the two areas (Adjumani and Arua) complemented ongoing humanitarian actions undertaken by the government, UNHCR and a host of agencies. The operation also included continued deployment of National Society surge capacity (through the NDRT and other specialized staff) to support the planned interventions, as well as to monitor the operations.

Fundamentally, the epidemic preparedness and food security and nutrition were planned as means of exit strategy for the operations with the aim of supporting the beneficiaries in a sustainable manner during the extended timeframe of the appeal. The National Society was to use the Emergency Appeal in implementing activities that highlight the importance of beneficiary communication in disaster response.

C. DETAILED OPERATIONAL PLAN

Health and care

Outcome: Emergency health care and psychosocial support to refugee families in reception centres and camps.	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> Affected refugee population is provided with rapid first aid and referral to access appropriate health care. 	<ul style="list-style-type: none"> Deploy a health RDRT to assist in assessment of needs, training of volunteers, and technical support to review the health activities and plans. Deploy one ambulance for referrals from the camp. Procure three tricycle ambulances for sustained community-based casualty referral. Undertake first aid services and referrals in the arrival points, transit centres, and camps.
<ul style="list-style-type: none"> Health and wellbeing of the affected families are promoted. 	<ul style="list-style-type: none"> Procurement and distribution of 10,000 Mosquito nets to 5,000 vulnerable families among the refugees. Conduct sensitisation sessions on prevention of common diseases (Malaria, HIV AIDs, diarrhoeal diseases). Close links to be developed with the hygiene promotion activities. Monitoring and reporting on response activities.
<ul style="list-style-type: none"> Psychosocial wellbeing of affected communities and emergency responders. 	<ul style="list-style-type: none"> Identify and train 60 volunteers in psychosocial First Aid and first aid services. Establish links with professional organizations and institutions for referral of individuals in need of more specialized support. Provide psychosocial support to traumatized individuals and refugee families. Referrals of individuals in need of specialized care and assistance
<ul style="list-style-type: none"> Strengthened capacity of the national society to ensure provision of quality services in line with international standards. 	<ul style="list-style-type: none"> Training 120 volunteers on emergency health and first aid, shelter and relief, and PHAST-ER. Contingency planning exercises. Improve communication network in the two branches- internet, telephone and office structure (furniture).

Impacts: Health promotion activities in both locations reached more than 8,000 individuals through community sessions, group sessions and one to one session.

URCS implemented psychosocial support activities in both Arua and Adjumani operation areas as part of planned interventions under the emergency appeal. A total of 60 volunteers were trained in psychosocial support. From the months of March to November 2014, a total of 40 volunteers remained deployed in the two branches of Arua and Adjumani to carry out routine psychosocial support activities among the refugee community in the settlements. Throughout the operation timeframe the volunteers deployed reached more than 15,000 refugees via community meetings and one-on-one sessions. Referral pathways were created and a total of 1,030 refugees were referred during the operation. Amongst other issues, the individuals were supported for alcoholism, aggressive behaviour, self-withdrawal, providing company for elderly and minor aspects of gender based violence. The volunteers carried out GBV sensitization, registration of Persons with Special Needs (PSNs) and provide basic counselling services through house to house visits, community outreaches often using one to one or group discussions.

The operation team has been backed in Adjumani with a standby ambulance supporting medical evacuation and referrals cases from the various settlements, an effort that was applauded by UNHCR, OPM, humanitarian actors and the refugee community. In total, 186 patients were referred or evacuated in Adjumani alone using URCS ambulance services. Following the outbreak of cholera in neighbouring Moyo District, a Cholera Contingency Planning meeting was held in Adjumani with the DDMC unveiling a plan of action and team to coordinate possible response. The operation team and in particular the emergency health specialist played a crucial role in the meetings that ultimately tasked URCS with community social mobilization.

Although the interventions in this area have been quite few owing to budgetary limits, there has been significant contribution towards supporting health services for the refugees in both Arua and Adjumani.

Activities not implemented

- Deployment of a health RDRT to assist in assessment needs, training of volunteers, and technical support to review the health activities and plans
- Procurement of 3 tricycle ambulances
- Training 150 community based volunteers
- Procurement and repositioning of 2000 assorted epidemic response
- Production and distribution of 50,000 information leaflets/brochures
- Conducting 10 bi-weekly radio talk shows and 540 daily radio spot jingles on epidemics
- Conducting film shows in refugee settlements
- Supporting registration, screening and immunization of children against all vaccine –preventable diseases.
- Procurement and distribution of 10,000 mosquito nets to 5,000 vulnerable families.
- Conducting intensive hang-up, keep up campaigns.
- Conducting IRS to reduce malaria-causing vectors.
- Conducting community sensitization sessions/health promotion.
- Training 120 volunteers on emergency health and first aid, shelter and relief.
- Improving communication network in 2 branches.

Water, sanitation and hygiene promotion

Outcome: Immediate reduction in risk of waterborne and water related diseases in targeted communities	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> • Increased access to safe water for the 5000 refugee families and host population during six months. 	<ul style="list-style-type: none"> • Deployment of two WatSan Kit 5 to supply water to refugees. • Maintenance of the deployed WatSan Kit 5 through procurement of consumables and logistic support to WatSan NDRT members and volunteers • Procurement and installation of 10 water storage tanks • Procurement and distribution of safe water storage containers to 5,000 families (10,000 jerry cans / two per family). • Construction of safe water sources (drilling of 10 new boreholes and rehabilitation of 12 boreholes) in the settlement camps of Adjumani district. • Continuous assessment and coordination of the operation.
<ul style="list-style-type: none"> • Adequate sanitation, which meets Sphere standards in terms of facilities to user population ratio, is provided to the targeted refugee population. 	<ul style="list-style-type: none"> • Procurement of 500 prefabricated plastic latrine slabs. • Digging of pits and construction of latrines (500 stances for 25,000 people). • Maintenance of latrines (setting up and monitor system for cleaning) and de-sludging • Procurement of 50 sanitation tool kits (Pangas, hoes, peak axes, wheel barrows, hammers, ropes and metallic piles), for use in reception centres and camps. • Procurement and construction of 100 hand washing facilities. (Each WatSan Kit 5 also includes 1000 low flow dispensers for hand washing) • Procurement of 300 rolls of plastic sheeting for the construction of latrine super structures and bath shelters. • Construction of 500 communal bath shelters. • Procurement 300 timber /poles, assorted nails and hammers for latrine construction
<ul style="list-style-type: none"> • Increased awareness on hygiene practices and disease prevention among the targeted 	<ul style="list-style-type: none"> • Develop a hygiene promotion plan (including target groups, key messages, communication channels), based on identified health issues and practices • Training of 40 volunteers in hygiene promotion in emergencies

refugee population.	<p>(including the PHAST-ER approach).</p> <ul style="list-style-type: none"> • Production of 40 PHAST tool kits. • Trained volunteers conduct hygiene promotion campaign, including PHAST-ER activities. These activities will be closely coordinated with the health sensitisation sessions. • Regular monitoring of hygiene promotion activities, and progress/results • Production and distribution of IEC materials (20,000 Posters, 20,000 brochures). • Procurement and distribution of Multi-purpose soap (1 bar per household per month for 5000 HH) • Procurement and distribution of 100 hard brooms and 100 brushes. (part of PHAST-ER activities) • Procure and distribute 12,000 dignity kits (Menstrual Hygiene Kits) to women and girls • Procure 60 sets of Protective gear for the volunteers (gum boots, rain coats, umbrellas, gloves, and capes). • Procurement of 40 pumps for spraying. • Procurement of 260 Litres of vector control chemicals. • Carry out spraying and vector control activities in reception areas and camps.
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Impacts: Hygiene and Sanitation continued to be a sector of crucial significance throughout the implementation of the appeal. In total, both operation areas of Arua and Adjumani deployed 40 volunteers to support sanitation and hygiene promotion activities across the refugee settlements. Key activities conducted by the volunteers included sensitizing refugees on good hygiene and sanitation practices and house to house hygiene and sanitation outreaches. For both teams, the volunteers employed communal meetings, group discussions, and use of illustrative materials and demonstrations to effect the sensitizations.

The volunteers reached 7,200 people with various hygiene and sanitation messages. The messages disseminated within this reporting period focused on topics such as latrine use, refuse management, hand washing, water management with overall purpose of averting possible outbreak of hygiene and sanitation related diseases within the refugee settlements.

Access to clean and safe water remained one of the areas of need in both Arua and Adjumani with several needs assessments reports by URCS, OPM-UNHCR, OXFAM and other partners, all revealing challenges of access to adequate clean and safe water among the refugees in both Arua and Adjumani. The interventions identified for implementation as response to the immediate needs focused on both short term and medium term measures and aimed at contributing to the immediate provision of clean and safe water. The Red Cross continued to maintain 2 water treatment units (WatSan Kit-5) in both Adjumani and Arua. It is estimated that a total of more than 3,050,000 litres of safe water had been produced by these kits for the refugees in both areas.

A portion of the clean water that was produced with these kits was transported by truck and stored in different areas within the settlements of the region with the help of UNHCR's vehicles. 22 large capacity tanks were deployed and installed by the Red Cross in various locations, therefore providing easy access to clean water for all refugees in the supported areas. Water trucking was later scaled down and eventually phased out as different agencies LWF, DRC, OXFAM and UNHCR continued to create new boreholes and/or rehabilitate existing ones. URCS contributed to this endeavour by digging and equipping 7 new boreholes as well as rehabilitating 7 boreholes which provided clean water to more than 14,000 people.

According to the UNHCR's data, the refugees in Adjumani had an average availability of water of 19 litres/person/day and the refugees in Arua had an availability of 16 litres/person/day. While these numbers are barely above the SPHERE standards for an emergency situation, the reality is most likely that the availability of water per person is much higher. The figures used by the UNHCR to calculate water availability is based on refugee numbers at the registration centres upon arrival. The fact remains that a significant portion of the male refugee population simply does not permanently reside in the settlements, preferring to return to South Sudan. This is easily observable in the settlements where most refugees are women and children.

URCS has supported the construction of more than 500 latrines in the community. The strategy for all actors in the area was to provide tools and materials to the refugees and support the construction of family latrines. With all partners' efforts in latrines construction, the average number of users per latrines was raised to 1:11 for all refugees according to UNHCR's data. The Red Cross has also proceeded to the construction of 286 simple hand-washing points (tippy-taps) in proximity to these latrines and 368 bathing shelter were also provided in the settlements. Distributions of 7,000 jerry-cans, 4,000 bars of soap and hygiene dignity kits, along with the constant efforts towards hygiene promotion. A total of 7,200 individuals participated in hygiene promotion sessions given by RC volunteers had a significant impact on the dignity, health and general wellbeing of the refugees. Up to 5,782 hygiene dignity kits were distributed in both Arua and Adjumani and up to 368 bathing shelters constructed.

Activities not implemented

- Maintenance of the deployed WatSan Kit-5 has not been mentioned.
- 22 water tanks were procured instead of 10
- Construction of 7 boreholes instead of 10 and rehabilitation of 7 instead of 12
- Continuous assessment and coordination of ops
- Procurement and motorization of 1 borehole
- Replenishment of 4 WatSan 5 units
- Refresher training of for 25 WatSan NDRT members
- Training of water users
- 7 day training of community-based hand pump mechanics
- Procurement and distribution of hand pump mechanics tool kits
- Maintenance of latrines constructed
- Procurement of 50 sanitation tool kits
- 286 tippy taps were constructed instead of 100 hand washing facilities with 1000 low flow dispensers
- 386 bathing shelters constructed instead of 500 communal
- Procurement of 300 timber/pole and 300 rolls of plastic sheeting for latrine and bath shelters
- Procurement of 7,000 jerry cans as opposed to 10,000
- 40 volunteers not trained in hygiene promotion in emergencies
- Training of teachers in improved hygiene and sanitation
- Support to formation and training of school health clubs
- Training of volunteers to conduct hygiene promotion.
- Radio shows conducted on hygiene promotion
- Production and distribution of IEC materials i.e. posters and brochures
- 4000 bars of soap procured instead of 5000
- Hygiene brooms and brushes procured
- Only 5782 dignity kits procured as opposed to 12,000
- Procurement of spraying pumps, vector control chemicals 60 sets of protective gear for volunteers done.
- Carrying out of spraying and vector control activities.

Emergency shelter

Outcome: Improved living situation for 5,000 of the most vulnerable refugee families through provision of emergency shelter, during 6 months.	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> • The immediate shelter needs of the target population are met with agreed standards. 	<ul style="list-style-type: none"> • Identify and register the most vulnerable families who will need emergency shelter assistance. This will be done together with the refugee community and ensure a beneficiary participatory approach. Regular monitoring of shelter needs and potential need for revision of activities. • Procure and distribute 10,000 tarpaulins, construction materials and tools. • Assist and provide technical assistance to households on how to install and use tarpaulins distributed. • Construct household shelter for 5,000 HH (2 tarpaulins for each household). • Carry out routine repairs and maintenance works on the shelters.

Impacts: As part of efforts at contributing to provision of emergency shelter for the new arrivals owing to the fact that most of the settlements were being opened with virtually no infrastructure in place, the Red Cross interventions identified support for shelter as one of the priorities. Although there were efforts to distribute some tarpaulins by UNHCR and other partners so as to enable the refugees set up their own shelters, many organisations had not been able to realize this owing to physical challenges, of accessing materials or lack of skills to set up such shelters. The strategy adopted by most actors in the region was changed towards supporting the construction of more permanent shelters (tukul-type houses).

The efforts notwithstanding, there remained a number of PSN and other vulnerable groups who remained without shelter these included some pregnant mothers, some UAMs, some child headed families and some elderly persons with many of them unable to erect shelters without support from outside the immediate families. Though identified as an area of intervention, URCS shelter activity implementation had been slow to begin, partially due to budgetary constraint. In total 1,479 HH have received shelter materials and 732 shelters were effectively built and 24 volunteers trained in shelter construction. This was mostly done with the support of the GRC's bilateral operation. Up to 137 extremely vulnerable individuals have received assistance to construct their shelter.

Food security, nutrition, and livelihoods

Outcome: Support to Improved Food security, Nutrition and environmental protection.	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> The target population has an improved agricultural productivity and is engaging in income-generating activities 	<ul style="list-style-type: none"> Procure materials for livelihoods training (30 groups in two different livelihood initiatives) Procure and distribute materials for energy-saving stoves Assorted tree seedlings (fruit and woodlot) for refugee and host community Assorted variety of seeds (vegetables and grains) for seed stock multiplication for refugees and host communities- maize, beans, cowpeas and vegetable kit Support to commercial farming groups for host communities through seed fairs (use of seed farmer system) Training in improved agricultural practices, tree-growing and construction of energy saving stoves (livelihood and environment)

Impacts: Activities under this outcome were not implemented.

Capacity building

Outcome: National Society has reinforced capacity	
Outputs (expected results)	Activities planned
Information collected, established and shared for operation and to all the refugees and host communities being assisted.	<ul style="list-style-type: none"> Information collected and established for all the refugees and host communities being assisted Work with all stakeholders to develop messages Develop the most appropriate channel for messages Conduct information dissemination Feedback dialogue with the beneficiaries Production of photographs from the operation Training of selected staff and volunteers in beneficiary communication aspects

Impacts: Activities under this outcome were not implemented.

Challenges and Constraints

Following allegations of corruption and mismanagement in 2013, Uganda Red Cross Society experienced increasing set of institutional challenges, and continuing concerns regarding the integrity and effectiveness of

URCS programme, finance and logistics management. As a result the Uganda Population Movement Operation faced challenges for which solutions were not visibly forthcoming.

On 26 September, 2014 the IFRC, the ICRC and a group of Red Cross Societies operating in Uganda (Movement partners) decided to cease funding and stop their support to the Uganda Red Cross (URCS) activities with immediate effect, and until the National Society met the conditions for delivering humanitarian assistance in a sustainable, transparent and accountable way.

As a consequence, the delivery of humanitarian assistance to beneficiaries became near impossible, and with no feasible options for continuation, the decision was made to close the emergency response operation and all related activities and offices.

As a result of the above considerations the decision was made to close operational activities with effect from 15 December 2014 and subsequently close and report on the operation by 31 March 2015.

Finance Summary

The total amount received for the appeal was CHF 798,750, of which CHF 559,120 was spent. The balance of funds at the close of the operation amounting to CHF 239,630 will be reallocated to the East Africa regional development operational plan for 2015.

A number of budget lines have variances at the close of the operation and this is attributed to the fact that this operation was halted in December 2014 following allegations of integrity issues and mismanagement in 2013 which made the Uganda Red Cross Society experience an increasing set of institutional challenges including inadequate budget versus expenditure reconciliations of the operations expenditures thus creating budget overruns in a number of budget lines such as the clothing and textiles, utensils and tools, computer and telecoms, travel, consultants as well as general expenditures.

Contact information

For further information specifically related to this operation please contact:

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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 (NGOs) 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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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

MDRUG037 - Uganda - Population Movement S.Sudan

Timeframe: 10 Feb 14 to 31 Mar 15

Appeal Launch Date: 13 Feb 14

Final Report

Selected Parameters

Reporting Timeframe	2014/2-2015/5	Programme	MDRUG037
Budget Timeframe	2014/2-2015/3	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		2,364,705				2,364,705	
B. Opening Balance							
Income							
Cash contributions							
<i>American Red Cross</i>		110,278				110,278	
<i>British Red Cross</i>		55,605				55,605	
<i>Canadian Red Cross (from Canadian Government*)</i>		85,319				85,319	
<i>Finnish Red Cross</i>		6,678				6,678	
<i>Finnish Red Cross (from Finnish Government*)</i>		26,186				26,186	
<i>Japanese Red Cross Society</i>		78,000				78,000	
<i>Japanese Red Cross Society (from Panasonic Corporation*)</i>		2,701				2,701	
<i>Red Cross of Monaco</i>		12,203				12,203	
<i>Swedish Red Cross</i>		134,981				134,981	
C1. Cash contributions		511,951				511,951	
Inkind Personnel							
<i>Austrian Red Cross</i>		26,729				26,729	
<i>British Red Cross</i>		45,320				45,320	
<i>Norwegian Red Cross</i>		6,996				6,996	
<i>Other</i>		37,755				37,755	
C3. Inkind Personnel		116,799				116,799	
Other Income							
<i>DREF Allocations</i>		170,000				170,000	
C4. Other Income		170,000				170,000	
C. Total Income = SUM(C1..C4)		798,750				798,750	
D. Total Funding = B +C		798,750				798,750	

* 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		798,750				798,750	
E. Expenditure		-559,120				-559,120	
F. Closing Balance = (B + C + E)		239,630				239,630	

Disaster Response Financial Report

MDRUG037 - Uganda - Population Movement S.Sudan

Timeframe: 10 Feb 14 to 31 Mar 15

Appeal Launch Date: 13 Feb 14

Final Report

Selected Parameters

Reporting Timeframe	2014/2-2015/5	Programme	MDRUG037
Budget Timeframe	2014/2-2015/3	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)			2,364,705			2,364,705		
Relief items, Construction, Supplies								
Shelter - Relief	152,486		499			499	151,988	
Construction Materials	20,400						20,400	
Clothing & Textiles	1,250		25,918			25,918	-24,668	
Seeds & Plants	33,857						33,857	
Water, Sanitation & Hygiene	729,972		62,928			62,928	667,045	
Medical & First Aid	107,143						107,143	
Teaching Materials	5,714						5,714	
Utensils & Tools	7,964		18,131			18,131	-10,167	
Total Relief items, Construction, Sup	1,058,787		107,476			107,476	951,312	
Land, vehicles & equipment								
Vehicles	10,714		4,010			4,010	6,704	
Computers & Telecom	6,071		9,128			9,128	-3,057	
Office & Household Equipment	1,286						1,286	
Total Land, vehicles & equipment	18,071		13,138			13,138	4,933	
Logistics, Transport & Storage								
Storage	7,500		756			756	6,744	
Distribution & Monitoring	15,214		2,047			2,047	13,167	
Transport & Vehicles Costs	183,872		79,662			79,662	104,209	
Total Logistics, Transport & Storage	206,586		82,466			82,466	124,120	
Personnel								
International Staff	363,750		177,769			177,769	185,981	
National Staff	34,920						34,920	
National Society Staff	113,027		38,569			38,569	74,458	
Volunteers	172,822		46,164			46,164	126,657	
Total Personnel	684,518		262,502			262,502	422,015	
Consultants & Professional Fees								
Consultants			2,962			2,962	-2,962	
Professional Fees	35,805						35,805	
Total Consultants & Professional Fees	35,805		2,962			2,962	32,843	
Workshops & Training								
Workshops & Training	87,977		3,134			3,134	84,843	
Total Workshops & Training	87,977		3,134			3,134	84,843	
General Expenditure								
Travel	19,880		30,606			30,606	-10,725	
Information & Public Relations	78,750		73			73	78,677	
Office Costs	10,000		7,732			7,732	2,268	
Communications	13,062		5,891			5,891	7,172	
Financial Charges	6,943		1,023			1,023	5,920	
Other General Expenses			2,980			2,980	-2,980	
Shared Office and Services Costs			8,214			8,214	-8,214	
Total General Expenditure	128,636		56,520			56,520	72,116	
Indirect Costs								
Programme & Services Support Recover	144,325		26,741			26,741	117,584	
Total Indirect Costs	144,325		26,741			26,741	117,584	
Pledge Specific Costs								
Pledge Earmarking Fee			3,282			3,282	-3,282	

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Budget Timeframe	2014/2-2015/3	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)			2,364,705			2,364,705		
Pledge Reporting Fees			900			900	-900	
Total Pledge Specific Costs			4,182			4,182	-4,182	
TOTAL EXPENDITURE (D)	2,364,705		559,120			559,120	1,805,584	
VARIANCE (C - D)			1,805,584			1,805,584		

Disaster Response Financial Report

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Selected Parameters

Reporting Timeframe	2014/2-2015/5	Programme	MDRUG037
Budget Timeframe	2014/2-2015/3	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	2,364,705		798,750	798,750	559,120	239,630	
Subtotal BL2	2,364,705		798,750	798,750	559,120	239,630	
GRAND TOTAL	2,364,705		798,750	798,750	559,120	239,630	