



**PERFORMANCE REPORT
Annual Report (Oct 1, 2011 – Sept 30, 2012)**

Catholic Relief Services, United States Conference of Catholic Bishops

Headquarters Contact: Paul Rebman, Public Donor Liaison 228 W. Lexington St Baltimore, MD 21201-3413 Telephone: +1 (410) 951-7364 E-mail: paul.rebman@crs.org Fax: (410) 234-3189	Field Contact: Andrew Rosauer, County Representative CRS South Sudan Juba, South Sudan Email: andrew.rosauer@crs.org Phone: +249 955 144 888
--	--

USAID/OFDA Agreement:	DFD-G-00-09-00147-00
Program Title:	Reintegration Assistance for Returnees in Central Equatoria, Eastern Equatoria, Jonglei and Upper Nile States
Country/Region:	South Sudan–Eastern Equatoria, Central Equatoria, Jonglei and Upper Nile States
Program Period:	51 Months
Start period and end dates:	May 1, 2009 – July 31, 2013
Reporting Period:	Annual Report, Oct 1, 2011 – Sept 30, 2012

Program Information, Indicators, and Achievements To-Date by Sector, Objective, and Indicator

Agriculture and Livelihoods Sector			
Objective 1.0	Women and youth have a sustainable livelihood through agricultural production		
	<i>Target</i>	<i>Target</i>	<i>Achieved total</i>
# of Total Beneficiaries Targeted	10,000 individual beneficiaries targeted (at an estimated 5 persons per household)	10,000	9,795
# of IDP/Returnee Beneficiaries Targeted	7,000 IDP/Returnee individuals targeted (at an estimated 5 persons per household)	7,000	7,333
Geographical Areas	Central Equatoria State and Upper Nile State		
Sub-Sector Name	Seed Systems and Agricultural Inputs*		
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved total</i>
Indicator 1a	(Projected) increase in number of months of food self-sufficiency due to distributed seed systems/agricultural input for beneficiary families	6 Months	Average Two Months
Indicator 1b	Number of people (sellers and seed recipients) benefitting from seed systems/agricultural input activities	10,000	9,803**

**This is for the first seed and tool distribution.*

*** Based on average household size of five people per household*

Major Achievements in Agriculture and Livelihoods Sector this Quarter

- Conducted seed and tool fair for Hai al Salam and Watajwok in Malakal. Fair also conducted at Juba County
- Seeds distributed based on needs assessment included maize, okra, sorghum, kudra, tomato, groundnuts
- Tools distributed include hoe, sickle, axe, fork hoe and rake
- 73% of households participated in fair were female headed households
- Majority of exit surveys showed beneficiaries were satisfied with the timing and the items available at the seed and tool fair
- Selected vendors based on quality (certified, germination tested seed) and the capacity to supply the quantities demanded
- Beneficiaries used voucher amount for buying seeds and tools by their choice
- Each voucher had a code which was tracked according to the beneficiary and the vendor for added security

Challenges/Constraints in the Agriculture and Livelihoods Sector

- Insecurity from across the river and threats within Malakal delayed the seed and tool fair for two weeks
- Although the two firms with both tools and seeds supplied some cereals, it was unfortunate that more variety was unavailable in Juba to provide a wider choice

Economic Recovery and Market Systems (ERMS) Sector				
Objective 2.0	Returnee households through participation in the Savings and Internal Lending Community (SILC) training program strengthen their capacity to withstand economic shocks.			
	<i>Target</i>	<i>Achieved till September 12</i>	<i>Achieved total</i>	
# of Total Beneficiaries Targeted	2,400 Individual beneficiaries targeted	253	253	
# of IDP/Returnee Beneficiaries Targeted	1,200 IDP/Returnee individuals targeted	150	150	
Geographical Areas	Central Equatoria State and Upper Nile State			
Sub-Sector Name	Micro-Credit			
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>
Indicator 2a	Number of individuals/Small Micro-enterprises (SMEs) receiving loans	2,400	50	50
Indicator 2b	Number and percent of micro-credit loan installments repaid according to schedule	100%	100%	100%

Major Achievements in the Economic Recovery and Market Systems (ERMS) Sector

- During field visits in Juba and Malakal, SILC members shared that they have benefited from SILC in multiple ways, including:
 - Become acquainted on a personal level with community members, which they may not interact with normally, for example those from a different tribe or who are new to the community (IDPs or returnees).
 - Solidarity amongst SILC members creates a sense of community and willingness to help one another
 - Growth and confidence due to self-empowerment
 - Use of loan to strengthen small businesses, and in some cases double daily profit
 - Ability to alleviate household shocks such as, when a child is sick or a family member dies
 - Ability to assist husband in supporting large families
- Loan fund utilization in Juba is 45%, meaning almost half of the money saved is lent out, while in Malakal it is 24%.
- Juba has a predicted return on savings of 7%, which may increase once all loans are repaid.
- As of September 2012, there have been no reported defaults on loan repayment.
- Interest in SILC has led to two visits from USAID/OFDA officials and U.S. Congressional Representatives to interview SILC members.
- The project has brought together multi-ethnic groups from host communities, returnees and IDPs for a common purpose and has broken down divisions between them.
- Around 90% of the Juba and Malakal groups are composed of women



Charti Atim, a Juba resident, was doing hard labor to earn money. Through SILC she was able to take a loan to start a fruit business, which is less strenuous, enabled her to earn more money and lessened financial dependence on her husband.

Challenges/Constraints in the Economic Recovery and Market Systems (ERMS) Sector

- Increasing insecurity in Juba, particularly the areas where the project is operating, is a major constraint for project activities. SILC groups have taken extra precautions to safeguard their money. SILC groups have been changing meeting locations, in order not to attract attention. The share outs are held in private and secure locations, so that group members are protected when money is returned to them.
- The distance between Juba and Upper Nile state makes it difficult to monitor and assess activities in Malakal on a regular basis. The implementing partner has also faced difficulties with hiring qualified staff. The periodic absence of field agents and their inability to mobilize the community effectively has hampered the organization of SILC group meetings.
- The introduction and acceptance of SILC can take time in communities that have been used to hand outs. However in Juba, the community has seen the benefits of SILC and has begun to request the Field Agents for their assistance in forming new groups.

Health Sector¹				
Objective 3.0	Target communities have increased access to quality health care			
	<i>Target</i>	<i>Achieved till September , 2012</i>		<i>Achieved total</i>
# of Total Beneficiaries Targeted	40,000 Individual beneficiaries targeted	90,404		128,775
# of IDP/Returnee Beneficiaries Targeted	10,000 Returnee individuals targeted	8951		8951
Geographical Areas	Eastern Equatoria State and Jonglei State			
Sub-Sector Name	Health Education/Behavior Change			
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>
Indicator 3a	Number of community members who have received target health education messages	3,800	7,440	7,440
Indicator 3b	Number and percent of community members undertaking target health education message practices	3,230 (85%)	TBD	TBD
Sub-Sector Name	Health Systems and General Health			
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>
Indicator 3c	Number of functioning primary health care centers and/or community health programs supported or rehabilitated	23	15	15 ²
Indicator 3d	Number of health care providers trained (by type of training and type of health care provider)	100	180 ³	215
Indicator 3e	Number and percent of health facilities submitting weekly surveillance reports	19 (83%)	15 (78%)	15 (78%)
Sub-Sector Name	Medical Commodities & Pharmaceuticals			
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>
Indicator 3f	Number of medical kits, equipment and consumables distributed (by type)	23	21	21
Indicator 3g	Number of people trained in the use and disposal of medical equipment and consumables	75	0	50

¹ CDoT received a No Cost Extension to finalize project activities under the 2011-2012 OFDA project through June 30th, 2012

² CDoT closed out the project. They received a no-cost extension through the end of June 2012. 6 centers run by CDoT also closed by June, 2012. Total centers run by SMC are 15

³ 8 SMC staff members in Bor trained on malaria diagnosis and 100 women trained on EMOC, conducted refresher training on CHW/MCHWs, TBAs and EPI vaccination for 51 SMC staff in Bor and Duk Counties while 21 CDOT staffs trained in Pharmaceutical Management.

Table 1: Health Services and Treatment for Target Illnesses stratified by County, 1 October 2011 – 30 September 2012

Disease or Condition	Oct-Dec	Jan-Mar	Apr-June	July-Sept	TOTAL
Malaria	10,497	8,702	4,006	5,111	28,316
Typhoid	248	193	-	-	441
Acute Diarrhea	3,009	2,010	1,850	1,412	8,281
Malnutrition/Anemia	1,032	903	1,225	628	3,788
Wound Care	1,239	620	528	333	2,720
Acute Respiratory Infection	8,339	6,554	3,989	2,678	21,560
STD/Genito-Urinary Tract Infection	1,304	N/A	N/A	N/A	1,304
Total Patients Treated (target illness)	25,668	18,982	11,598	10,162	66,410
Total Patients Treated (all conditions)	25,668	18,982	20,279	25,475	90,404

Table 2: EPI and ANC data stratified by County, 1 October 2011 – 30 September 2012

Maternal & Child Health Indicators	Oct-Dec	Jan-Mar	April-June	July-Sept	Total
Children <5 yrs treated for diarrhea with ORT and zinc	1,733	1,180	492	808	4,213
Children <5 yrs received Vitamin A supplement	0	0	0	0	0 ^d
Children <3 yrs received 3 rd DPT/Polio Vaccine	284	1,101	1,427	488	3,300
Children <1 yr received Measles Vaccine	287	1,637	1,276	419	3,619
Women (15-40 yrs) received TTR Vaccine	159	400	1,018	658	2,235
Pregnant women who attended 2+ ANC visits	170	314	927	244	1,655
Live births at health facilities	169	54	N/A	N/A	223
Births at health facilities with complications	0	0	0	0	0
Births resulting in deaths at health facilities	0	0	0	0	0

Major Achievements in the Health Sector

- SMC is implementing this project in three counties; Bor, Duk and Magwi. Bor and Duk counties have 300,000 residents approximately, and Magwi county has 340,000 residents approximately. Total target was 40,000, however, during last 12 months, SMC and CDoT provided treatment services to 90,404. Most patients visited health facilities with most common illness as Malaria, acute respiratory infections and diarrhea.
- Despite of logistical challenges due to rain and also continued insecurity in Jonglei State, SMC continued to provide health services through all health facilities.
- Managed to integrate project vaccination activities with the distribution of mosquito nets through the support of Caritas Australia. SMC distributed 4,523 mosquito nets to children under five and pregnant women in Duk and Bor Counties.
- CDOT completed the renovation of OPD Lab in Nimule PHCC. SMC completed construction of permanent PHCU structures (Panwel PHCU in Bor, and Padiet PHCU in Duk), SMC also enabled full operation of Loa Mission PHCC outpatient department and laboratory
- CDoT completed training on pharmaceutical management for prescribers and dispensers from all CDoT health facilities and government health facilities in Magwi County.

- SMC successfully conducted refresher trainings for CHW/MCHWs, TBAs, and EPI vaccinators in Bor and Duk County. The training covered prevention and treatment of common diseases, wound care, registering and reporting.

Challenges/Constraints in the Health Sectors

- Escalation of internal conflict in Jonglei state prevented target beneficiaries from accessing the health centers due to the insecurity, especially the fear of attacks. This also delayed the implementation of vaccination campaigns and limited routine outreach activities.
- Lack of reliable water supply continues to affect most of the health facilities.
- The rainy season delayed delivery of medical and other supplies to the health facilities and hampered provision of comprehensive health services. Floods damaged roads and adversely affected vaccination activities.

Water, Sanitation and Hygiene (WASH) Sector-Annual Report 2011-2012				
Objective 4.0	Target communities have increased access to safe water sources and sanitation facilities			
	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>	
# of Total Beneficiaries Targeted	60,000 Individual beneficiaries targeted	4500	49,500	
# of IDP/Returnee Beneficiaries Targeted	30,000 IDP/Returnee individuals targeted	1800	20,850	
Geographical Areas	Central Equatoria, Eastern Equatoria and Jonglei States			
Sub-Sector Name	Hygiene Promotion / Behaviors			
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>
Indicator 4a	Percent of target population demonstrating good hand-washing techniques	100%	12%	84%
Indicator 4b	Percent of target population demonstrating correct water usage and storage	100%	15%	87%
Indicator 4c	Number and percent of clean water points functioning three months after completion	105	5	86
Sub-Sector Name	Sanitation			
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>
Indicator 4d	Number and percent of household latrines completed that are clean and in use in compliance with Sphere Standards	5,500	1000	4000 (72.7%)
Indicator 4e	Number and percent of household hand-washing facilities completed and in use	5,500	500	3,500 (63.6%)
Indicator 4f	Number and percent of households	5,500	1000	40,000

	disposing of solid waste appropriately			(72.7%)
Sub-Sector Name	Water Supply			
<i>Indicator No.</i>	<i>Indicator Description</i>	<i>Target</i>	<i>Achieved till September, 2012</i>	<i>Achieved total</i>
Indicator 4g	Number and percent of household water supplies with 0 coliform bacteria per 100 ml	105 and 100%	100	681
Indicator 4h	Average water usage of target populations in liters per person per day to and after interventions	20	20	20
Indicator 4i	Number and percent of water points with measurable chlorine residual exceeding 0.2 mg/l	105	5	86
Indicator 4j	Number of geophysical surveys conducted	50	7	88
Indicator 4k	Number of boreholes tested for acceptable water quality test	105	5	86
Indicator 4l	Number of household water samples tested	330	100	548
Indicator 4m	Number of water source committees formed	105	5	86
Indicator 4n	Number of people trained as hand pump mechanics	330	25	286

Major Achievements in the WASH Sector

- Completed major rehabilitation of 10 broken boreholes in Aruu Junction Payam, Juba County in Central Equatoria State.
- Construction of four VIP latrines in Juba County, Magwi County and Bor County reached roofing level.
- Conducted Geo-Physical survey for 7 sites for drilling of remaining boreholes in Juba County.
- Conducted household water testing for 100 Households in Juba and Bor Counties.
- Formed and trained 5 Water Management Committees for the 5 rehabilitated Boreholes in Juba County.
- Completed hygiene and sanitation follow up for replication for Arborloo latrines in 345 Households in Bor County and 276 Households in Juba County.
- Drilling and Installation of 38 Boreholes in Bor and Magwi Counties.
- Constructed 500 Household latrines in Magwi County
- Formation and training of 48 Water Management Committees in Bor, Magwi and Juba Counties.
- Formation and training of 96 Village Hand Pump mechanics for borehole maintenance in Juba, Magwi and Bor Counties.
- PHAST training of 36 Community Hygiene Promoters in Bor, Magwi and Juba Counties

Challenges/Constraints in the WASH Sector

- Heavy rainfall delayed implementation of the program and made roads access impossible
- Insecurity due to internal conflicts in some parts of Bor and Magwi at times hinders project progress
- After rainy season in 2011, poor road conditions in Magwi affected in mobility of rigs and compressors