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QUARTERLY PROGRAM PERFORMANCE REPORT  
 HUMANITARIAN RESPONSE FOR CONFLICT AFFECTED POPULATIONS IN EAST DARFUR  
 GRANT: AID-OFDA-G-14-00106  
 1<sup>ST</sup> JANUARY -31<sup>ST</sup> MARCH 2015

<b>Organization Name: TEARFUND</b>	
<b>Headquarters Contact Information</b> <b>Contact:</b> Carole Murphy-Woolford <b>Mailing Address:</b> Tearfund, 100 Church Road, Teddington, Middlesex, TW11 8QE, UK <b>Telephone:</b> +44 (0)20 8943 7902 <b>E-mail:</b> <a href="mailto:cmw@tearfund.org">cmw@tearfund.org</a>	<b>Field Contact Information</b> <b>Contact:</b> Douwe Dijkstra <b>Mailing Address:</b> St 5, Amarat, Khartoum, Sudan <b>Telephone:</b> +249 (0) 912 161 946 <b>E-mail:</b> <a href="mailto:sudan-cd@tearfund.org">sudan-cd@tearfund.org</a>
<b>Programme Title:</b>	Humanitarian Response for Conflict-Affected Populations in Central Darfur and East Darfur
<b>OFDA Grant Number:</b>	AID-OFDA-G-14-00106
<b>Country/Region:</b>	Sudan, East Darfur and Central Darfur
<b>Type of Disaster/Hazard:</b>	Civil Strife
<b>Time Period Covered by the Report:</b>	1 <sup>ST</sup> JANUARY-31 <sup>ST</sup> MARCH 2015

**Executive Summary**

*Please give an overview of the time period and points covered in this report*

In Central Darfur, there was good progress in both the WASH and nutrition sectors in spite of an increase in flow of IDPs to Nertiti town due to conflict in Jebel Mara. Access to project sites was good. A SMART survey was conducted in January 2014 (results below) showing a GAM rate of 14.7% and a SAM rate of 3.2%. However this does not reflect subsequent IPD movement because of the continuing conflict in Jebel Mara. It has not been possible to authorise assessments in this regard, however UNOCHA data indicated 4,200 new arrivals in January 2015 for example. The usual monthly ration of general food aid was distributed to IDP beneficiaries in this project site.

Elections passed without violence in the project areas. The State Governor visited Nertiti Town in this period while the President made a state visit to Zalingei, the provincial headquarter. The main commercial highway, Nertiti/Nyala/Zalingei, remained open during the period.

Construction was completed of all scheduled WASH infrastructure including 2 VIP latrine blocks for one school and for the Town market; and the installation of 2 elevated tanks with a capacity of 90M3 of water for residents in North Camp. Borehole No. 3, which provides water to one of the elevated tanks, was damaged by seismic movements and a consortium of 4 stakeholders namely Tearfund, Danish Refugee Council (DRC), Islamic Relief Worldwide (IRW) and GoS department of Water & Environmental Sanitation (WES) is currently mobilising resources to drill a replacement borehole. IRW provided solar panels to generate electrical power to drive pumping machines.

The situation in East Darfur remained largely stable providing an enabling environment for the timely implementation and monitoring of WASH activities throughout Yassin locality. Tearfund received full access through clearances given by the Humanitarian Aid Commission (HAC). Following recommendations of the geophysical survey carried out at the end of the 3<sup>rd</sup> quarter and subsequent approval to move the borehole drilling point from Abuadeed to South Se Leah, Tearfund scaled up its implementation of the borehole drilling, household water testing, community health and hygiene education, health promotion and solid waste management. During the reporting period, Tearfund completed 50% of the borehole drilling activity, water was struck at 480ft, pump test was done and water tested for fitness of human and animal consumption. Mobilisation of equipment to carry out casing works, construction of elevated water tank, generator installation water source protection, water points and water trough construction is currently underway.

**SECTOR 1: NUTRITION**

**Objective 1: Nutrition – Improved nutritional status of malnourished children and pregnant and lactating women in target areas**

There was an increase in OTP and SFP admissions and OTP defaulters, and decline in the OTP cured rate in Nertiti which reflects the influx of new IDPs into Nertiti town. This is attributed to outbreak of conflict in upper Jabel Mara and subsequent displacement of population to West Jabel Mara Locality two principal towns of Guildo and Nertiti.

Nertiti Town Nutrition Assessment Dec 2014/January 2015:

Global Acute malnutrition (<-2 W/H z-scores/Oedema)	14.7% (12.4 – 17.5 95% C.I)
Severe Acute Malnutrition (<-3W/H z-score/Oedema)	3.2% (2.3 – 4.5 95% C.I)
CMR deaths/10,000/day	0.59 (0.29-1.22) (95% C.I)
0-5MR deaths/10,000/day	1.71 (0.61-4.68) (95% C.I)*

In the MAM sub-sector, the cured rate sustained 94% in the reporting period. Although this rate is fractionally lower than in the preceding quarter; it is much better than the minimum SPHERE standard of >75%.

WFP support during the period was generally stable and all feeding centres were adequately supplied. Project implementation of nutrition activities was therefore not interrupted whatsoever.

UNICEF supplies of plumpy nuts were irregular during this period however project management negotiated with the SMOH/Zalingei for support from its buffer stocks (emergency stocks) in order to maintain the project afloat during the period of UNICEF pipeline break

**Table 1: Summary of project activities planned and executed during the quarter**

Activity	Completion
<b>Sub-sector 1: Management of moderate acute malnutrition (MAM)</b>	
Supporting of 2 SFP Centres	<p>A total of 372 U5 children (175 boys &amp; 197 girls) and 85 Pregnant and Lactating Women (PLW) were admitted into the program during the 4<sup>th</sup> quarter. The number of admissions increased by 68% compared with 3<sup>rd</sup> quarter performance. Tearfund has continued pre-positioning additional food supplies, active case finding, community education sessions, household visits, etc in order to improve the general community nutritional status.</p> <p>Admissions in Central Darfur increased by 68% on the last quarter because of continuing displacement from Jabel Mara, a decrease in availability of household food during the transition from harvest to dry spell; and increased sharing of food between the host population and new arrivals as there was no humanitarian assistance provided to the new IDP's.</p>
<b>Sub sector 2. Management of severe acute malnutrition (SAM)</b>	
Supporting 2 OTP centres	<p>In Nertiti, 63 new cases were admitted to OTP centres in both North and South camp (40 girls &amp; 23 boys). The cure rate declined from 94%, to 80%, the defaulter rate increased from 0% to 4%, and the death rate increased from 6% to 16%, while cases of non-respondent remained at 0%. The decline in performance indicators partly attributed to the following reasons;</p> <ul style="list-style-type: none"> <li>• Delays in seeking early treatment due to competing farming activities</li> <li>• High number of defaulter rates as families concentrated on farming activities</li> <li>• Peak hunger period: high levels of food insecurity during this period resulting in increased malnutrition rates in the operational areas</li> <li>• Staff changes: Ministry of Health brought in new stabilisation centre staff (with low experience and little training on management of severe acute malnutrition cases with complications. The experienced and trained staff were transferred to another hospital outside the Nertiti Locality.</li> </ul> <p>In response to this, Tearfund trained new staff on prevention &amp; management of severe acute malnutrition cases. Furthermore, nutrition education sessions and household follow up visits were strengthened during the review period.</p>
Support of 1 SC centre (MoH facility)	<p>In Nertiti, there were 52 new SC cases (20 boys and 32 girls). Continuing care for 26 patients (12 boys and 14 girls) is allocated to this OFDA grant. The remained are funded in cooperation with ECHO. Performance in the SC continued to be high; A total of 37 cases (16 boys &amp; 21 girls) supported by this OFDA grant were discharged by the end of the reporting period. The 'cured' rate increased from 93% to 96% in this quarter, and the</p>

Activity	Completion
	defaulter rate 0% as in previous quarter, the death rate declined from 7% to 4% while cases of non-respondent remained at 0% as in previous quarter. The reduction in numbers in the SC centre could be partially attributed to the rapid nutrition assessment and distribution of emergency food preventing cases of malnutrition from getting worse, or from the limited access for those in Guildo and Golo accessing Nertiti.
Training of Health Care Workers on CMAM & IYCF	8 SMOH care staff ( 4 male and 4 female) and 10 community volunteers (5 male and 5 female) such as school teachers were trained on community management of acute malnutrition, Infant Young Children Feeding (IYCF) practices, management of moderate and severe cases of malnutrition with complications.
<b>Sub sector 3. Infant and Young Child Feeding and Behaviour Change</b>	
Health education activities	330 household visits were conducted during this quarter and a total of 599 children (288 boys and 311 girls) and 413 Pregnant and Lactating women PLW were screened. In addition a total of 649 community members (405 females & 244 males) benefitted from health and nutrition education sessions. Health and Nutrition Education sessions covered the following topics: Infant and Young Child Feeding Practice, Health and Hygiene Promotion; respiratory tract infections, Corn Soya Blend (CSB) preparation; How to use RUTF, prevention of diarrheal diseases, causes and treatment of malnutrition, complementary feeding for lactating mothers and food demonstrations.

**Table 2: Sector 1 Impact indicator progress**

	Baseline	OFDA target	Progress this quarter	Cumulative progress to date
<b>Sub-sector 1: Management of moderate acute malnutrition (MAM)</b>				
Number of sites managing moderate acute malnutrition	2	2 sites in Nertiti	2 sites in North and South camps continue providing therapeutic care to children <5 years of age and pregnant and lactating mothers.	Two sites managing moderate acute malnutrition, one in North Camp and other in South Camp
Number of people admitted to Moderate Acute Malnutrition (MAM) services by beneficiary type (< 5s and adults)	PLW: 440; Children 2,659 ( 1,288 boys & 1,341 girls)	PLW:529, Children Under 5: 2,950 (1,400 boys & 1,550 girls)	- 372 children under 5's ; (175 boys & 197 girls) - 85 PLW	Cumulative total: 1,464 U5's (558 boys & 634 girls) and 272 PLW)
Number of health care providers and volunteers trained in the prevention and management of Moderate Acute Malnutrition (MAM)	Total: 153 Community Volunteers: 57 (47 women and 10 men) Health Care providers:96 (49 women and 47 men)	- Men 27, - Women 13	N/a	Cumulative total: 4 - 23 Health Care providers (10 male/13 female); - 24 Community Volunteers (9 male/14 female)

<b>Sub-Sector 2: Management of severe acute malnutrition (SAM)</b>				
Number of beneficiaries treated for Severe Acute Malnutrition (SAM) by type (< 5s; adults; inpatient care with complications; outpatient care without complications)	Total: 1,943 (952 boys and 991 girls) (1,811 OTP and 132 SC)	Total:1400 (650 boys & 750 girls) (1000 OTP and 400 SC	63 (beneficiaries (40 girls & 23 boys) admitted to OTP.	OTP: Cumulative total: 626 beneficiaries (333 girls & 293 boys) Beneficiaries
			52 beneficiaries admitted to SC (20 boys and 32 girls)	SC: Cumulative total: 120 beneficiaries (55 boys and 65 girls). Beneficiaries
Number of sites established / rehabilitated for inpatient and	2 OTP	2 OTP	N/a	2 OTP centres are functional

outpatient care	1 SC (Managed by MoH)	1 SC (Managed by MoH)	N/a	1 SC is functional (Managed by MoH)
Central: Rates of admission, default, death, cure, relapse, non-response-transfer, and length of stay	Death : 0.6%, Cured : 83%, Defaulter : 10%, Non response rate: 4%, average length of stay: 4 weeks	MAM ; <3% death, >75% Recovered, <15% defaulted	OTP Performance Indicators Cured rate: 94% Defaulter rate: 4% Death rate: 0% Non-respondent rate: 2%	OTP Performance Indicators Cured rate: 93.5% Death rate: 0% Defaulter rate: 4.5% Non-respondent: 2%
		SAM;- <10% death, >75% recovered and <15% defaulter	Cured rate: 81% Death rate: 1% Defaulter rate:14% Non-respondent: 4%	
Number of health care providers and volunteers trained in the prevention and management of Severe Acute Malnutrition (SAM)	Total:96 Health Care providers:96 (49 women and 47 men)	Total: 40; Men 27, Women 13	N/a	Cumulative total: 47 Health Care Providers:23 (10 males & 13 females): Community volunteers:24 (9 males and 15 females) Beneficiaries
<b>Sub sector 3. Infant and Young Child Feeding and Behaviour Change behavioural change</b>				
Number of people receiving behaviour change interventions by sex and age	11,227 (10,105 females and 1,122 males)	Total: 5000 (4500 Females & 500 Males)	649 people (15-49 years) community members (405 females & 244 males) benefitted from health and nutrition education sessions	Cumulative total: 5192 (4077 female/1115 male)
Number and percentage of infants 0-<6 mo. who are exclusively breastfed	850 or 17% of mothers practiced exclusive breastfeeding between 0 to 6 months	2,500 or 50% of mothers practiced exclusive breastfeeding between 0 to 6 months	N/A	The KAP Survey conducted in December 2014 revealed that 1,600 (32%) mothers practiced exclusive breastfeeding between 0 to 6 months.
Number and percentage of children 6-<24 mo. receiving foods daily in 4 food groups	2,400 or 48% of children 6-<24 mo. receiving foods daily in 4 food groups	3,500 or 70% of children 6-<24 mo. receiving foods daily in 4 food groups	N/A	The KAP Survey conducted in December 2014 showed that 1,950 (39%) of children 6 -24 months were receiving food daily in 4 groups. Beneficiaries

**SECTOR 2: Water, Sanitation and Hygiene (WASH)**

**Objective 2: Water, Sanitation and Hygiene** – Improved sustainable access to safe drinkable water supply, safe sanitation facilities and improve hygiene awareness for target conflict-affected households

**Table 3: Summary of project activities planned and executed during the quarter**

Activity	Completion
<b>Sub-sector 1: Water Supply Infrastructure</b>	
<b>Rehabilitation of water yard:</b>	In central Darfur, two elevated metallic tanks in North Camp were constructed and installed and connected to feed 6 water points connected to the pump station No. 4. Borehole No3 where Tearfund installed the second elevated tanks that equipped with solar system by IRW collapsed last month. Discussion have took place between WES central Darfur, DRC, TF and IRW to find a solution to this problem and WES committed to drill other borehole to replace the collapse one and fix with IRW solar system and

Activity	Completion
	connect to the elevated tank equipped by TF.
<b>Borehole Drilling and Water Yard Construction</b>	<p>Following approval by OFDA to move site from Abuadeed to Abudahab (South Seleah) in East Darfur, the borehole was drilled to a depth of 480ft and a pump test were successfully completed. The results indicated:</p> <ul style="list-style-type: none"> <li>• Pump setting depth of 96M,</li> <li>• Static Water Level (SWL) of 82.26M,</li> <li>• Dynamic Water Level (DWL) of 83.65M,</li> <li>• Draw Down (DD) of 1.39M</li> <li>• Water yield of 14M<sup>3</sup> /h.</li> </ul> <p>Water sample tests carried out at a government laboratory in Nyala showed that the water was fit both for human consumption. Tearfund is currently mobilising the necessary equipment for casing works, construction elevated water tank, water points, animal water troughs and protection of the water source through fencing. This water borehole is set to benefit 4,000 beneficiaries. All stakeholders have continued to be involved in this activity; Tearfund recently received a community leader's delegation to its project site office hub in Eddaain with an appreciation message and further commitment to support the project.</p>
<b>Rehabilitation of hand pumps</b>	<p>In Central Darfur, hand pump mechanic training and tariff collection was conducted for 24 water users' committee members from Garsella camp. The tariff collected was started and 800 SDG were collected through household user's contributions and 1000 SDG were collected through volunteer contribution of Garsilla water user committee to installed new hand pump drilled by Islamic Relief Worldwide in the area outside the Garsella area in Nertiti Town and Alsalam camp. Rehabilitation of hand pumps was completed in previous quarters.</p>
<b>Water quality monitoring and treatment:</b>	<p>In East Darfur, 374 samples of water were collected for quality bacteriological tests using H2S/ Delagua kits. 156 samples were found to be positive of Ecoli bacteria. Action in both areas included as renewed focus promoting safe HH water use and storage, cleanliness and covering of water containers, storage of containers raised above ground level and household water treatment. In Central Darfur, 3mg chlorine tablets were distributed to the contaminated sample HH for disinfection of household water storage</p>
<b>Sub sector 2. Sanitation Infrastructure</b>	
<b>Solid waste management campaign:</b>	<p>In Central Darfur, Tearfund conducted 4 cleaning campaigns covering Yassin, Selea and Abuhadeed. Waste was collected in sacks and transported via MoH truck to the final disposal area where it was being burnt as combustible materials into ash.</p> <p>In East Darfur, Tearfund procured and distributed 85 shovels for hygiene committee and school health club aimed at promoting and facilitating clean up campaigns and solid waste management. During the quarter, 2 clean-ups campaigns covering South camp, Garssilla camp and Al Salaam camp were conducted. 950 HHs participated and benefitted during the clean-up and solid waste management.</p>
<b>Construction of VIP Latrines (Institutions)</b>	<p>10 drop holes latrines were constructed in Nertiti market completed with hand washing facilities. The latrines are divided into separate sections for men and women. Hygiene promotion committee of 6 members were inducted on the proper management of the latrine and MoU with them was signed on the proper management of the facility. Additionally, 5 drop holes latrine construction were completed with hand washing facilities in Umalgura School and a further 5 in Al Gharbia school; each divided in male and female sections.</p>
<b>Sub sector 3. Hygiene Promotion</b>	
<b>Hygiene promotion</b>	<p>Hygiene promotion activities continued in both areas. In East Darfur, there were 9 focus group discussions (on general hygiene practices, food handling and preparation, personal hygiene, malaria prevention, diarrheal and other public health risk behaviors, household water treatment and safe excreta disposal practices. Community health volunteers reached 315+882 beneficiaries (141 male &amp; 174 by conducting household visits in the operational areas during the reporting period. Key topics discussed included personal hygiene, water collection, transportation and storage,</p> <p>In Central Darfur, 700 HH visits were conducted in all IDP camps reaching out to HHs</p>

Activity	Completion
	<p>with lifesaving health and hygiene information (i.e. cleanliness of water containers, water chlorination and personal hygiene.</p> <ul style="list-style-type: none"> <li>▪ 36 FGDs and hygiene sessions were conducted in the camps. A total of 882 community beneficiaries (772 females and 30 community leaders (males)) and 80 school children (30 boys and 50 girls) were reached with health and hygiene education</li> <li>▪ 3396 blocks of bar soap (200g per block) were distributed through various hygiene activities (e.g. school health clubs, FGDs, hygiene session and clean up campaigns), and 2,118 individuals were reached with soap distribution</li> <li>▪ 3 Jerry cans cleaning campaigns were conducted in 6 IDPs camps in Nertiti. A total of 21162 jerry cans were cleaned during these 3 campaigns</li> <li>▪ One general clean-up campaign was conducted in the 6 IDPs camp and 680 beneficiary were benefit from the campaign.</li> </ul>
<b>Training of community health and hygiene promoters</b>	<p><b>In East Darfur</b>, 20 community health promotion volunteers (10 males and 10 females) were trained on hygiene promotion techniques in Abuhadeed. The aim was empower them to take responsibility of disseminating key hygiene messages to community members through HH visits. The trained CHVs will continue to coordinate with the WASH community mobilizers. Topics covered include; water related diseases, personal hygiene, safe handling of drinking water, safe excreta disposal, proper latrine use and sanitation management. In central Darfur, 26 health promotion committee were train on TOT training routine hygiene activities monitoring and solid waste management .from Alsalam, South and Sector8 camps.</p>

**Table 4: Sector 2 Impact indicator progress**

Indicators	Baseline	OFDA target	Progress this quarter	Cumulative progress to date				
<b>Sub Sector 1: Hygiene Promotion / Behaviours</b>								
Number of people receiving direct hygiene promotion (excluding mass media campaigns and without double counting).	<p><b>East Darfur:</b> 478 people (3%)</p> <p><b>Central Darfur:</b> 2,037 people (41%)</p>	7,116 beneficiaries	8,376 beneficiaries	19,886 people				
Number of respondents who know 3 out of 5 critical times to wash hands (HP1 Hand Washing Knowledge)	<p><b>East Darfur:</b> 7,806 respondents (49%)</p> <p><b>Central Darfur:</b> 2,000 respondents (40%)</p>	9,000 beneficiaries	N/a	35% or 140 HHs surveyed in November 2014 KAP survey recalled 3/5 critical times correctly. On a beneficiary population of 30,909 people this corresponds to around 10,600 beneficiaries.				
Number of households with soap and water at a hand washing location (HP2)	<p><b>East Darfur</b> 903 Households (34%)</p> <p><b>Central Darfur:</b> 175 households (21%)</p>	1,400HHs	250 out of 680HHs in Central Darfur (36,7%) visited during this quarter were observed to have soap at hand washing locations. With a beneficiary population of 13,179 people this corresponds to around 4836 beneficiaries or 806HHs.	<b>Central Darfur:</b> 763 out of 1535 HHs (49.7%) were observed to have soap near hand wash locations. With a beneficiary population of 13,179 people this corresponds to around 6549 beneficiaries or 1,100HHs.				
Number of households who store their drinking water safely in clean containers (HP3 Safe Water Handling)	<b>1,433 HHs, 850 in East Darfur and 583 in Central Darfur.</b>	9,000 beneficiaries	<b>Central Darfur:</b> 514 out of 680 HHs visited had clean water containers, covered and raised from the ground. This is 75.6% and corresponds to 9,963 beneficiaries or 1660HHs.	<p><b>Central Darfur:</b> 1300/2215hh's or 59% practised safe water keeping since start of project cycle</p> <p>Beneficiaries:</p> <table border="1"> <tr> <td>Male</td> <td>3,822</td> </tr> <tr> <td>Female</td> <td>3,978</td> </tr> </table>	Male	3,822	Female	3,978
Male	3,822							
Female	3,978							

				Total	7,800										
<b>Sub Sector 2: Sanitation</b>															
Number of people directly benefiting from the institutional sanitation infrastructure program.	<b>East Darfur: 0</b> <b>Central Darfur: 0</b>	<b>East Darfur: 916</b> <b>Central Darfur: 1200</b>	2 blocks of VIP latrines constructed with 20 drop holes in Central Darfur: - Al Garabia School 2410 Boys, 260 Girls. - Nertiti market serving 300 men and 300 women.	<table border="1"> <tr> <td>Male</td> <td>294</td> </tr> <tr> <td>Female</td> <td>306</td> </tr> <tr> <td>Boys</td> <td>240</td> </tr> <tr> <td>Girls</td> <td>360</td> </tr> <tr> <td>Total</td> <td>1200</td> </tr> </table>	Male	294	Female	306	Boys	240	Girls	360	Total	1200	
Male	294														
Female	306														
Boys	240														
Girls	360														
Total	1200														
Number schools with no evidence of faeces in the living area (S1 Excreta Disposal (Open Defecation))	<b>East Darfur: 0</b> <b>Central Darfur: 0</b>	<b>East Darfur: 2</b> <b>Central Darfur: 3</b>	<b>East Darfur: 2 schools</b> <b>Central Darfur: 3 schools</b>	<b>East Darfur: 2 schools</b> with no evidence of faeces in open areas. <b>Central Darfur:</b> 46 school monitoring visits were conducted to all schools in Nertiti. 6/8 schools were found to be free of open defecation.  <b>Total: 8 schools/grounds</b> free of signs of Open defecation.											
Number of institutional latrines completed and clean (S4 Excreta disposal (Household latrine infrastructure))	East Darfur: 0 Central Darfur: 0	East Darfur: 2 Central Darfur: 5	<b>Central Darfur:</b> Construction of latrines is still in progress in 2 schools 15 drop hole of institutional latrines were constructed and fitted with hand washing facilities in the Market (10), and Algarbia School (5).	<b>East Darfur: 2 VIP school</b> latrines completed benefitting 1,085 children (751 boys & 334 girls)  <b>Central Darfur:</b> - 20 drop holes in 3 latrine blocks were constructed at the market and in 2 schools benefitting altogether 1200 beneficiaries.											
Number of households properly disposing of solid waste (S7 Solid Waste Management (Household))	East Darfur: 637H/Hs Central Darfur: 692 H/Hs Total: 1,329HHs	East Darfur: 600: Central Darfur: 141	This indicator will be measured for both areas in final KAP Survey.  <b>Central Darfur:</b> 644/680 households visited during the period were observed to be disposing of their solid waste properly.	<b>Total: 1930HHs</b>  <b>East Darfur:</b> 690 H/Hs have benefitted from the solid waste management campaigns conducted during the first 12 months of the project.  <b>Central Darfur:</b> 1240/1324 households were observed to be disposing of their solid waste properly (93.6%)											
<b>Sub Sector 3: Water Supply Infrastructure</b>															
Number of people directly benefiting from the water supply infrastructure program	<b>East Darfur: 0</b> <b>Central Darfur: 0</b>	<b>East Darfur: 15930</b> <b>Central Darfur: 8500</b>	<b>East Darfur: 3,500</b> benefiting from one new water yard.  <b>Central Darfur:</b> - 2 elevated tanks were installed to replace old meshed tanks in North Camp benefitting 6,000 people.	<b>East Darfur: 11,900</b> (8,075 female & 6,825 male)  <b>Central Darfur:</b> HP benef: 5000 E/tanks benef: 6000 Beneficiaries: 11,000  Total 22,000 people.											
Estimated water supplied per beneficiary in litres per person per day (WS2 Water)	<b>East Darfur: 5 litres/p/d</b> <b>Central Darfur: 11 litres per /p/d</b>	<b>East Darfur: 15 litres per person per day</b> <b>Central</b>	In Central Darfur, two elevated tanks with a combined capacity of 90M3 of water were installed in North Camp this quarter	<b>East Darfur:</b> In Central Darfur, water per capita improved during the reporting period 12.5 litres/p/p/d. However, water is											

Production)		<b>Darfur:</b> 15 litres per person per day	improving per capita by 1.5 litres/p/p/d	not evenly distributed in the camps. Area such as Sector 7 & 8 have access to 6 litres p/p/d (est) Water supply in both areas will be measured in the final KAP survey
Number of test results with 0 faecal coliforms per 100ml sample (WS3 Source Water Quality Bacteriological)	<b>East Darfur</b> 90 (85%) of household water samples free of e-coli <b>Central Darfur</b> 245 (62%) of household water samples free of e-coli	<b>1,350 HHs</b>	218 out of 374 or 58.2% of samples tested in Central and East Darfur were free from faecal coliform contamination.	In Central Darfur, 393 out of 584 samples (67.3%) were free from faecal coliform contamination.  The overall rate of testing across both areas in 58.2% free from faecal coliform contamination.

**SECTOR 3: Logistics Support and Relief Commodities**

**Objective 3: Logistics Support and Relief Commodities:** Effective and timely response to emergency needs as they arise in target areas

*Please provide an executive summary of this the reporting period for this objective*

**Table 5: Summary of project activities planned and executed during this quarter**

Activity	Completion
<b>Sub sector 1: Non-food items (NFIs)</b>	
Inter- Agency Assessment Mission	In spite of reports about new IDP arrivals from the Upper Jebel Mara localities, no permit was granted for an inter-agency assessment to Nertiti. In March 2015, a communiqué was issued preventing any such activity during the election period.

**Table 6: Sector 3 Impact indicator progress**

Indicators	Baseline	OFDA target	Progress this quarter	Cumulative progress to date						
<b>Sub Sector 1: Non-food items (NFIs)</b>										
Total number and per item USD cost of NFIs distributed, by type (e.g., plastic sheeting, flash tarpaulin, blankets, hygiene kits, kitchen sets, water containers, other)	0	Total: 600 kits procured and distributed. (300 in Central Darfur & 300 in East Darfur) (Jerry can (\$3); lbrick (\$1); Plastic sheet 4x6m -Nerwigian (\$25); Plastic mats 2.8x3m -Addeb (\$15); Blanket (\$8); Soap (10 pcs soap, 2.5gms per pack) (\$0.4); kitchen utensil sets (\$22.4).	N/a	TF distributed 300 h NFI kits in November 2014 Beneficiaries: <table border="1"> <tr> <td>Male</td> <td>882</td> </tr> <tr> <td>Female</td> <td>918</td> </tr> <tr> <td>Total</td> <td>1,800</td> </tr> </table>	Male	882	Female	918	Total	1,800
Male	882									
Female	918									
Total	1,800									
Total number of people receiving NFIs, by sex and type (e.g., plastic sheeting, flash tarpaulin, blankets, hygiene kits, kitchen sets, water containers, other)	0	Total: 3,600 (1,800 in Central Darfur & 1,800 in East Darfur) -deemed if appropriate	N/a.	TF distributed 300 h NFI kits in November 2014 Beneficiaries: <table border="1"> <tr> <td>Male</td> <td>882</td> </tr> <tr> <td>Female</td> <td>918</td> </tr> <tr> <td>Total</td> <td>1,800</td> </tr> </table>	Male	882	Female	918	Total	1,800
Male	882									
Female	918									
Total	1,800									

**2. Budgetary progress – Please outline any budgetary issues, and what progress has been made during this quarter.**

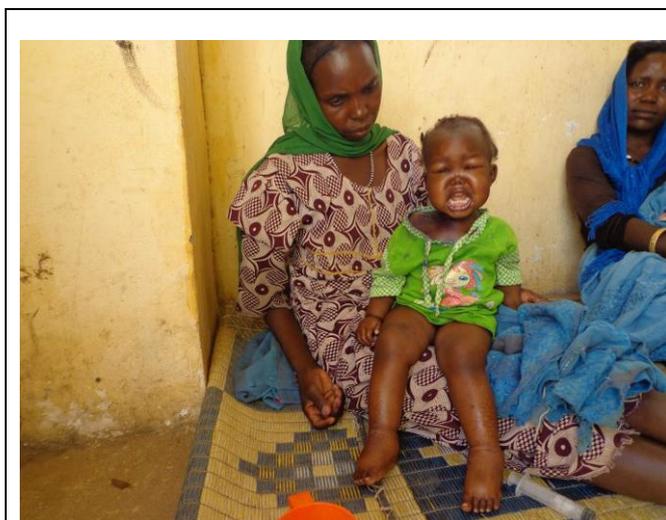
**Budget Progress:**

In East Darfur, the project expenditure is approximately at 69% indicating significant progress in project implementation during the reporting period. The project expenditure is expected to peak during the last quarter as 70% of the borehole drilling costs, which includes elevated water tank, generator installation, water source protection, water troughs and water points will be paid. Budget expenditure for West Jabel Mara Locality stands at 78% (February Budget Status Report) and is on course. Most of the capital expenditure has been accomplished. Overall budget expenditure is at 77%.

**3. Constraints faced during this period – Please outline constraints faced during this period and how these constraints were overcome. Please indicate if this required any changes to the planned activities and justify why if needed.**

- Tension in Upper Jabel Mara Localities had the effect of increasing admission numbers of malnourished children and pregnant & lactating women (PLW) coming from the conflict zone to SMOH Nertiti Hospital stabilisation centre (SC) supported under this grant;
- There were logistical challenges in delivery of plumpy nuts (from UNICEF) in the month of February & March 2015. However, Tearfund Project borrowed emergency stocks from the SMOH in order to keep feeding centres running during the period but the situation has since regularised.
- Further delay in the borehole drilling activity was averted following approval of site shift by OFDA, as such; machinery necessary for this activity was fast mobilised leading to successful drilling at the new site.
- The improved security situation provided continued access to the project sites throughout Yasin locality, timely clearances were issued by HAC at the state level.

**Beneficiary Story of Ikhlas Idris Arbab**



Ikhlas upon admission to Nertiti SC in February 2015



Ikhlas just before discharge from Nertiti SC in February 2015

Ikhlas Idris Arbab, pictured above, is 23 months old and was admitted at Nertiti SC in the locality's SMOH Hospital from Guildo.

She was born in Yare, Golo in Central Jabel Mara Locality. Her condition deteriorated in January 2015 at the peak of conflict in the area when her mother Asha Abaker Nor decided to flee to Guildo for safety of her family of 6. The child refused to eat food and sustained severe coughing and swelling all over her body. Upon admission at Guildo Nutrition Centre, Tearfund staff team referred the malnourished patient to Stabilization Centre (SC) and facilitated transport for mother and child to Nertiti Town.

At the SC in Nertiti, Asha said she did not know if her child would have survived had she not been referred there by Tearfund Nutrition team. She added that she had lost contact with her relatives at home after the village was burnt down by armed troops and everybody fled in different directions. She hoped to complete nursing her child at the Tearfund OTP Centre in North IDP Camp after spending 20 days in the SC.

Asha is worried because she does not know what to do next for her children that remained behind in Guildo with a foster family. At the moment, she is grateful to Tearfund for rescuing the life of her child. She told the composer of this story that: *"When I brought my child here, she could not open her eyes because of the swelling around her face. But praise be to God for the healing He sent for my child. I am happy because Tearfund helped me a lot by assisting me with transport, free medicine, food at the SC and guidance on hygiene and family health"*.

***Borehole drilling in Abuhadeed:***

