



**ANNUAL REPORT (1 January, 2012 to 31 December, 2012)**

<b>Catholic Relief Services, United States Conference of Catholic Bishops</b>	
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**USAID/OFDA Agreement:** No. AID-OFDA-A-11-00005  
**Program Title:** Khartoum and White Nile Stranded Returnees Emergency Response Project (*formerly known as: CRS Referendum Emergency Preparedness and Response Project*)  
**Country/Region:** Sudan—Khartoum and White Nile States  
**Program Period:** 27 Months  
**Start period and end dates:** February 11, 2011 – May 10, 2013  
**Reporting Period:** January 1, 2012 – December 31, 2012

<b>Objective:</b>	<b>Humanitarian agencies effectively and promptly respond to North-South separation related emergencies in Khartoum and White Nile States</b>
Budget Annual Period: <b>(Jan – Dec 2012)</b>	Amount Expended: <b>\$44,543</b>
Cumulative Expenditure to Date: <b>\$ 115,108</b>	Balance: <b>\$553,837</b>
Number of Beneficiaries Targeted:	38,310 IDPs (6,385 households), 28,658 IDPs in Khartoum and 9,652 IDPs in White Nile
Number of IDP Beneficiaries Targeted:*	38,310 IDPs (as specified above)
Number of Beneficiaries Reached:	0

### ***Executive Summary***

The “Khartoum and White Nile Stranded Returnees Emergency Response Project”, formally known as the “CRS Referendum Emergency Preparedness and Response Project”, originally a one year project, was extended through an Award Modification to become a 27 month project (February 11, 2011 – May 10, 2013), with the overall goal of assisting humanitarian agencies to effectively and promptly respond to North-South separation related emergencies in Khartoum and White Nile States through the provision of needed resources to organizations already on the ground who have a history of working closely with the affected communities. To do this CRS is partnering with 3 organizations (two national and one international) to provide humanitarian assistance in the sectors of shelter, health, WASH and protection for North-South separation affected northern and southern returnees in Khartoum and White Nile States.

Through sub grants provided by CRS the national NGO, National Development for Development and Services (NODS), will be supporting southern returnees stranded at 13 departure points around Khartoum with WASH and protection assistance, while the NNGO Sub-Saharan International Development Organization (SIDO) will assist the same population with health aid through mobile clinics. In White Nile State, the INGO, Adventist Development and Relief Agency (ADRA), will be supporting northern returnees who have become stranded while transiting through White Nile State from South Sudan with shelter and NFI assistance. Implementation of all sub-grantee activities is contingent on the occurrence of specified triggers in relation to consequences resulting from referendum results and North-South separation.

In August 2012, it was determined by CRS and its partners that the project specified triggers had been met to authorize commencement of emergency activities. Following this determination, all three partners developed rapid needs assessment informed proposals which were reviewed/approved by CRS and then submitted to OFDA for final approval. In November 2012, final approval from OFDA HQ was received for all three projects and CRS signed sub-grant agreements with NODS and ADRA with 1<sup>st</sup> December 2012 project start dates. Currently, NODS is in the process of organizing a joint WASH needs assessment with the Government of Sudan’s Water and Environmental Sanitation Program (WES) in the 13 departure locations and ADRA has initiated project start up activities for its shelter project in White Nile.

For health interventions in Khartoum, CRS is assisting SIDO in coordinating its efforts with the World Health Organization (WHO) and the State Ministry of Health (SMoH) to ensure there is no duplication of efforts. Given that SIDO’s CRS/OFDA proposal review process took some time, WHO had to move forward in partnering with other organizations which are now providing mobile health services in many of SIDO’s pre-determined target locations. Thus, WHO and the SMoH are in the process of determining gap locations where SIDO can implement its health activities with a target start date in mid-January 2013.

### **Overall Project Objectives and Activities**

The above mentioned goal of this program will be achieved through the following program strategy and four sector related activity objectives for WASH, Shelter/Settlements, Health and Protection. It should be noted that the sector activities, figures and targets are the best estimates at the time of project design and based on CRS knowledge of the perceived needs at the time of proposal development as well as previous experience working in Sudan. However, this project responds to actual needs that arise following the occurrence of project specified triggers and

assessed as part of the sub-grants disbursement process. Therefore it is expected that actual activities implemented, targets and achievements may significantly vary during the project implementation.

## **I. Program Strategy**

This project will reach its goal of, “Humanitarian agencies effectively and promptly respond to North-South separation related emergencies in Khartoum and White Nile States” by providing needed resources to organizations that are already on the ground and have a history of working closely with the affected communities.

To do this CRS will implement closely intertwined strategies through Cooperative Agreements with OFDA of a) Building the capacity of implementing partners (IPs) b) Facilitating the signing of MOUs and PCAs with relevant UN agencies for the sourcing of emergency response materials, through core pipelines, when a crisis hits and c) Working with local partners in Khartoum and White Nile to facilitate quick response to emergencies while maintaining acceptable levels of accountability.

Throughout the period of emergency response activities to both South and North prospective returnees, CRS will continue to build the capacity of implementing partner organizations to respond to immediate emergency needs in the different sectors. CRS will ensure that possible sub awardee implementing partners have been properly vetted through conducting capacity assessments, verifying with CVHW on whether they have valid NGO registration certificates and are OFAC compliant.

Emergency activities will commence as per the approved trigger matrix, which indicates the triggers required to signal a need for responses to take place. Project related activities will be implemented through CRS’ local partners, which were identified and approved in the proposal’s second Award Modification, and through sub-partner proposals which must be approved by OFDA prior to implementation. Once emergency activities are approved by OFDA, CRS will work with the sub-awardee implementing partner(s) to develop a response plan and to ensure the proposed activities and budget is reasonable and essential needs/gaps analysis have been conducted. CRS will also work with various key sector players including UNICEF, UNHCR, IOM, UNOPS, WHO, WES, HAC and CVHW to ensure coordination and/or complementarity in programming to avoid overlap and duplication.

## **II. Sector Activity Objectives**

***e.1 Water, Sanitation and Hygiene (WASH):*** Improved access to water, sanitation and hygiene facilities among North-South separation affected southern returnee populations in Khartoum.

**Beneficiaries:** 28,638 Beneficiaries (4773 households) **Activities include:**

***e.1.a Hygiene Promotion/Behaviors:*** Hygiene promotion activities will target stranded returnee populations through hygiene promotion programs that address the primary hygiene issues in the communities. Campaigns will target safe excretion disposal, maintenance of latrine toilets, hand washing with soap, washing hands when handling food and before eating, and the need for putting

household waste into a refuse pit. Hygiene promotion activities will not support ongoing hygiene campaign activities unrelated to this population.

***e.1.b Sanitation:*** This project will prioritize the construction of emergency latrines together with hygiene promotion and the construction of refuse pits for returnee families living in the open area departure points. In Khartoum, 28,638 beneficiaries will benefit from the construction of shared family emergency latrines, which will be selected through joint needs assessment at the 13 departure points between UNICEF, CVHW, CRS and its NODS. CRS and NODS will supply the latrine slabs and superstructure materials, but it will be the responsibility of the beneficiary families to dig the pit of the latrine and building the superstructure. Additionally, digging and fencing of communal refuse pits for solid waste and garbage disposal in Khartoum will be supported to improve environmental sanitation.

***e.1.c. Water Supply:*** CRS and NODS will ensure access to adequate water supplies for drinking, cooking and personal hygiene in the 13 most needy departure points where Southern Sudanese IDPs trying to return to South Sudan have been stranded now for over a year and a half. The water sub sector activities will be undertaken in collaboration with local authorities, the government Water and Environmental Sanitation department (WES) and UNICEF with particular attention paid to incorporating views and concerns of women and will be informed through needs assessments to be carried out during the acute emergency phase by NODS and CRS jointly with UNICEF, WES and CVHW.

***e.2 Shelter and Settlements:*** Returnee populations in White Nile have improved access to humanitarian shelters and basic household items. **Activities include:**

***e.2.a Emergency/Transitional Shelter:*** In the White Nile, 333 temporary wood shelters (Kornoks) will be constructed to house beneficiaries who have become stranded while transiting through White Nile State from South Sudan. The technical design for the shelters was provided in the project proposal and approved by OFDA. The project will provide shelter materials and the technical guidance of constructing the shelters while beneficiaries provide the labor. Priority will be given to vulnerable population groups during allocation of shelters and to ensure safety of shelter construction locations, all shelter activities will be coordinated with CVHW and locality engineers. Additionally, each household will be provided with information about how to reduce the risk of fires in their homes. The assessment, verification and distribution of NFI materials will be organized by ADRA staff, in close collaboration with UNHCR/UNOPS, and supported by volunteers in White Nile all of whom will be properly trained on conducting NFI distributions during the initial phase of the project.

***e.3 Health:*** To respond to health needs of Khartoum returnee populations affected by referendum and separation related emergencies.

**Beneficiaries:** 26,658 beneficiaries (4773 households). **Activities include:**

***e.3.a. Communicable Diseases:*** Mobile and static health clinics will be utilized to assist in the prevention of ARIs, malaria, diarrheal disease, pneumonia and measles and to assist with emergency related illnesses or conditions. WHO will support two mobile health clinics per month

to departure points to service sites that have limited to no access to existing health facilities. CRS with the implementing partner, SIDO, WHO and Khartoum SMOH will work out a system to ensure that beneficiaries referred to secondary health facilities have access to the recommended services. Mobile clinics under this project will run only during the period specified in the approved sub-partner proposal and each clinic will be responsible for providing curative services for non-complicated communicable and non-communicable ailments, and antenatal services for pregnant women. The clinics will also provide EPI and additional vaccinations for children and pregnant women as well as IMCI (integrated management of childhood illnesses) kits for children under 5.

In the event of an outbreak of acute watery diarrhea, meningitis or other water borne or communicable diseases, immediate action will be taken to isolate and control the spread of the infection while at the same time providing case by case management and vaccines for prevention. Women and children will be given priority in the provision of preventative vaccines and all efforts will be coordinated with WHO and UNICEF. All medical supplies and drugs for the mobile clinics and will be sourced through UNICEF and WHO.

***e.3.b. Health Education/Behavior Change:*** The project will concentrate on promoting behaviors that in emergencies would reduce the caseload of casualties, contain the disease, improve case finding and detection, and improve seeking of timely medical assistance in the affected communities. During the emergency response activities, SIDO will provide information to affected communities on health facility locations for different medical services. SIDO and its previously trained community health promoters will coordinate all health education and awareness activities with WHO and the State Ministry of Health Departments at managed mobile clinics and operating static health facilities in the identified target areas of Khartoum.

***e.3.c. Non-communicable Diseases:*** In the event of injuries inflicted as a result of natural or manmade disasters, CRS will coordinate with WHO to identify health centers in Khartoum that have the capacity to handle mass casualties from effects of the disaster that include but are not limited to floods, fires and violent clashes. CRS and SIDO will coordinate with WHO, UNICEF, and the Federal Ministry of Health for the provision and procurement of emergency surgical kits, intensive care supplies for second and third degree burns, and drugs for managing psychosomatic illnesses. In all cases, facilities will obtain medicines from WHO and UNICEF pipelines.

***e.4 Protection:*** To respond to the needs of vulnerable populations affected by referendum and separation related emergencies through self-help group mechanisms in the IDP camp areas of Khartoum.

**Beneficiaries:** 26,658 beneficiaries (all stranded women, children and men). **Activities include:**

***e.4.a. Psychosocial Services:*** To address existing protection needs amongst the beneficiaries, CRS will look to build upon existing networks to mobilize social responsibility initiatives to protect the most vulnerable members of the stranded returnee populations currently based at different departure points in Khartoum. These objectives will be reached through the provision of trainings on protection issues, awareness events and referral services for psychosocial services by UNHCR to volunteers and NODS staff, creation of volunteer returnee committees which will provide a forum for which women can express concerns, advocate for their needs and the needs of their

communities and request emergency assistance, and the provision of emergency education classes which will offer older children with an opportunity to manage their free time more pro-actively and positively.

## **Activities and Achievements throughout the Reporting Period:**

### **I. Program Strategy**

On 29<sup>th</sup> of May 2012, an Award Modification was approved by OFDA shifting the title of the project from, “*CRS Referendum Emergency Preparedness and Response Project*”, to, “*Khartoum and White Nile Stranded Returnees Emergency Response Project*”. As per the modification, the trigger matrix was also modified stipulating that implementation of project activities shall only take place should specified triggers occur in relation to consequences resulting from referendum results and North-South separation. Additionally, the modification extended the estimated completion date from 11<sup>th</sup> February 2012 to 10<sup>th</sup> May 2013 and increased the Total Estimated and Obligated Amounts by \$137,883 from \$531,062 to \$668,945. Furthermore, the modified proposal indicated three partners who will be responsible for implementing project activities once the triggers are met, Adventist Development and Relief Agency (ADRA) in White Nile and National Development for Development and Services (NODS) and Sub-Saharan International Development Organization (SIDO) in Khartoum.

In August 2012, CRS and its partners determined that the specified triggers had occurred in relation to the stranded South Sudan returnees in Khartoum and North Sudan returnees in White Nile. Per this distinction, all three partners conducted assessments to determine the extent of the target populations’ needs and then drafted proposals for CRS’s review and approval. In the midst of this process, both areas were severely affected by seasonal flooding, which bolstered the needs of the target beneficiaries, and greatly informed development of proposed interventions. Per the request of OFDA Khartoum, partners’ original proposals were modified to heavily shift the focus towards flood response activities, which were not in the original proposal design but were viewed as the greatest needs on the ground to date. Once the partner proposals had been vetted by CRS Sudan they were forwarded to OFDA Khartoum for review and approval before being sent to OFDA HQ for final review and approval.

In the midst of the sub-partner proposal review process CRS was requested by OFDA HQ to submit a second modification due to the discovery of existing contradictory language in the technical narrative of the proposal document which states that CRS will submit a sub-award request to OFDA for pre-approval before commencing activities and also that activities will commence once the triggers are activated. While CRS Sudan initially operated under the latter of the two distinctions, a decision was taken by OFDA HQ that the former is the most appropriate to follow for this type of project and those additional sub-awardee proposal reviews are required before activity commencement. Thus, a second modification process commenced to clarify the contradiction and was approved on 5<sup>th</sup> November 2012. One week later the three partner proposals were also approved for implementation. Since then, sub-agreements have been signed with ADRA and NOSD with project start dates of 1<sup>st</sup> December 2012 and both organizations are in the midst of project start up activities. As discussed in the Executive Summary, SIDO is currently in the process of coordinating its efforts with the World Health Organization and the Ministry of Health

to ensure there is no duplication of efforts as a number of their targeted locations are already being served by other agencies since the Award Modification process took some time to finalize.

## **II. Progress on Performance Indicators**

As mentioned in the Executive Summary and Program Strategy sections of this report, given that approval for the three sub-partner projects was recently granted in mid-November of this year with start dates for two organizations of 1<sup>st</sup> December 2012 and with negotiations for the start date of the third project, it is not possible to report on performance indicator progress at this time. Updates on the project's progress will be provided in the next quarterly report for January – March 2013.

## **III. Constraints**

- Timely approval for the three project proposals which were submitted at the end August – beginning of September 2012 following the occurrence of specified project triggers, was hindered due to the existence of contradictory language included in the technical narrative of the proposal document as discussed above. Thus, the approval process for the submitted proposals took over 2 months with approvals received in mid-November 2012. Due to this delay, WHO and the Ministry of Health moved ahead and partnered with other national NGOs to conduct mobile health clinics at locations targeted by SIDO in their proposal. Thus, SIDO's project start date has been delayed as they work to properly coordinate their efforts with these organizations and agencies and to negotiate in-kind support from WHO for the mobile health clinics.
- The request by OFDA Khartoum for inclusion of flood response activities into the partner's proposals under this project greatly confused the proposal development and review process. While partners originally developed their project activities and proposals per the agreed upon and approved activities in the Khartoum and White Nile Stranded Returnees Emergency Response Project proposal, the proposals were reviewed and commented on by OFDA Khartoum as if they were strictly flood response projects. Thus, partners were requested to decrease the timeframe of their projects and remove specific activities which were all pre-approved by OFDA in the overall project proposal. This process was especially challenging for our national partners who developed their proposals based on the needs they saw on the ground in Khartoum, yet were asked to revise their proposals in compliance with flood response criteria which wasn't necessarily corresponding with the observed needs.

## **IV. Cost Effectiveness**

As stated earlier, the project is still in its initial phase of implementation as the three sub-partner's proposals were recently approved in mid-November 2012 with a 1<sup>st</sup> December 2012 start date. Thus, it is difficult to report on the cost effectiveness of the project at this time and more specifics will be provided in the 2013 annual report as well as through future quarterly reports.

## **V. Success Story**

Given that the project is still in its initial stages and its partner's projects were just approved at the beginning of December 2012, we do not have any success stories to provide at this time. Success stories will be provided in the 2013 annual report following implementation of partner's emergency response projects.